

## Technical questionnaire

**holly, ilex**

**CPVO/TQ-X04**

*Mandatory fields or sections are marked with an asterisk (\*)*

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**01 . Botanical taxon: name of the genus, species or sub-species to which the variety belongs:**

*Ilex* L.

*Ilex aquifolium* L.

*Ilex crenata* Thunb.

*Ilex dimorphophylla* Koidz.

*Ilex verticillata* (L.) A. Gray

*Ilex* × *meserveae* S.-Y. Hu

Other species (please specify)

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**02 . Application code:**

For office use only

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**03 . Breeder's reference:**

Breeder's Ref.

**04 . Information on the breeding scheme and propagation of the variety****04 . 01 . Breeding scheme \****(this question could be confidential)*

crossing

mutation

discovery

Please state where and when discovered and how the variety has been developed

other origin

Please provide details

**04 . 01.01 . Crossing \****(this question could be confidential)*

controlled cross

Indicate denomination and species of the parent varieties

partially known cross

Indicate denomination and species of the known parent variety(ies)

unknown cross

**04 . 01.02 . In case of mutation, please fill in the table below. \****(this question could be confidential)*

Denomination of the parent variety	Characteristic(s) in which your candidate variety differs from the parent variety	Describe the expression of the characteristic(s) for the parent variety	Describe the expression of the characteristic(s) for your candidate variety

**04 . 02 . Method of propagation of the variety \***

vegetatively propagated

Please specify the method

seed propagated



**04 . 03 . In the case of seed propagated varieties, method of production:**

self-pollination

cross pollination

hybrid

other method

Please specify

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**05 . Characteristics of the variety to be indicated**

(the number in brackets refers to the corresponding characteristic in the national guidelines; please mark the state of expression which best corresponds.)

**05 . 01 . Plant: growth habit \***

1 - upright

2 - semi-upright

3 - spreading

4 - prostrate

5 - weeping

6 - other (specify)

**05 . 02 . Plant: height when fully grown \***

Indicate height in cm \*

**05 . 03 . Foliage: persistence \***

1 - deciduous

2 - evergreen

**05 . 04 . Leaf: length \***

Indicate length in cm \*

**05 . 05 . Leaf: width \***

Indicate width in cm \*

**05 . 06 . Leaf: variegation \***

1 - absent

9 - present

**05 . 07.01 . Leaf: main colour of upper side**

RHS Colour Chart (indicate reference number)

**05 . 07.02 . Leaf: main colour of lower side**

If RHS Colour is not possible, describe leaf colour

**05 . 08 . Flower: sex \***

1 - male

2 - female



**05 . 09 . Flower: number of colours \***

1 - one

2 - two

3 - more than two

**05 . 10.01 . Flower: main colour**

RHS Colour Chart (indicate reference number)

**05 . 10.02 . Flower: main colour**

If RHS colour is not possible, describe flower colour

**05 . 11.01 . If female: Fruit: main colour**

RHS Colour Chart (indicate reference number)

**05 . 11.02 . If female: Fruit: main colour**

If RHS colour is not possible, describe fruit colour

**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) 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

**07 . Additional information which may help to distinguish the variety \*****07 . 01 . Resistance to pests and diseases \***

Yes, specify

No

**07 . 02 . In addition to the information provided in sections 05 and 06, are there any additional characteristics which may help to distinguish the variety? \***

**07 . 02.01 . Main use \***

garden decoration/landscaping  
cut foliage  
cut branches with fruits/berries  
other use (specify)

**07 . 02.02 . Other information \***

Yes, specify  
No

**07 . 03 . Are there any special conditions for growing the variety or conducting the examination? \***

**07 . 03.01 . If the recommended planting period is not spring, please mention the best planting period to distinguish the candidate variety from similar varieties**

Please specify

**07 . 03.02 . Are there any special conditions for growing the variety or conducting the examination? \***

Yes, specify  
No

**07 . 04 . Other information \***

Yes, specify  
No

**07 . 05 . Photo \***

A representative colour photo of the variety must be **added** to the technical questionnaire.

**07 . 05.01 . Details of the picture(s)**

Place where the picture(s) was(ere) taken  
Date of the picture(s) (month and year)

**07 . 05.02 . Attached picture(s) \***

Where appropriate, please provide additional details on the picture(s) provided (i.e. deviations of the colours on the picture compared to the plant/flower)

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**08 . GMD-information**

**08 . 01 . GMD-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.

Yes

If yes, please attach in point 08.02 a copy of the written 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.

No

**08 . 02 . In case of GMD, 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.**



### 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, specify

No

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

Yes, specify

No

#### 09 . 03 . Tissue culture \*

Yes, specify

No

#### 09 . 04 . Other factors \*

Yes, specify

No

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### 10 . Possible place of the technical examination

In case the CPVO needs to arrange a technical examination for this candidate variety, there might be more than one examination office entrusted by the CPVO suitable to grow your variety. In this case, the Office will decide on the place of the technical examination but you might wish to express here a preference in respect of an examination office. The available entrusted examination offices for that species can be found in the S3 Gazette under: <http://cpvo.europa.eu/en/applications-and-examinations/technical-examinations/entrusted-examination-offices>

You will also find in the S2 Gazette further information about submission of plant material and deadlines for numerous major species: <http://cpvo.europa.eu/en/applications-and-examinations/technical-examinations/submission-of-plant-material-s2-publication>

#### 10 . 01 . Country where the examination could take place

Country

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**Attached document(s)**

**The following forms or documents are attached to this application : please tick the relevant boxes**

- Application form, confidential part (original only)
- Technical questionnaire (original only)
- Technical questionnaire, confidential part (original only)
- Form of designation of a procedural representative
- Documentary evidence of entitlement to file an application
- Priority claim (certified copy of the first application)
- Form "Details of payment"
- Photographs (in case of fruit and ornamental varieties)
- Copy of the relevant written release consent (for GMOs)
- Others, please specify

Remark



**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

