

QUESTIONNAIRE FOR
BAREROOT NURSERY TECHNOLOGY WORKSHOP

Nursery Name _____

Address _____

Phone # _____

Names of Persons Completing Questionnaire:

<u>Name</u>	<u>Position</u>
_____	_____
_____	_____
_____	_____

Nursery Questionnaire (continued)

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Annual Nursery Production (1980)

Please list the major species grown at your nursery. Give the stock types and number produced in thousands of seedlings (M) for each species in 1980.

Species	Stock Type	Number Produced (Harvested)
		M
		M
		M
		M
		M
		M
		M
		M
Other minor species	and Stock types	M
Total Number of Seedlings Produced =		M

Land Usage

Please indicate the total number of acres/or hectares (circle one) your nursery utilizes for each area below.

Fallow or cover-cropped land	_____	Acres or Hectares
Seedbed area	_____	Acres or Hectares
Transplant area	_____	Acres or Hectares
Uncultivated land (buildings, roads, etc)	_____	Acres or Hectares
Unused land	_____	Acres or Hectares
Other	_____	Acres or Hectares
Total ----	_____	Acres or Hectares

Nursery Site Characteristics

From the list below, please indicate the five (5) most important criteria used to select your nursery site, where 1 is the most important, 2, the second most important, 3, the third most important, 4, the fourth most important, and, 5, the fifth most important.

- _____ Climate
- _____ Elevation
- _____ Aesthetics
- _____ Proximity to markets
- _____ Water supply
- _____ Soil depth
- _____ Soil workability and drainage
- _____ Cost of land
- _____ Proximity to work force
- _____ Soil fertility (including pH and cation exchange capacity)
- _____ Local topography
- _____ Politics
- _____ Previous land use
- _____ Freedom from weeds
- _____ Soil texture
- _____ Other _____

Nursery Questionnaire (continued)

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Site Problems - Most bareroot nurserymen realize that they do not have the "ideal" nursery site but "make-do" with what they have. The purpose of this portion of the survey is to identify major site problems and determine what can be done about them. On the table below, please indicate the 5 most serious site problems at your nursery, where 1 is the most serious problem; 2, the second most serious; 3, the third most serious; 4, the fourth most serious and, 5, the fifth most serious. Next, for these 5 site problems, list any corrective treatments that you have tried and whether these treatments have alleviated the problem.

Problem	Major Site Problem (Rank 1 through 5)	Corrective Treatments			
		Treatment	Is it effective?	Treatment	Is it effective?
<u>SOIL</u>					
Acidity					
Alkalinity					
Salinity					
Too "heavy"					
Too "light"					
Too much variation					
Compaction					
Poor Drainage					
Rocks					
Organic matter maintenance					
Soil slash					
Workability (tilth)					
Uneven topography					
<u>CLIMATE</u>					
Intense rainfall					
Frost pockets					
Frozen soil					
Excessively high temperatures					
Wind abrasion					
<u>WATER</u>					
Poor quality					
High water table					
Availability					
<u>OTHER</u>					

SOIL

Soil Characteristics

Please fill in the table below discussing the soil characteristics of your major soil types.
 For each soil type indicate the % of cultivated land that it occupies, its pH, particle size distribution: % sand silt and clay, the drainage quality: good, fair or poor, the cation exchange capacity (me/100g), the bulk density (g/cm³) and organic matter (%).

Soil type	% of cultivated land	pH range	Particle size distribution % sand silt clay (range)	Drainage (good, fair, or poor)	Cation exchange capacity (me/100g)	Bulk Density (g/cm ³) (range)	Organic Matter (%) (range)
	%		% % %		me/100	g/cm ³	%
	%		% % %		me/100	g/cm ³	%
	%		% % %		me/100	g/cm ³	%

Nursery Questionnaire (continued)

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Sowing and Seedbed Density

Please fill in the table below discussing the sowing practice for the stock types produced in your two major species. For each, indicate the sowing date: optimum time (e.g. early May; mid April) and the actual range (e.g. late May to early June); the sowing depth in inches or centimeters; the type of mulch used, if any, and the depth applied; the target growing density (in the 2-0 year) (seedlings/ft²); the seedling inventory (seedlings/ft²) for 1-0's and 2-0's; and the cull X during grading.

