

**PVP-TQ**

**Reference Number:**

**Application Date :**

**(not to be filled in by the applicant)**

**TECHNICAL QUESTIONNAIRE**

To be completed in connection with an application for plant breeders' rights

In the case of hybrid varieties which are the subject of an application for plant breeders' rights, and where the parent lines are to be submitted as a part of the examination of the hybrid variety, this Technical Questionnaire should be completed for each of the parent lines, in addition to being completed for the hybrid variety.

*This form will take about 30-45 minutes to complete.*

**1. Subject of the Technical Questionnaire**

Botanical Name(s)

Common Name(s)

**2. Applicant**

Name

Address

Telephone No.

Fax No.

E-mail address

Breeder (if different from applicant)

**3. Proposed denomination and breeder's reference**

Proposed variety  
denomination

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**4. Information on the breeding scheme and propagation of the variety**  
(Information given here will be kept confidential)

Variety resulting from  
[please "tick"]

- Controlled cross  
(pls state parent varieties)
- Partially known cross (pls state known  
parent varieties)
- Totally unknown cross

Breeding scheme (indicate female component in first position) :

- Mutation  
(pls state parent variety)

- Discovery (pls state where, when  
and how developed)

- Other (pls provide details)

Method of propagating the variety :

- Cuttings
- In vitro* propagation
- Seed
- Other (state method)

Indicate any male sterile lines and how they are maintained.

Geographical origin of the variety :

The region and country in which the variety was bred or discovered and developed.

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- 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	State of Expression	Example Varieties	Note
	(Applicant to indicate size in centimetres if applicable)	(Applicant to indicate other example varieties if possible / applicable)	

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**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 <b>similar</b> variety(ies)	Describe the expression of the characteristic(s) for <b>your</b> candidate variety
<i>Example</i>	<i>Lip: color pattern</i>	<i>shaded</i>	<i>shaded and striped</i>

Comments:

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**7. Additional information which may help in the examination of the variety**

7.1 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 give details:

7.3 Other information

7.3.1 Representative colour photographs of the variety should accompany the Technical Questionnaire.

I) The specifications are :

- i. The photographs (maximum of 5 representations) should measure at least 15cm x 10cm.
- ii. The size of the image or object in question should cover as much area of the photograph as possible.
- iii. Printed photographs should have a non-glossy, matt finish.
- iv. Instant photographs taken with a polaroid camera are not acceptable.
- v. Photographs should be taken against a dark or black background, in sufficient light to prevent or minimise distortion to the natural colour of the plant or part(s) of the plant.
- vi. Printed photographs are to be submitted in a water-proof envelope or bag,
- vii. Photographs must be clearly labelled with the Applicant's name, Contact Number, Proposed Denomination of the new variety, and Date of Application.

II) The following images are required :

- i. Close-up picture of a single flower (if applicable; taken against a scale ruler)
- ii. Close-up picture of a single inflorescence (if applicable; taken against a scale ruler)
- iii. A picture of the whole plant (taken against a standard 30cm scale ruler)
- iv. Any other picture(s) of the plant or part(s) of plant that will distinguish the variety from other varieties.

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7.3.2 Main use of the variety

[  ] Garden Plant

[  ] Pot Plant

[  ] Cut-flower

[  ] Other (please provide details) :

**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.

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**9. 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.

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 / Pathogens (e.g. virus, bacteria, phytoplasma) | Yes [ ] | No [ ] |
| (b) | Chemical treatment (e.g. growth retardant or pesticide)        | Yes [ ] | No [ ] |
| (c) | Tissue culture   | Yes [ ] | No [ ] |
| (d) | Other factors  | Yes [ ] | No [ ] |

Please provide details 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 name :

Signature :

Date:

[End of document]