

Technical questionnaire

Garlic	
Version 6	
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 sativum L.	
Allium tuncelianum (Kollmann) Özhatay & al.	
Other species (please specify)	
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	

4 - parent line 04 . 02 . Method of maintenance and reproduction *

- 1 natural clone
- 2 clone from in vitro culture
- 3 clone from seedlings

3 - self-pollinated variety

4 - other (please specify)

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- 04 . 03 . Method of maintenance and reproduction *
 - 1 vegetatively propagated
 - 2 other (please specifiy)
- 04 . 04 . Other information on genetic origin and breeding method *

Please indicate *

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 . Foliage: attitude (2) *
 - 1 erect
 - 2 erect to semi-erect
 - 3 semi-erect
- 05 . 02 . Leaf: green color (3) *
 - 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 . 03 . Pseudostem: flowering stem (10) (G) *
 - 1 absent
 - 9 present
- 05 . 04 . Bulb: size (14) *
 - 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 . 05 . Bulb: shape in longitudinal section (15) $\ensuremath{^{*}}$

- 1 transverse narrow elliptic
- 2 transverse broad elliptic
- 3 circular

05 . 06 . Bulb: ground colour of dry external scales (21) *

- 1 white
- 2 yellowish white
- 3 reddish white

05 . 07 . Bulb: external cloves (27) *

- 1 absent
- 9 present

05 . 08 . Clove: size (28) *

- 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 . 09 . Clove: colour of scale (29) (G) *

- 1 white
- 2 cream
- 3 pink
- 4 purple
- 5 brown

05 . 10 . Clove: colour of flesh (32) *

- 1 white
- 2 yellowish

05	. 11	. Time	of	harvest	maturity	(33)	(G)	*

- 1 very early
- 2 very early to early
- 3 early
- 4 early to medium
- 5 medium
- 6 medium to late
- 7 late
- 8 late to very late
- 9 very late

05 . 12 . End of dormancy of clove in bulb (34) (G) *

- 1 very early
- 2 very early to early
- 3 early
- 4 early to medium
- 5 medium
- 6 medium to late
- 7 late
- 8 late to very late
- 9 very late

${\bf 06}$. 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

7 . Additional information which may help to distinguish the variety
07 . 01 . Resistances to pests and diseases *
1 - yes (please specify):
2 - no
07 . 02 . Special conditions for the examination of the variety $\ensuremath{^*}$
07 . 02.01 . Type *
1 - long-day type (autumn)
2 - short-day type (spring)
07 . 02.02 . Other special conditions required $oldsymbol{*}$
1 - yes (please specify):
2 - no
07 . 03 . Other information *
1 - yes (please specify):

08 . GMO-information requested

2 - no

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 nc

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

	ΛD	AT.	\cap	VIC.	*

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