Species	Stock Type of Final Product	Sowing Date		Sowing Depth (circle whether inches or cm)	Mulch		Target Growing Density Seedl/ft ²	Seedbed Inventory (Seedlings/ft ²)		Cull % During Grading
		Optimum Date (e.g. early May)	Actual Range (mid May to late June)		Type	Depth (in or cm)		1-0's	2-0's	
1.	1-0		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
	2-0		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
	3-0		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
	Other		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
2.	1-0		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
	2-0		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
	3-0		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%
	Other		to	in cm		in cm	/ft ²	/ft ²	/ft ²	%

Fertilization

Please fill in the table below with the general fertilizer schedule for your 2-0 stock starting with the applications before sowing, then the applications made in the first year and, finally, the applications made in the second year up to the time of lifting. Indicate time of year of application (month), what type of fertilizer is applied, the amount applied in lbs/acre or kg/ha and finally the purpose for the application, e.g. to stimulate fall root growth.

This is the entire 2-0 fertilizer schedule for the major species grown at our nursery which is _____

Species Name

	Age of Stock at Time of Application	Time of Year of Application (Month)	Type of Fertilizer Applied (e.g. Ammonium Phosphate 11-55-0)	Amount Applied lbs/acre or kg/ha (circle one)	Purpose of Application (e.g. fall root growth)
Applications Before Sowing	0			lbs/acre or kg/ha	
				lbs/acre or kg/ha	
				lbs/acre or kg/ha	
Applications in First Year	1-0			lbs/acre or kg/ha	
				lbs/acre or kg/ha	
				lbs/acre or kg/ha	
Applications in Second Year	2-0			lbs/acre or kg/ha	
				lbs/acre or kg/ha	
				lbs/acre or kg/ha	

Nursery Questionnaire (continued)

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Root Culturing

Please fill in the table below discussing your root culturing regime for growing 2-0 seedlings of your major species. For undercutting, wrenching and lateral pruning, list the age of the stock at the time of the operation (e.g. 1-0), the date(s) of the operation, the depth at which you draw the blade(s) (in. or cm.) and the purpose for doing the operation (e. g. to harden-off seedlings, stimulate root growth, etc.).

This is the root culturing regime for 2-0 seedlings of our major species, _____
Give Species Name

Root Culturing	Age of Seedlings at Time of Operation (e. g. 1-0)	Date(s) of Operation (month/day)	Depth at which you Draw the Blade (in or cm) (circle one)	Purpose of Operation (e.g. to Harden-off Seedlings)
Under-Cutting		/	in cm	
		/	in cm	
Wrenching		/	in cm	
		/	in cm	
		/	in cm	
		/	in cm	
		/	in cm	
		/	in cm	
Lateral Pruning or Sidecutting		/	in cm	
		/	in cm	
		/	in cm	
		/	in cm	

TRANSPLANTING

In the table below discuss the transplanting regime for your major species and stock types. Indicate the species, stock type of final product (eg. plug-1, 1-1, 2-1), the time of year (month(s)) seedlings are lifted, stored, and transplanted, the root length of seedlings to be transplanted, the density of the bed immediately after transplanting and at the time of lifting (seedlings/ft²) and the final number of seedlings produced after culling (seedling/ft²).

Species	Stock Type (final product)	Time of Year . . .			Pruned Root length in/cm (circle one)	Density of Transplant Bed		Number of seedlings produced after culling (seedlings/ft ²)
		Lifted months)	Stored month(s)	Transplanted month(s)		At time of transplanting	At time of lifting	
					in cm	/ft ²	/ft ²	/ft ²
					in cm	/ft ²	/ft ²	/ft ²
					in cm	/ft ²	/ft ²	/ft ²
					in cm	/ft ²	/ft ²	/ft ²
					in cm	/ft ²	/ft ²	/ft ²
					in cm	/ft ²	/ft ²	/ft ²
					in cm	/ft ²	/ft ²	/ft ²

Please, indicate the percentage of seedlings transplanted in the fall versus spring:

Fall = _____ %

Spring = _____ %

Total = 100 %

Which do you prefer, fall or spring transplanting and why? _____

Pests

Please discuss your pest management program in the table below. First rank the major pest groups where 1 is the greatest problem as a pest, 2, the next greatest problem, 3, the next, 4, the next, 5, the next, end, 6, the least important problem. Then discuss the severity of the problem for each specific pest; is it heavy, moderate, slight or non-existent as a problem; list the species and stock-type that the pest affects; answer whether the pest is increasing or decreasing as a problem (check me) and finally discuss the major methods of control that you have used: soil fumigation, seed treatment, drench, sprays (check as many as you use) and cultural controls (list those used).

Major Pest Group (rank from 1 through 6)	Specific Pest	Severity of Problem (check one)				Species and Stock Type which Pest Affects	Is this Pest Increasing or Decreasing as a Problem? (check one)		Methods of Control (check as many as you use)				Cultural Controls (List)
		Heavy	Moderate	Slight	Non- Existent		Increasing	Decreasing	Fumigation	Seed Treatment	Drench	Sprays	
Diseases of Seeds and Germinants	1. Damping off (Pythiums, Rhizoctonia etc.)												
	2. Seed Fungi												
Diseases of Roots and Root Collars	1. Fusarium Root Rot												
	2. Nematodes												
	3. Phytophthora												
	4. Cortical Rot (Fusarium Roseum												
	5. Charcoal Root Rot (Macrophomina Phaseoli)												
Diseases Affecting Shoots	1. Sirococcus Blight												
	2. Fusarium Top Blight												
	3. Melampsora Foliage Rust												
	4. Western Gall Rust												
	5. Gray Mold (Botrytis)												
Molding of Stored Seedlings	1. Fungal Molds												
Insects and Allied Pests	1. Springtail Insects												
	2. Cutworms												
	3. Marsh Crane Fly												
	4. Root and Vine Weevil												
	5. Aphids												
	6. Cranberry Girdler												
	7. European Pine Shoot Moth												
	8. Balsam Woolly Aphid												
Birds and Mammals	1. Deer												
	2. Rodents												
	3. Birds												
	4. Rabbits												
	5. Moles												

Inventory of Equipment or Method Used

Please indicate the kind of equipment or methods now used at your nursery. If it is commercially available, please list the make, model, or type. Also indicate whether or not the equipment or method fulfills its function well? And, if the answer is no, discuss why the equipment or method is unsatisfactory, for reasons that may be related to the high cost of equipment, maintenance or fuel or is it due to low operational efficiency, i.e., the equipment or method does not do the job well resulting in lower product quality or product loss.

1. CONE STORAGE AND HANDLING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
___ Forklift	_____	___ Yes	___ No	_____
___ Conveyor	_____	___ Yes	___ No	_____
___ Manual	_____	___ Yes	___ No	_____
___ Tray Storage	_____	___ Yes	___ No	_____
___ In Sack Storage	_____	___ Yes	___ No	_____
___ Rack Storage	_____	___ Yes	___ No	_____
___ Loose Storage	_____	___ Yes	___ No	_____
___ _____	_____	___ Yes	___ No	_____
___ _____	_____	___ Yes	___ No	_____

2. SEED PROCESSING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Preheat Bins	_____	_____ Yes	_____ No	_____
_____ Extractor	_____	_____ Yes	_____ No	_____
_____ Scalper	_____	_____ Yes	_____ No	_____
_____ Dewinger	_____	_____ Yes	_____ No	_____
_____ Fanning Mill/Clipper	_____	_____ Yes	_____ No	_____
_____ Specific Gravity Separator	_____	_____ Yes	_____ No	_____
_____ Powered Conveyors	_____	_____ Yes	_____ No	_____
_____ Cone Grinders	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

3. SEED STORAGE AND HANDLING

_____ Refrigerated Storage	_____	_____ Yes	_____ No	_____
_____ Nonrefrigerated Storage	_____	_____ Yes	_____ No	_____
_____ Freezer Storage	_____	_____ Yes	_____ No	_____
_____ Cans	_____	_____ Yes	_____ No	_____
_____ Sacks	_____	_____ Yes	_____ No	_____
_____ Cartons	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

4. FUMIGATION

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Granular Applicator	_____	_____ Yes	_____ No	_____
_____ Liquid Applicator	_____	_____ Yes	_____ No	_____
_____ Shank Injector	_____	_____ Yes	_____ No	_____
_____ Tarp Layer	_____	_____ Yes	_____ No	_____
_____ Tarp Remover	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

5. GENERAL CULTIVATION & GROUND PREPARATION

_____ Plow	_____	_____ Yes	_____ No	_____
_____ Rototiller	_____	_____ Yes	_____ No	_____
_____ Disc	_____	_____ Yes	_____ No	_____
_____ Harrow	_____	_____ Yes	_____ No	_____
_____ Chisel	_____	_____ Yes	_____ No	_____
_____ Leveler	_____	_____ Yes	_____ No	_____
_____ Packer	_____	_____ Yes	_____ No	_____
_____ Rod Weeder	_____	_____ Yes	_____ No	_____
_____ Rock Picker	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

6. SOWING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Bed Marker	_____	_____ Yes	_____ No	_____
_____ Bed Maker	_____	_____ Yes	_____ No	_____
_____ Drill Seeder	_____	_____ Yes	_____ No	_____
_____ Broadcast Seeder	_____	_____ Yes	_____ No	_____
_____ Mulch Spreader	_____	_____ Yes	_____ No	_____
_____ Bed Sander	_____	_____ Yes	_____ No	_____
_____ Bed Roller	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

7. IRRIGATION

_____ Ditch	_____	_____ Yes	_____ No	_____
_____ Overhead Oscillation	_____	_____ Yes	_____ No	_____
_____ Overhead Impulse (Fixed)	_____	_____ Yes	_____ No	_____
_____ Overhead Impulse (Portable)	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

8. FERTILIZATION

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Granular Applicator	_____	_____ Yes	_____ No	_____
_____ Liquid Gravity Applicator (Drenching)	_____	_____ Yes	_____ No	_____
_____ Liquid Pressure Sprayer	_____	_____ Yes	_____ No	_____
_____ Soil Injector	_____	_____ Yes	_____ No	_____
_____ Irrigation	_____	_____ Yes	_____ No	_____
_____ Manure Spreader	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

9. SOIL AMENDMENTS

_____ Manure Spreader	_____	_____ Yes	_____ No	_____
_____ Mulch Spreader	_____	_____ Yes	_____ No	_____
_____ Apricultural Seed Drill	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

10. SEEDBED CULTIVATION

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Path Cultivator (Hand)	_____	_____ Yes	_____ No	_____
_____ Path Cultivator (Mechanized)	_____	_____ Yes	_____ No	_____
_____ Row Cultivator (Hand)	_____	_____ Yes	_____ No	_____
_____ Row Cultivator (Mechanized)	_____	_____ Yes	_____ No	_____
_____ Pipeline Cultivator (Hand)	_____	_____ Yes	_____ No	_____
_____ Pipeline Cultivator (Mechanized)	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

11. ROOT PRUNING

_____ Side Root Pruner (Disc)	_____	_____ Yes	_____ No	_____
_____ Side Root Pruner (Fixed)	_____	_____ Yes	_____ No	_____
_____ Bottom Root Pruner (Fixed)	_____	_____ Yes	_____ No	_____
_____ Bottom Root Pruner (Reciprocating)	_____	_____ Yes	_____ No	_____
_____ Root Wrencher	_____	_____	_____	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

Nursery Questionnaire (continued)

12. TOP PRUNING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Hand Shearing	_____	_____ Yes	_____ No	_____
_____ Rotary Mower	_____	_____ Yes	_____ No	_____
_____ Sickle Bar	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

13. HERBICIDE AND INSECTICIDE SPRAYING

_____ Hand Sprayer	_____	_____ Yes	_____ No	_____
_____ Tractor Mounted Boom Sprayer	_____	_____ Yes	_____ No	_____
_____ Trailer Mounted Boom Sprayer	_____	_____ Yes	_____ No	_____
_____ Mist or Dust Blower	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

14. FROST PROTECTION

_____ Irrigation	_____	_____ Yes	_____ No	_____
_____ Smudge Pots	_____	_____ Yes	_____ No	_____
_____ Covering (Plastic Sheet)	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

15. TRANSPLANTING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Hand Transplanting Board	_____	_____ Yes	_____ No	_____
_____ Self-Propelled Transplanter	_____	_____ Yes	_____ No	_____
_____ Tractor Drawn Transplanter	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

16. FIELD LIFTING

_____ Rigid Undercutting Blade	_____	_____ Yes	_____ No	_____
_____ Rigid Undercutting Blade W/Agitator	_____	_____ Yes	_____ No	_____
_____ Manual Lifting _____ % -- <u>If seedlings are lifted both manually and</u>	_____	_____ Yes	_____ No	_____
_____ Mechanical Harvesting _____ % <u>mechanically, give approximate percentage</u>	_____	_____ Yes	_____ No	_____
_____ _____ <u>of each used.</u>	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

17. FIELD HANDLING

_____ Boxes	_____	_____ Yes	_____ No	_____
_____ Bins	_____	_____ Yes	_____ No	_____
_____ Tubs	_____	_____ Yes	_____ No	_____
_____ Fabric, Slings	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

18. FIELD TRANSPORT

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Trailer	_____	_____ Yes	_____ No	_____
_____ Truck	_____	_____ Yes	_____ No	_____
_____ Forklift	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

