



FOREST HEALTH FIELD REPORT

Please complete ALL areas in this section.

Observer		Date	
Telephone (if non-DNR observer)		Email (if non-DNR observer)	
County		FTP Number	
Town	Range	Section	
Latitude D.D (E.G.45.717°)			
Longitude D.D (E.G.-85.123°)			
Ownership <input type="checkbox"/> State <input type="checkbox"/> Private <input type="checkbox"/> Federal <input type="checkbox"/> Other:			
IF NO PROBLEMS OBSERVED, CHECK THE FOLLOWING BOX, AND RETURN FORM TO THE ADDRESS BELOW. <input type="checkbox"/>			
Symptoms			
<input type="checkbox"/> Brooming	<input type="checkbox"/> Dieback	<input type="checkbox"/> Stunting	<input type="checkbox"/> Other Symptoms: _____
<input type="checkbox"/> Canker	<input type="checkbox"/> Dying	<input type="checkbox"/> Wilting	
<input type="checkbox"/> Dead	<input type="checkbox"/> Reddening	<input type="checkbox"/> Yellowing	
Signs			
<input type="checkbox"/> Holes in bark	<input type="checkbox"/> Defoliation	<input type="checkbox"/> Webbing	<input type="checkbox"/> Sawdust
Life Stages Observed			
<input type="checkbox"/> Eggs	<input type="checkbox"/> Adult insects	<input type="checkbox"/> Cocoons	
<input type="checkbox"/> Larvae	<input type="checkbox"/> Fungi	Name of pest (if known): _____	
Location			
<input type="checkbox"/> Bole	<input type="checkbox"/> Buds	<input type="checkbox"/> Foliage	<input type="checkbox"/> Leader
<input type="checkbox"/> Branches	<input type="checkbox"/> Flowers	<input type="checkbox"/> Fruits	<input type="checkbox"/> Roots
<input type="checkbox"/> Twigs			
Species Affected			
DBH (inches)			
Trees Affected			
<input type="checkbox"/> Single	<input type="checkbox"/> Scattered	<input type="checkbox"/> Pockets	<input type="checkbox"/> Entire Stand
Percent of Tree Affected (if applicable)			
Acres Affected (if applicable)			
Stand Type			
<input type="checkbox"/> Planted	<input type="checkbox"/> Seed	<input type="checkbox"/> Natural	<input type="checkbox"/> Roadside
<input type="checkbox"/> Ornamental			
Comments			

Return to:
HEALTH MONITORING SPECIALIST
DNR FOREST RESOURCES DIVISION
PO BOX 30452
LANSING MI 48909-7952

OR

FOREST PEST MGT SPECIALIST
DNR MARQUETTE OPER SERVICE CTR
1990 US-41 SOUTH
MARQUETTE MI 49855



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LANSING MI 48909-7952

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