## Raadvoorplantenrassen

Technical questionnaire

## Cauliflower

Version 11
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:
〇 Brassica oleracea L. convar. botrytis (L.) Alef. var. botrytis

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:
○ 1 -hybrid
2-cross-pollinated variety
3-self-pollinated variety4 - parent line
04. 02. Method of propagation of the variety: *1 - seed propagated2 - vegetatively propagated
04. 03 . Seed propagated varieties: *
(this question could be confidential)1-cross-pollination2 - hybrid3 - other (please specify)
04. 04. Vegetative propagated varieties *1-cuttings2 - in vitro propagation3 - other (state method):
05. Characteristics of the variety to be indicated *
(the number in brackets refers to the corresponding characteristic in the CPVO Technical Protocol; please mark the state of expression which best corresponds)
05.00. Growing season *springsummerautumnwinteroverwinteringtropical
05. 01. Seedling: anthocyanin coloration of hypocotyl (1) (G)*1 - absent

〇-present

## Brio

Ciren, Dominant
05.01.01 . Plant: height (at time of harvest) (2)*1 - very short2 - very short to short3 -short
Luxor, Opaal4-short to medium5 - medium
Fastman, Mexico6 - medium to tall7 - tall Neven, Sirente8 - tall to very tall9 - very tall
Calisa, Paradiso
05.01.02. Stem: length (up to insertion of first leaf) (3)1 - very short2 - very short to short

- 3 -short

Mexico, Opaal4 - short to medium5 -medium Nautilus

6 - medium to long
7 - long
Neven, Paradiso
○ - long to very long
9 - very long
05 . 01.03. Leaf: attitude (4)
1-erect Igloo, Paradiso
$\bigcirc$
2 - erect to semi-erect3 - semi-erect
Erfurter Zwerg, Fastman
$\bigcirc$
4 - semi-erect to horizontal
○-horizontal
Isabel, Opaal
05. 01.04. Leaf: colour (with wax if present) (9) *

1 - green
2-grey green
$\bigcirc$
3 - blue green
05. 02 . Leaf: intensity of colour (with wax if present)
) (10) *1 - very light2 - very light to light
○ 3 - light
Baltimore, Ciren
$\bigcirc$
4 - light to medium5 - medium
Barrier Reef, Belot, Calisa6 - medium to dark7 - dark

Arbon, Lecerf8 - dark to very dark9 - very dark
05. 02.01 . Leaf: undulation of margin (15)

○ 1-absent or very weak
Etoile 23, Géant de Naples tardif2 - very weak to weak3 - weak
Akita, Beluga

- 4 - weak to medium

5-medium
Admirable, Alice Springs

- 6 - medium to strong7-strong
Purdy, Siria8 - strong to very strong
○- very strong
Celebrity

5. 02.02. Curd: shape in longitudinal section (19)*

○ 1-circular
2-transverse broad elliptic3 - transverse medium elliptic4 - transverse narrow elliptic
Erfurter, Lecerf
5-triangular
Romanesco ottobrino
05. 03. Curd: colour (21) (G)*

| 1 - whitish | Astell, Iceberg |
| :--- | :--- |
| 2 - yellow | Di Jesi |
| 3 - orange | Cheddar, Sunset |
| 4 - green | Amfora |
| 5 - violet | Graffiti |

5. 4. Flower: colour (25) (G)*
1-white
Bruce, Ecrin2 - yellow
Lecerf
$\square$
1. 5. Earliness in spring planting (26) (G) *
1 - very early2 - very early to early3 - early4 - early to medium5 - medium6 - medium to late7 - late8 - late to very late9 - very late

Please indicate an example variety

Please indicate an example variety

Please indicate an example variety


Please indicate an example variety
$\square$
Please indicate an example variety


Please indicate an example variety

Please indicate an example variety
$\square$
05.06. Earliness in summer planting (27) (G)*1 - very early autumn type2 - very early to early autumn type3 - early autumn type4 - early to medium autumn type5 - medium autumn type6 - medium to late autumn type7 - late autumn type8 - late to very late autumn type9 - very late autumn type10 - very early winter type11 - very early to early winter type12 - early winter13 - early to medium winter type14 - medium winter type15 - medium to late winter type16 - late winter type17 - late to very late winter type18 - very late winter type

| Please indicate an example variety |
| :--- |
|  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br> Please indicate an example variety <br>  <br>  <br> Please indicate an example variety <br>  <br>  <br>  <br>  |
| Please inde indicate an example variety |
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$\square$
05. 07. Male sterility (28) (G)*
1-absent
2-partial
Alpha 2
3 -present
Dunvez, Odegwen
Aviron, Bodilis

## 06 . Similar varieties and differences from these varieties

Please note that information on similar varieties may help to identify comparable varieties and can avoid an additional period of testing.
06. 01. Are there any similar varieties known? *Yes
○ No
06. 02 . Similar varieties and differences from these varieties:

| Denomination(s) of variety(ies) <br> similar to your candidate variety | Characteristic(s) in which your <br> candidate variety differs from the <br> similar variety(ies) | Describe the expression of the <br> characteristic(s) for the similar <br> variety(ies) | Describe the expression of the <br> characteristic(s) for your candidate <br> variety |
| :--- | :--- | :--- | :--- |
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## 07 . Additional information which may help to distinguish the variety *

7. 01 . In addition to the information provided in sections 5 and 6 , are there any additional characteristics which may help to distinguish the variety? *Yes, specify
$\bigcirc$ No
8. 2. Are there any special conditions for growing the variety or conducting the examination? *
07.02.01. Growing region

Please specify
07. 02.02. Preferred growing season*
$\square$ springsummerautumnwinteroverwinteringtropical

### 07.02.03 . Preferred country for DUS examination *

SpainFrancethe Netherlands07.02.03.01 . Preferred trial for DUS examination *summer trial (outdoor, sowing week 7, around 13-2)autumn trial (outdoor, sowing week 19, around 06-6)
overwintering trial (outdoor, sowing week 28, around 10-7)
tropical trial (greenhouse, sowing week 25, around 19-6)
07. 02.04 . Number of days from plantation to harvesting *

Number of days *

## 07. 02.05. Other special conditions required *

Yes, specifyNo07.03. Other information *
07. 03.01 . Resistance to pests and diseases *Yes, specify
○ No
07.03.02 . Other information *Yes, specifyNo
07. 04 . Photo

It is highly recommended to provide a representative colour image of full grown plant(s) of the variety to accompany the Technical Questionnaire.

## 08. GMO-information *

## 08. 01. GMO-information required *

The variety represents a Genetically Modified Organism within the meaning of Article 2(2) of Council Directive EC/2001/18 of 12/03/2001.
$\bigcirc \mathrm{Ye}$

O No
08. 02 . In case of GMO, joint attestation of the responsible authorities stating that a technical examination of the variety under Articles 55 and 56 of the Basic Regulation does not pose risks to the environment according to the norms of the above-mentioned Directive.
$\square$

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

Yes, specify
$\bigcirc \mathrm{No}$
09 . 03 . Tissue culture *Yes, specifyNo
09. 04. Other factors *Yes, specifyNo

## 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

