



Sarawak Forest Tree Seed Bank
SARAWAK FORESTRY Corporation

Pests and Diseases Diagnosis Request Form

- ENTO (For insect problems)
- PATH (For diseases or disorders)

Reference No.:

Please fill in this form as far as possible as this will greatly improve our ability to provide a diagnosis of the problem.

CLIENT DETAILS

Enquirer

Name: _____
Title: _____
Contact Number: _____
Email: _____
Job Position: _____

Company

Name: _____
Address: _____

LPF No.: _____

PROBLEM DETAILS

Tree Species (scientific name if known): _____

Age: _____ Height: _____ DBH: _____ Planting date: _____

Description of symptoms (please attach photographs if possible): _____

Severity of the damage (Please tick): Low Medium High

Development of symptom / damage: All at once Progressive (slow) Progressive (fast)
(Please tick)

Date when first notice: _____

Any control / mitigation applied? Please elaborate: _____

When you have completed the form, please email or fax it to:

Sarawak Forest Tree Seed Bank

KM 20, Jalan Puncak Borneo

93250 Kuching, Sarawak, Malaysia

Tel: +6 082-626440

Fax: +6 082-626442

Email: princilla@sarawakforestry.com

erica@sarawakforestry.com