



Local Food
Healthy Forests
Clean Water
Better Ground

Soil Sample Information Form

LAB USE ONLY

CONTACT INFORMATION

Name		
Home Address		
Site Address Where Sampled (if different than above)		
City	State WA	Zip
Phone	E-mail Address	

Please print clearly and complete entire form! Results will be e-mailed in about 3 weeks.
 Please check this box if you DO NOT want to be added to KCD's e-mail list.

KCD USE ONLY Submitted to A&L on ___/___/___

King Conservation District
 800 SW 39th St, Suite 150
 Renton WA 98057
 425-282-1900 soiltests@kingcd.org

Office Hours: Monday-Friday 8:30am to 5:00pm

Each resident in King Conservation District's service area is eligible for up to five free soil tests, **lifetime per parcel number**. Additional tests are **\$25 each**. Deliver or mail soil samples to our office (address above). **If you need to submit more than 5 soil samples, please use an additional form.** Please see our website or contact our office to determine your eligibility. kingcd.org

Please label each sample with your **lastname** and **up to five characters**. Each sample must be **3 POUNDS**. More than 4 pounds may cause problems with handling, less than 3 pounds may cause problems getting an accurate analysis.

Graphics Report Email Report soiltests@kingcd.org

Recommendations required LBS PER ACRE LBS PER 1,000 SQ FEET

SAMPLE ID (up to 5 characters)	TEST PACKAGE (office use only)	Vegetable, perennials, pasture, raised bed, etc.	DETAILED DESCRIPTION (more detailed information information about what you are growing)	Please check one		Sample Depth
				Established	Pre-Plant	
-----				<input type="checkbox"/>	<input type="checkbox"/>	0-6"
-----				<input type="checkbox"/>	<input type="checkbox"/>	0-6"
-----				<input type="checkbox"/>	<input type="checkbox"/>	0-6"
-----				<input type="checkbox"/>	<input type="checkbox"/>	0-6"
-----				<input type="checkbox"/>	<input type="checkbox"/>	0-6"

Please let us know how you found out about KCD's Soil Testing Program: _____