INSECT SUBMISSION FORM: IDENTIFICATION

Send your insect specimen with this completed form to:

Pest Management Unit
Insect ID Lab
17 Godfrey Drive
Orono, ME 04473-3692

Contact Information:
James Dill, Pest Management Specialist
1-800-287-0279 (within Maine)
james.dill@maine.edu

How to submit an insect specimen for proper identification:

- All insects (excluding butterflies and moths) should be placed in a small leak-proof container with just enough rubbing alcohol to cover specimen for preservation.
- Butterflies and moths should be packed in tissue or cotton for best possible preservation.
- You can mail or drop off specimens at your local County Extension Office or at the Pest Management Unit's Insect ID Lab.
- IMPORTANT: Please do not submit floor sweepings, vacuum cleaner contents or specimens from the body (although ticks, suspected nits and lice will be accepted). Due to potential health risks to our diagnosticians, we CANNOT accept bodily fluids or other human debris. We are happy to work with a physician to identify any arthropod pest, but submissions of that nature MUST come directly from a physician.

Please Provide:
Your Name:___________________________________ Phone Number:_____________________________
Mailing Address:_________________________________________________________________________
Email Address:___________________________________________________________________________
Collection Date: ______________    Submission Date: ______________

Please provide the following information about your insect specimen:
Where was the insect found? (i.e. kitchen, yard, bathroom, etc.)____________________________________
What was the insect on? (i.e. animal, tomato, sink, etc.) __________________________________________
Approximately how many insects were found? ____________
Describe damage, if any? __________________________________________________________________
Additional Comments: ____________________________________________________________________
Do you have treatment preferences? __________________________________________________________
Do you have children or pets in the home? _______________
(If applicable) Submitted By: ___________________     ____________________
EDUCATOR      COUNTY

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