19. GRADING AND COUNTING

_____ Stationary Table	_____	_____ Yes	_____ No	_____
_____ Moving Belt	_____	_____ Yes	_____ No	_____
_____ Counter (Mechanical or Electrical)	_____	_____ Yes	_____ No	_____
_____ Counter (Weight)	_____	_____ Yes	_____ No	_____
_____ Counter (Manual)	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

20. SEEDLING PACKAGING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Mechanical Bundling	_____	_____ Yes	_____ No	_____
_____ Manual Bundling	_____	_____ Yes	_____ No	_____
_____ Boxes	_____	_____ Yes	_____ No	_____
_____ Bags	_____	_____ Yes	_____ No	_____
_____ Bales	_____	_____ Yes	_____ No	_____
_____ Crates	_____	_____ Yes	_____ No	_____
_____ Stapler	_____	_____ Yes	_____ No	_____
_____ Taper	_____	_____ Yes	_____ No	_____
_____ Stitcher	_____	_____ Yes	_____ No	_____
_____ Baler	_____	_____ Yes	_____ No	_____
_____ Packing Medium	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

21. SEEDLING STORAGE

_____ Refrigerated Storage	_____	_____ Yes	_____ No	_____
_____ Non-Refrigerated Storage	_____	_____ Yes	_____ No	_____
_____ Humidify Control	_____	_____ Yes	_____ No	_____
_____ Permanent Racks	_____	_____ Yes	_____ No	_____
_____ Pallet System	_____	_____ Yes	_____ No	_____
_____ Palleteer System	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

Nursery Questionnaire (continued)

22. SEEDLING HANDLING

<u>Equipment or Method</u>	<u>Make, Model, or Type</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>		<u>If No: Why is Equipment or Method Unsatisfactory?</u>
_____ Forklift	_____	_____ Yes	_____ No	_____
_____ Skids	_____	_____ Yes	_____ No	_____
_____ Carts	_____	_____ Yes	_____ No	_____
_____ Belt Conveyor	_____	_____ Yes	_____ No	_____
_____ Roller Conveyor	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

23. SHIPPING FOR OUTPLANTING

_____ Refrigerated	_____	_____ Yes	_____ No	_____
_____ Non-Refrigerated	_____	_____ Yes	_____ No	_____
_____ Common Carrier	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

24. SPECIALIZED ON-SITE TRANSPORTATION

_____ Buses	_____	_____ Yes	_____ No	_____
_____ Crew Carriers	_____	_____ Yes	_____ No	_____
_____ Scooters	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____
_____ _____	_____	_____ Yes	_____ No	_____

25. TRACTORS

<u>Make, Model, and Horsepower</u>	<u>Crawler</u>	<u>Wheeled</u>	<u>Gas</u>	<u>Diesel</u>	<u>Does Equipment or Method Fulfill its Function Well?</u>
_____	_____	_____	_____	_____	___ Yes ___ No
_____	_____	_____	_____	_____	___ Yes ___ No
_____	_____	_____	_____	_____	___ Yes ___ No
_____	_____	_____	_____	_____	___ Yes ___ No
_____	_____	_____	_____	_____	___ Yes ___ No
_____	_____	_____	_____	_____	___ Yes ___ No
_____	_____	_____	_____	_____	___ Yes ___ No

What 3 pieces of nursery equipment need the most improvement? List in priority order.

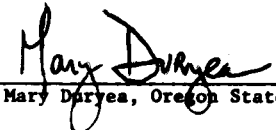
<u>Equipment</u>	<u>What needs to be improved?</u>
1. _____	_____
2. _____	_____
3. _____	_____

Please estimate the number of seasonal workers employed by your nursery last year in the four functions listed.

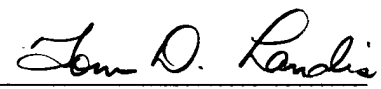
	Number of Seasonal Employees	
	<u>Minimum</u>	<u>Maximum</u>
Cone harvesting	_____	_____
Seed processing	_____	_____
Nursery seedling production	_____	_____
Seedling packing shed operation	_____	_____

How many permanent employees do you have?

We realize that this questionnaire has taken a considerable amount of your time and want to sincerely thank you. The information produced by this survey will insure the success of the Bareroot Nursery Conference and make the resulting Proceedings a valuable bareroot nursery manual.



 Mary Duryea, Oregon State Univ.



 Tom Landis, USDA - Forest Service