

Winter Wheat Questionnaire 2022-2023



If you have any difficulty in completing the information please contact your sample collector.

This questionnaire is being sent to you using an address list compiled from information collected as part of the June Survey of Agriculture. No disclosure of identities or addresses of farmers has been made to the team commissioning the despatch of the survey.

Sample No:.....

1. Farmer's name and address:

.....
.....
.....
.....

Name of collector:

Office:..... Tel:.....

Date sampled:

Growth stage:

2. C/P/H No:.....

3. Field name or number:.....

4. Grid ref:

5. Area of field (ha):

6. Variety:

7. Was disease resistance a factor in selecting this variety? Yes No

8. Sow date

9. Previous crop: 2021 2020 2019 2018
[Please state whether winter (w) or spring (s) sown]

10a. Cultivations (tick box)

Conventional plough
Shallow plough
Reduced cultivation
Direct drilled

10b. Previous crop debris (tick box)

Baled & removed
Chopped & incorporated
Nothing



ADAS processes personal data according to Data Protection Act 2018 (GDPR). For further information about how your data will be processed please visit www.pestanddiseasesurvey.co.uk

Did the field contain a cover crop immediately prior to the current crop, and if so which species of cover crop? A cover crop is a non-cash crop grown primarily for the purpose of protecting or improving the soil between periods of regular crop production, and may be in place from a few weeks to years.

.....
.....
.....

Is there an agri-environment scheme associated with this field, which affected how the crop was managed? If so, please provide details of the scheme and how crop management was affected.

.....
.....
.....
.....

If the previous crop was winter wheat, please give the variety of that previous crop.

.....

Please record all seed treatments and sprayed inputs to the crop, i.e. **herbicides, fungicides, insecticides and growth regulators**. Please **do not** include adjuvants or trace elements.

Seed

- Farm saved Certified

Sample No:

Farm:.....

Seed treatments

- | | | | |
|---------------------------------------|--|--|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Difend | <input type="checkbox"/> Latitude XL | <input type="checkbox"/> Signal 300 ES |
| <input type="checkbox"/> Beret Gold | <input type="checkbox"/> Difend Extra | <input type="checkbox"/> Rancona i-mix | <input type="checkbox"/> Vibrance Duo |
| <input type="checkbox"/> Celest Extra | <input type="checkbox"/> Fountain | <input type="checkbox"/> Rancona 15 ME | |
| <input type="checkbox"/> Celest Trio | <input type="checkbox"/> Langis 300 ES | <input type="checkbox"/> Redigo | |
| <input type="checkbox"/> Conima | <input type="checkbox"/> Latitude | <input type="checkbox"/> Redigo Pro | |
- Other (please specify).....

Was the crop irrigated? ... Yes No

Pre-harvest glyphosate

Do you intend applying a pre-harvest glyphosate treatment: Yes No



PLEASE COMPLETE THIS SHEET AS COMPREHENSIVELY AS POSSIBLE AS IT IS ONE OF THE MOST IMPORTANT PARTS OF THE SURVEY.

We are happy to receive printouts from farm management software as an alternative. If this is the preferred option please email the field print out .pdf to tim.boor@adas.co.uk

Please be assured that there will never be any scrutiny of the pesticide data in terms of regulation and **individual farm data will not be identified.**

Spray applications

Please record all pesticide and growth regulator sprays, use full brand name. Please state NONE if none used. Information for adjuvants and trace elements is not required.

<u>Product</u>	<u>Dose</u>	<u>Application date</u>	<u>Growth stage</u>
PRE-DRILLING			
1.....
.....
2.....
.....
PRE-EMERGENCE			
1.....
.....
2.....
.....

POST-EMERGENCE

<u>Product</u>	<u>Spray type</u>	<u>Dose</u>	<u>Application date</u>	<u>Growth stage</u>
	F (fungicide)			
	H (herbicide)			
	I (insecticide)			
	G (growth regulator)			
1.....	.....	.....	.....	.....
.....
.....
.....
2.....	.....	.....	.....	.....
.....
.....
.....

3.	.....	.....	.....	.....	.....

4.	.....	.....	.....	.....	.....

5.	.....	.....	.....	.....	.....

6.	.....	.....	.....	.....	.....

7.	.....	.....	.....	.....	.....

8.	.....	.....	.....	.....	.....

