



• DETECT • DISCOVER •

BEE VIRUS TESTING SUBMISSION FORM

Client:

Address:

Phone:

Mobile:

Fax:

Contact Name:

Purchase order no (if required):

Sample details example:

Hive ID	Date sampled	Tests required (please tick)			AFB**	Comments (dead out, absconding, varroa etc)
		Nosema Duo (<i>N. ceranae</i> & <i>N. apis</i>) plus <i>Lotmaria passim</i>)	ApiVirus™ panel *	Nosema & Viruses Full Panel		

*ApiVirus Panel detects: Deformed Wing Virus, Chronic Bee Paralysis Virus, Acute Paralysis Virus, Kashmir Bee Virus, Israeli-associated Paralysis Virus, Black Queen Cell Virus

Please send by overnight courier at least 10 bees per hive sample (ziplock bag, small container – may be requested from dnature) to:

dnature diagnostics & research

60 Carnarvon

Gisborne 4010

**** if you are sending AFB samples, please place an asterisk on the package so that your testing remains confidential and that we can handle the samples in the appropriate way.**

If you have other test requirements, please contact us on **0800 DNATURE** or e-mail info@dnature.co.nz to discuss.

Signed:

Date: