| TECHNICAL QUESTIONNAIRE |  | Variety denomination: |
| --- | --- | --- |
|  |  |  |
|  |  | Application date: |
|  |  | (not to be filled in by the applicant) |
| TECHNICAL QUESTIONNAIREto be completed in connection with an application for plant breeders’ rights and VL |
|  |  |  |
| 1. Subject of the Technical Questionnaire (please indicate the relevant species): |
|  |  |  |
| 1.1.1 Botanical Name | *Lolium perenne* L. | [ ] |
| 1.1.2 Common Name | Perennial ryegrass |  |
|  |  |  |
| 1.2.1 Botanical Name | *Lolium multiflorum* Lam*.* ssp. *italicum* (A. Br. ) Volkart(*Lolium multiflorum* Lam*.* ssp*. non alternativum*) | [ ] |
| 1.2.2 Common Name | Italian ryegrass |  |
|  |  |  |
| 1.3.1 Botanical Name | *Lolium multiflorum* Lam*.* var*. westerwoldicum* Wittm.(*Lolium multiflorum* Lam*.* ssp*. alternativum*) | [ ] |
| 1.3.2 Common Name | Westerwolds (annual) ryegrass  |  |
|  |  |  |
| 1.4.1 Botanical Name | *Lolium boucheanum* Kunth*.*(*Lolium ×hybridum* Hausskn*.*) | [ ]  |
| 1.4.2 Common Name | Hybrid ryegrass |  |
|  |  |  |
| 1.5.1 Botanical Name | *Lolium rigidum* Gaudin | [ ]  |
| 1.5.2 Common Name | Stiff darnel, Wimmera ryegrass |  |
|  |  |  |
|  |  |  |
| 2. Applicant |
|  |  |  |
| Name |  |  |
|  |  |  |
| Address |  |  |
|  |  |  |
| Telephone No. |  |  |
|  |  |  |
| Fax No. |  |  |
|  |  |  |
| E-mail address |  |  |
|  |  |  |
| Breeder (if different from applicant) |  |
|  |  |  |
|  |  |  |
|  |  |  |
| 3. Proposed denomination and breeder’s reference |
|  |  |  |
| Proposed denomination |  |  |
|  (if available) |  |  |
| Breeder’s reference |  |  |
|  |  |  |
| [[1]](#footnote-1)#4. Information on the breeding scheme and propagation of the variety  4.1 Breeding scheme Variety resulting from:4.1.1 Crossing(a) controlled cross [ ] (please state parent varieties)(b) partially known cross [ ] (please state known parent variety(ies))(c) unknown cross [ ]4.1.2 Mutation [ ](please state parent variety)4.1.3 Discovery and development [ ](please state where and when discoveredand how developed)4.1.4 Other [ ](please provide details) 4.2 Method of propagating the variety |
| 5. Characteristics of the variety to be indicated (the number in brackets refers to the corresponding characteristic in Test Guidelines; please mark the note which best corresponds). |
|  | Characteristics | Example Varieties | Note |
| 5.1(1) | Plant: ploidy  |  |  |
|  | diploid | Denver (Lp),Lemtal (Lmi) | 2[ ] |
|  | tetraploid | Celebrity (Lmi),Condesa (Lp) | 4[ ] |
| 5.2(9) | Only varieties of Lmw and Lr: Plant: time of inflorescence emergence (without vernalization) |  |  |
|  | very early  | Grazer (Lmw) | 1[ ] |
|  | early  | Lifloria (Lmw) | 3[ ] |
|  | medium  | Elunaria (Lmw) | 5[ ] |
|  | late  | Advance (Lmw) | 7[ ] |
|  | very late  |  | 9[ ] |
| 5.3(11) | Only varieties of Lp, Lmi and Lb: Plant: time of inflorescence emergence (after vernalization) |  |  |
|  | very early  | Limona (Lp) | 1[ ] |
|  | early  | Labrador (Lp) | 3[ ] |
|  | medium  | Greenway (Lp),Lemtal (Lmi) | 5[ ] |
|  | late  | Livonne (Lp) | 7[ ] |
|  | very late  | Barpolo (Lp) | 9[ ] |
|  | Characteristics | Example Varieties | Note |
| 5.4(17) | Plant: length of longest stem, inflorescence included (when fully expanded) |  |  |
|  | very short  |  | 1[ ] |
|  | short  | Loretta (Lp) | 3[ ] |
|  | medium  | Lipondo (Lp) | 5[ ] |
|  | long  | Lilotta (Lp) | 7[ ] |
|  | very long  | Emily (Lmi) | 9[ ] |
| 6. Similar varieties and differences from these varieties*Please use the table, and space provided for comments, below to provide information on how your candidate variety differs from the variety (or varieties) which, to the best of your knowledge, is (or are) most similar. This information may help the examination authority to conduct its examination of distinctness in a more efficient way.* |
| Denomination(s) of variety(ies) similar to your candidate variety | Characteristic(s) in which your candidate variety differs from the similar variety(ies) | Describe the expression of the characteristic(s) for the **similar** variety(ies) | Describe the expression of the characteristic(s) for **your** candidate variety |
| *Example* | *Plant: length of longest stem, inflorescence included (when fully expanded)* | *short* | *medium* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Comments:  |
| [[2]](#footnote-2)#7. Additional information which may help in the examination of the variety7.1 In addition to the information provided in sections 5 and 6, are there any additional characteristics which may help to distinguish the variety?Yes [ ] No [ ](If yes, please provide details)7.2 Are there any special conditions for growing the variety or conducting the examination?Yes [ ] No [ ](If yes, please provide details) 7.3 Main use(a) forage [ ](b) amenity [ ](c) other [ ] (please provide details)7.4 Other information |
| 8. Authorization for release (a) Does the variety require prior authorization for release under legislation concerning the protection of the environment, human and animal health? Yes [ ] No [ ] (b) Has such authorization been obtained? Yes [ ] No [ ] If the answer to (b) is yes, please attach a copy of the authorization. |
| 9. Information on plant material to be examined or submitted for examination. 9.1 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.9.2 The plant material 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: (a) Microorganisms (e.g. virus, bacteria, phytoplasma) Yes [ ] No [ ](b) Chemical treatment (e.g. growth retardant, pesticide) Yes [ ] No [ ](c) Tissue culture Yes [ ] No [ ](d) Other factors Yes [ ] No [ ]Please provide details for where you have indicated “yes”.…………………………………………………………… |
| 10. I hereby declare that, to the best of my knowledge, the information provided in this form is correct:  Applicant’s nameSignature Date |

[End of document]

1. # Authorities may allow certain parts of this information to be given in a confidential section of the Technical Questionnaire. [↑](#footnote-ref-1)
2. # Authorities may allow certain of this information to be provided in a confidential section of the Technical Questionnaire. [↑](#footnote-ref-2)