



Trading Name	
Contact Person	
Postal Address	
Phone Number	Fax Number
Email Address	Mobile Number

Do you wish to have these results interpreted with a pending or existing soil test? Y / N

### Life-Force Leaf Analysis Sample 1

<b>Crop</b>	<b>Block Name</b>	<b>Size</b>
<b>Sampling Date</b>	<b>Organic</b> Y / N	<b>Irrigated</b> Y / N

- Stage of growth**
- Seedling       Early Growth       Tillering       Mature
- Flowering       Fruit Grain Set       Fruit Filling       Other

Other description: .....

Crop symptoms (if applicable)	Date symptoms first observed
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- Where**       Older leaves       Young leaves       Terminal new growth

Further description: .....

#### Fertiliser information

Has the crop recently been sprayed with:      

Nutrients	Y / N	Fungicides	Y / N	Pesticides	Y / N
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When:      

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Further description: .....

- Environment / recent conditions**
- Drought       Extreme heat/cold       Disease
- Waterlogging       Limited sunlight       Pests

Further description: .....

### Life-Force Leaf Analysis Sample 2

<b>Crop</b>	<b>Block Name</b>	<b>Size</b>
<b>Sampling Date</b>	<b>Organic</b> Y / N	<b>Irrigated</b> Y / N

- Stage of growth**
- Seedling       Early Growth       Tillering       Mature
- Flowering       Fruit Grain Set       Fruit Filling       Other

Other description: .....

Crop symptoms (if applicable)	Date symptoms first observed
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- Where**       Older leaves       Young leaves       Terminal new growth

Further description: .....

#### Fertiliser information

Has the crop recently been sprayed with:      

Nutrients	Y / N	Fungicides	Y / N	Pesticides	Y / N
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When:      

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Further description: .....

- Environment / recent conditions**
- Drought       Extreme heat/cold       Disease
- Waterlogging       Limited sunlight       Pests

Further description: .....