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**This report is authorized by law (7 U.S.C. 147a). While you are not required to respond, your cooperation is needed to make an accurate record of plant pest conditions.**

**OMB APPROVED**  
0579-0010  
EXP. DATE  
02/2017

**UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

**SPECIMENS FOR DETERMINATION**

**Instructions:** Type information requested. Block 1 – assign a number for each collection using your own numbering convention or use the following example by beginning with the year, followed by the collector's initials and the collector's number. Example: 14-JJD-001.

Pest Data Section – Complete Blocks 14, 15 and 16. Complete Items 17 and 18 if a trap was used.

**LOT NUMBER**

**PRIORITY**  
 URGENT  
 PROMPT  
 ROUTINE

1. COLLECTION NUMBER

2A. DATE - SUBMISSION  
MONTH DAY YEAR

2B. DATE - COLLECTION  
MONTH DAY YEAR

3. SUBMITTING AGENCY  
 State Cooperator  University  APHIS PPQ  
 Other:

4A. NAME OF SUBMITTER

4B. NAME OF COLLECTOR

5. ADDRESS OF SUBMITTER

6. TYPE OF PROPERTY (FARM, RESIDENCE, NURSERY, ETC.)

7. NAME AND ADDRESS OF PROPERTY OWNER

CITY COUNTY STATE

ZIP

EMAIL ADDRESS OF SUBMITTER

LATITUDE LONGITUDE

8. REASON FOR IDENTIFICATION ("X" all applicable items)

A.  Biological Control (Target Pest Name \_\_\_\_\_)

B.  Damaging Crops/Plants

C.  Suspected Pest of Regulatory Concern (Explain in REMARKS)

D.  Stored Product Pest

E.  Export Certification

F.  Targeted Survey (Pest Name \_\_\_\_\_)

G.  Smuggling Interdiction/Trade Compliance (SITC)

H.  Other (Explain in REMARKS)

9. IF PROMPT OR URGENT IDENTIFICATION IS REQUESTED, PLEASE PROVIDE A BRIEF EXPLANATION UNDER "REMARKS".

10. HOST INFORMATION  
NAME OF HOST (Scientific name and name of cultivar if appropriate)

11. QUANTITY OF HOST  
NUMBER OF ACRES/PLANTS  
Plant affected (insert figure and indicate)  
 Number:  
 Percent:

12. PLANT DISTRIBUTION  
 Limited  
 Scattered  
 Widespread

13. PLANT PARTS AFFECTED  
 Leaves, Upper Surface  Trunk/Bark  Bulbs, Tubers, Corms  Seeds  
 Leaves, Lower Surface  Branches  Buds  
 Petiole  Growing Tips  Flowers  
 Stem  Roots  Fruits or Nuts

14. PEST DISTRIBUTION  
 FEW  
 COMMON  
 ABUNDANT  
 EXTREME

15.  INSECTS  NEMATODES  MOLLUSKS

NUMBER SUBMITTED	LARVAE	PUPAE	ADULTS	CAST SKINS	EGGS	NYMPHS	JUVS.	CYSTS
ALIVE								
DEAD								

16. SAMPLING METHOD

17. TYPE OF TRAP AND LURE

18. TRAP NUMBER

19. REMARKS

**METHOD**  
 MORPHOLOGY  
 SYMPTOM  
 CULTURE  
 SEROLOGICAL  
 PCR  
 SEQUENCING

20. TENTATIVE DETERMINATION

DETERMINED BY

POSITION AND AFFILIATION

21. FINAL DETERMINATION AND NOTES (Not for Field Use)

**METHOD**  
 MORPHOLOGY  
 SYMPTOM  
 CULTURE  
 SEROLOGICAL  
 PCR  
 SEQUENCING

PRINT NAME (Person Making Final Determination)

DISPOSITION OF SPECIMEN/SAMPLE  
 Returned  Retained for Collection/Stored  Destroyed  Transferred to:

SIGNATURE

DATE

LAB CONFORMATION NUMBER

DATE RECEIVED

## INSTRUCTIONS

Use PPQ Form 391, Specimens for Determination, for domestic collections (warehouse inspections, local and individual collecting, special survey programs, export certification).

BLOCK	INSTRUCTIONS
1	<p>1. Assign a number for each collection using your own numbering convention or use the following example by beginning with the year, followed by the collector's initials and the collector's number.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p style="text-align: center;"><b>EXAMPLE</b>    In 2014, Brian K. Long collected his first specimen of the year for determination. His first collection number is 14-BLK-001</p> </div> <p>2. Enter the collection number</p>
2A-2B	Enter dates
3	Check block to indicate Agency submitting specimens for identification
4A	Enter name of submitter
4B	Enter name of collector
5	Enter address of submitter
6	Enter type of property specimen obtained from (farm, nursery, residence, etc.)
7	Enter name and address of property owner
8A-8H	Check all appropriate blocks
9	Leave Blank
10	Enter scientific name of host, if possible
11	Enter quantity of host and plants affected
12	Check block to indicate distribution of plant
13	Check appropriate blocks to indicate plant parts affected
14	Check block to indicate pest distribution
15	<input type="checkbox"/> Check appropriate block to indicate type of specimen <input type="checkbox"/> Enter number specimens submitted under appropriate column
16	Enter sampling method
17	Enter type of trap and lure
18	Enter trap number
19	Provide a brief explanation if Prompt or URGENT identification is requested
20	Enter a tentative determination and who made it
21	Leave blank

### Distribution of PPQ Form 391

Distribute PPQ Form 391 as follows:

1. Send Original along with the sample to your Area Identifier or for national confirmation.
2. Retain and file a copy for your records.