

University of California Turf Disease Sample Information Sheet



Date: _____

Contact Information and Course Location:

name _____
company _____
address _____
city, state, zip _____
phone _____ fax _____ mobile _____ e-mail _____

Sample Information

Turf Species and Variety: Annual Bluegrass Bentgrass Bermudagrass
 Kikuyugrass Fescue Ryegrass other: _____

Location: green tee fairway rough other: _____

Age of Turf: mature newly seeded newly sodded newly sprigged

Mowing Height: _____ inches

Irrigation Frequency: _____ times per week _____ inches of water

Weather for last 5 days (max/min air temperatures, soil temp., humidity, precipitation): _____

Soil Salinity (TDS-4 reading): _____

Date and Amount of Last two Fertility Applications: _____

Symptoms

Type (check all that apply)

blight greasy chlorotic other: _____
 dieback water soaked wilted _____
 leaf spot matted thin stunted _____

Color (check all that apply)

black gray purple white
 bronze green red yellow
 brown orange tan other: _____

Pattern (check all that apply)

spots patches irregular streaks
 circles rings uniform other: _____

Specific areas (check all that apply)

wet spots high traffic full sun edges
 dry spots excess thatch low areas slopes
 compacted soil shade high areas other: _____

Typical size: _____ in/ft to _____ in/ft

When did symptoms start? _____

Distribution: localized random widespread

Signs (hand lens or microscope)

acervuli ETRI root rot
 crown rot light spores sporodochia
 dark spores mycelia other: _____

Previous Control

Fungicides applied in the last two weeks: _____

Other chemicals applied in the last two weeks: _____