

McGough's Soil Test Questionnaire

This information will help us customize our recommendations to your needs
Bring this back with your soil sample

Name _____ Email: _____ Phone: _____

***Approximate size of lot or garden area _____ sq feet**

What are you growing? _____
(lawn, vegetables, flowers, etc)

What was growing there before? _____

Would you like us to make recommendations with commercial products or organic products? Commercial _____ Organic _____

Is your yard or garden area distinctly shady (receives sunlight for less than half a day) sunny, mixed or does it have a traveling shade condition? _____

Are you within 50 feet of a lake or body of water? Yes _____ No _____

New Lawn (not yet seeded)

Was this existing soil or did you have soil brought in? Existing _____ New soil _____

Is this a new construction site? _____

Do you have an irrigation system? Yes _____ No _____

If not, will you be watering : regularly__ occasionally__ minimally__ just initially__

What kind of lawn is your goal? Showcase, Higher Maintenance____ Nice Lawn, Lower Maintenance____
Minimal Care (fertilization & water) _____ Minimal mowing _____

What kind of traffic will this area receive? Heavy _____ Medium _____ Light _____ Play area _____ Pets _____

Existing Lawn

What type of fertilization program, if any, have you used in the past?

_____ (lawn service company, or fertilize once or three times a year, etc)

When was the last time you applied lime? _____

Are you experiencing specific problems with your lawn? If so, please list them.

When did the problems start? _____

Do you have an irrigation system? Yes _____ No _____ If not, do you water regularly? _____

Vegetable or Flower gardens:

Is this an existing garden or a new one? Existing _____ New _____

If existing, have you experienced any problems? :

What varieties of plants are you growing _____

What kind of amendments do you usually add to your garden? (leaves, wood ash, manure, etc.)

Trees, shrubs & groundcovers:

List plant varieties _____

Is this soil test for problems you are experiencing (yellowing of leaves, etc) _____

: _____