

Accession No.

Entered into computer

**\$10.00 Service Fee (per specimen)**

Fee Paid by:  Check # \_\_\_\_\_  Cash

**INSECT IDENTIFICATION CENTER**

University of New Hampshire

Barton Hall B206

34 Sage Way

Durham, NH 03824-3544

Email: shyloh.favreau@unh.edu

Please see page 2 for instructions on how to submit a specimen.

**TO BE FILLED OUT BY SUBMITTER**

|                                                                                                                  |                                                                                  |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Collector:<br>Name _____<br>Address _____<br>City _____ State _____ Zip Code _____<br>Phone _____<br>Email _____ | Where Collected:<br>State _____<br>County _____<br>Town _____<br>Host/Site _____ |
| Date of Collection: _____                                                                                        |                                                                                  |
| Brief description of problem: _____<br>_____                                                                     |                                                                                  |

**TO BE COMPLETED BY CENTER PERSONNEL**

|                                                                                                                                                                                 |                                                                                                      |                                                                      |                                                                                                                                                  |                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| Source:<br><input type="checkbox"/> Homeowner<br><input type="checkbox"/> Ext. Educator/Forester<br><input type="checkbox"/> Grower/PCO<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Clinic<br><input type="checkbox"/> Mail<br><input type="checkbox"/> Digital | <input type="checkbox"/> Walk-in<br><input type="checkbox"/> Pick-up | Sample Stage and/or condition<br><input type="checkbox"/> Eggs<br><input type="checkbox"/> Immature<br><input type="checkbox"/> Damaged material | <input type="checkbox"/> Adult<br><input type="checkbox"/> Other<br><input type="checkbox"/> Pupa |
| Date In: _____                                                                                                                                                                  | <input type="checkbox"/> Collection Used                                                             |                                                                      |                                                                                                                                                  |                                                                                                   |
| Date Out: _____                                                                                                                                                                 | Family: _____                                                                                        |                                                                      |                                                                                                                                                  |                                                                                                   |
| Identification: _____                                                                                                                                                           |                                                                                                      |                                                                      |                                                                                                                                                  |                                                                                                   |
| Identifier: _____                                                                                                                                                               | Time Expended: _____                                                                                 | EPA Code: _____                                                      |                                                                                                                                                  |                                                                                                   |
| Comments and/or Recommendations:                                                                                                                                                |                                                                                                      |                                                                      |                                                                                                                                                  |                                                                                                   |



## INSTRUCTIONS For Submittal of Specimens

The *\$10.00 fee (per species)* and submission form must accompany the specimens or damaged material to be identified.

Please seek the advice of a medical professional if you believe that an insect is causing health problems for you or those in your care. For health safety reasons, the UNH Insect Identification Service cannot accept samples in cases involving microscopic (“invisible”) arthropods or biting/crawling sensations on the skin if submitted by private individuals. If you think you have insects in your body, please contact your primary care physician. Samples collected by a medical professional and submitted from the medical office directly, in either alcohol or as a slide with accompanying documentation, may be accepted at the discretion of the lab manager. Please do not submit floor sweepings, vacuum cleaner dirt/dust, or things of a similar nature. Exceptions: Ticks, suspected nits, lice, and other parasites visible to the naked eye and submitted in alcohol may be accepted.

*The UNH Insect Identification Lab does not test for tick-borne illnesses. If you need a tick tested for disease, please use [TickReport™](#)*

*Do not* send to the Plant Disease Diagnostic Laboratory or use their form for insects or their damage.

Dried insects are quite fragile and are easily broken, delaying or preventing accurate identification. Accurate identification is easiest when specimens are in good condition. *Do not* use adhesives such as tape. Dried specimens should be placed in a small box or other container, and loosely packed with facial tissue or cotton. If the container has crush-proof sides, it may be mailed in a manila or padded envelope. A plastic bag or non-rigid container should be placed in a larger box or padded envelope and surrounded by packing material. Specimens sent in envelopes not so protected will be damaged by automatic mail sorting and canceling machines.

Soft-bodied specimens, such as larvae should be placed in a fluid such as rubbing alcohol *diluted* 50% with water, and placed in a tightly sealed container that will not leak. *Do not* put soft-bodied specimens in water. Specimens may be sent loosely surrounded by alcohol-soaked facial tissue or cotton in a tightly-tied plastic bag or a vial with a tight lid taped shut to prevent leakage. The bag or vial should be packed in a larger box, with the specimen container surrounded by packing material.

**Please make checks payable to: *University of New Hampshire (UNH)*.**