

Inspector/Surveyor: _____

***Phytophthora ramorum* Nursery Questionnaire**

The majority of this questionnaire is about the nursery. The Date and Activity Action refer to activities occurring at the nursery. Additional information related to the activities can be captured in the Core Date Excel or other data tool.

***Site Name:** _____ ***Date:** _____

[Nursery name, etc.]

***Activity Action:** Annual Survey Compliance Inspection Quarantine Inspection (90+ Days)
Delimit Monitor Critical Control Point (No Samples Taken)
Trace Forward Investigation Trace Back Investigation Trace Forward and Back
Treatment Other

***Site Type:** Nursery Environmental **Site Email:** _____

Note: Select Nursery if it's a nursery, residence, or any other establishment. Select Environmental if the site is not.

***Site Phone Number:** _____ **Site Fax Number:** _____

Nursery/Establishment Type: Wholesale Intrastate Interstate Production
Residential Retail-Single Site Retail-Big Box Broker Perimeter
Botanical Garden Other _____

***POC Name:** _____ **POC Title:** _____

***Address:** _____

***City:** _____ ***State:** _____ ***Zip Code:** _____

***County Name:** _____

Latitude (Decimal Degree Coordinates):

Longitude (Decimal Degree Coordinates):

***Website:** No Yes: _____

***Host Plants Sold:** Camellia Kalmia Laurus Leucothoe Mahonia
Pieris Rhododendron Syringa Viburnum
Other: _____

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***Host Plants Propagated:** Yes No ***Host Plants Received:** Yes No

***Site Ships Interstate:** Yes No ***Site Previously Positive:** Yes No

***Host Plant Placement:** On soil On Benches On Gravel In Standing Water
Other _____

***Planting Containers Sanitation:** Recycled with Sanitation Recycled without Sanitation
Other _____

***Planting Medium Used:** Includes Recycled Potting Media Mixed on Site
Other _____

***Irrigation Water Source:** Holding Pond Ground Water/Bore Well Municipal Water
Other _____

Is Irrigation Water Source Treated? Yes, with Chlorine Yes, with UV Yes, both Chlorine and UV
Yes, Other: _____ No

***Irrigation Method:** Hand Watering Sprinkler Other _____

***Retention Pond on Site:** Yes No

***Retention Pond Treatment** Yes No

***Site Drainage** Good Poor Standing Water Puddling None

***Drainage Description:**

***Water Runoff into Streams and Rivers?** Yes No

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***Proximity of Site to Hosts in Environment:**

Immediate (Within 100 Ft.) Nearby (More than 100 Ft.) None Visible Unknown

Site Comments:

***Trace Information** Yes-Trace Forward Yes-Trace Back No Don't know

NOTE: For next 7 questions below, please note if referring to Trace Forward (TF) or Trace Back (TB)

If yes, what types and varieties? _____

When did they ship? _____

What is the address of that location? _____

When were the plants purchased? _____

Did nursery purchase any other plants from this source? Yes No

Were these plants purchased from a broker? Yes No

If yes, provide the broker's information below and attach invoices:

Back to General Nursery Information:

Have you noticed any other problems with plants on your property? Yes No

If yes, describe other problems:

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Do you have multiple site locations? Yes No

Have plants been moved to other locations? Yes No

If yes, where and when were they moved?

Have you received plants from a different location? Yes No
If yes, please provide shipping documents.

Where are your cull piles, compost piles and waste/rubbish bins on this site?

Have host plants been trimmed or pruned? Yes No

How are the trimmings disposed of?

How do you disinfest your pruning equipment?

Where does the growing media come from?

Did the plant material come in pots? Yes No

If yes, where are the pots now?

Do you use or partner with a landscape company? Yes No

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If yes, what is the contact information for that company?

If residence, have you added mulch, potting soil, or topsoil to the yard recently? Yes No

If yes, where did you get this material?
