



Technical questionnaire

Chives

Version 8

Mandatory fields or sections are marked with an asterisk (*)

01 . Botanical taxon: name of the genus, species or sub-species to which the variety belongs:

Allium schoenoprasum L.

02 . Application code:

For office use only

03 . Breeder's reference:

Breeder's Ref.

04 . Information on the breeding scheme and propagation of the variety *

04 . 01 . Type of material *

(this question could be confidential)

hybrid

cross-pollinated variety

self-pollinated variety

parent line

04 . 02 . Method of propagation of the variety *

(this question could be confidential)

seed propagated

vegetatively propagated

04 . 03 . Other information on genetic origin and breeding method

(this question could be confidential)

Please specify

05 . Characteristics *

(the number in brackets refers to the corresponding characteristic in the CPVO Technical Protocol; please mark the state of expression which best corresponds).

05 . 01 . Plant: height (1) (G) *

1 - very short

2 - very short to short

3 - short

4 - short to medium

5 - medium

6 - medium to tall

7 - tall

8 - tall to very tall

9 - very tall

05 . 02 . Foliage: attitude (2) *

1 - erect

2 - erect to semi-erect

3 - semi-erect

05 . 03 . Leaf: waxiness (4) *

1 - weak

2 - weak to medium

3 - medium

4 - medium to strong

5 - strong

05 . 04 . Leaf: intensity of green colour (5) *

1 - very light

2 - very light to light

3 - light

4 - light to medium

5 - medium

6 - medium to dark

7 - dark

8 - dark to very dark

9 - very dark

05 . 05 . Leaf: diameter (7) (G) *

1 - very small

2 - very small to small

3 - small

4 - small to medium

5 - medium

6 - medium to large

7 - large

8 - large to very large

9 - very large

05 . 06 . Male sterility (14) (G) *

1 - absent or very low

2 - low

3 - very high

06 . Similar varieties and differences from these varieties**06 . 1 . Are there any similar variety(ies) known? ***

1 - yes

2 - no

06 . 2 . Similar varieties and differences from these varieties: *

Denomination of similar variety	Characteristic in which the similar variety is different	State of expression of similar variety	State of expression of candidate variety

07 . Additional information which may help to distinguish the variety ***07 . 01 . Resistances to pests and diseases ***

1 - yes (please specify):

2 - no

07 . 02 . In addition to the information provided in sections 5 and 6, are there any additional characteristics which may help to distinguish the variety? *

1 - yes (please specify):

2 - no

07 . 03 . Are there any special conditions for growing the variety or conducting the examination? *

1 - yes (please specify):

2 - no

07 . 04 . Main use *

1 - fresh market

2 - forcing

3 - industry

4 - other (please specify)

07 . 05 . Photo *

It is recommended to provide a representative colour image of the variety to accompany the Technical Questionnaire.

08 . GMO-information requested

08 . a . The variety represents a genetically modified organism (GMO) within the meaning of Article 2(2) of Council Directive EC/2001/18 of 12/03/2001 which requires authorization for release in the environment: *

1 - yes

2 - no

08 . b . If yes, has such authorization been obtained? *

1 - yes

2 - no

08 . c . If yes, please attach a copy of such an authorization *

09 . Information on plant material to be examined *

The expression of a characteristic or several characteristics of a variety may be affected by factors, such as pests and disease, chemical treatment (e.g. growth retardants or pesticides), effects of tissue culture, different rootstocks, scions taken from different growth phases of a tree, etc. Consequently the plant material to be examined should not have undergone any treatment which would affect the expression of the characteristics of the variety, unless the competent authorities allow or request such treatment. If the plant material has undergone such treatment, full details of the treatment must be given. In this respect, please indicate below, to the best of your knowledge, if the plant material to be examined has been subjected to:

09 . 01 . Micro-organisms (e.g. virus, bacteria, phytoplasma) *

Yes, specify

No

09 . 02 . Chemical treatment (e.g. growth retardant or pesticide) *

Yes, specify

No

09 . 03 . Tissue culture *

Yes, specify

No

09 . 04 . Other factors *

Yes, specify

No

DECLARATIONS *

I/we hereby declare that to the best of my/our knowledge the information given in this form is complete and correct.

Place

Date

Name

Signature