



Tree Diagnosis Check Sheet

Please fill this out for us to accurately diagnose your tree issues.
 Use a separate form for each tree or shrub.

Your Name: _____

Your address: _____

Last Updated: _____

Tree Species	Symptom	Symptom location in the tree	Date noticed	Other tree issues
Herbicides next door				
Herbicides on your lawn				
Known diseases				
Known insects				
Leaf / Needle abnormalities				
Planting details				
Root issues				
Root obstacles/damage				
Soil PH				
Soil type	Sandy / Loam / Clay / Compacted			
Tree diameter				
Tree height				
Tree injuries				
Water quantities				
Water source	City / Well / Ditch			