West Virginia Department of Agriculture (WVDA)

GYPSY MOTH COOPERATIVE SUPPRESSION PROGRAM

Egg Mass Survey Request Application

COUNTY

Instructions: Proposed spray blocks must be a minimum of 50 contiguous acres. Attach a copy of a 7.5- minute topographic map with the property boundary clearly marked on it. A plat map should be provided to verify boundaries. A Farm Service Agency aerial photo can be used to mark fields that need omitted. An ESRI shape file, projected in UTM Zone 17, NAD 83 Datum, can be provided by the forest industry.

A non-refundable survey deposit of a $1.00 per acre is required to participate ($500 maximum). Use one application for each separate block of 50 acres or more.

Fill out the information below and on reverse and return, along with your property boundary map and your $1.00 per acre deposit to: West Virginia Department of Agriculture, Plant Industries Division, 1900 Kanawha Blvd., East, Charleston, WV 25305

Applicant Information

Applicant’s Name

Development or Business Name

Applicant’s Mailing Address ( ) Home Phone ( ) Work Phone

City State Zip Cell Phone ( ) Fax

E-mail address

Local Contact Information

Local Contact for Absentee Landowner ( ) Home Phone ( ) Work Phone

Local Contact’s Mailing Address

Cell Phone ( ) Fax

City State Zip

E-mail address

Remarks

Applicant’s Signature: Date:

APPLICANT, PLEASE COMPLETE SITE SPECIFIC INFORMATION ON REVERSE:

mailing address: 1900 Kanawha Blvd. East, Charleston, WV 25305-0170
physical address: 217 Gus R. Douglass Lane, Charleston, WV 25312
telephone: 304-558-3550 • fax: 304-558-2203

www.agriculture.wv.gov
Applicant Site Specific Information

General Property Location (e.g.) 4 miles South of New Creek on Rt. 220 – Turn left on Valley View Road - 500 feet on right

(1) Total block acres ____________________
(2) Total forested acres ____________________
(3) Total exclusion acres ____________________
(4) Total spray acres ____________________

(Exclusion minimum is 10 acres)

(5) Have you applied for treatment through the WVDA in the past? □ Yes □ No. ____________ Last year applied

(6) If yes, do you wish to use the same property boundaries as previously submitted? □ Yes □ No

(7) Was your property treated last year? □ Yes □ No. _______________ Spray material used

(8) Percentage of preferred host trees in proposed treatment block ____________%
    e.g. % of oak, birch, alder, apple, aspen and basswood on property

(9) Percent forest canopy cover in proposed treatment block ____________%

(10) Forest type is (check one) □ Wooded, no permanent residences
        □ Wooded residential, permanent residences
        □ Wooded recreational, e.g. state park, state forest, resorts

(11) Number of property owners included in proposed spray block ____________

(12) Is property gated? □ Yes □ No Combination Lock # ________________ Please note that keys must
     be provided with this application unless the gate will be left unlocked when contacted by the WVDA.

(13) Is any portion of the property restricted? □ Yes □ No. If yes explain ________________

(14) Check or list any potential hazards such as. □ High antennas or towers
        □ High power lines
        □ Open bodies of water.
        Other ________________

Official use only

Areview # ______________ - ______________ - ______________ Egg Masses per Acre ______________

Date Surveyed __________ / __________ / __________ Surveys Completed ______________ Blow-in-Potential □ yes □ no
Surveyed by: ________________________________ Quality for Treatment □ yes □ no
Presence of Virus □ yes □ no Presence of Fungus □ yes □ no EM Size □ dime □ nickel □ quarter
Quad 1 ______________ Quad 2 ______________ Quad 3 ______________ Quad 4 ______________