



Elm Recovery Project Information Report

PROJECT USE ONLY

Priority _____ Form # _____

Clone Name _____

Date: _____

Location

Property owner (if known): _____

Phone: _____ E-mail: _____

RR #: _____ Closest emergency #: _____

Street address: _____

Township, town or city: _____ County: _____

Co-ordinates (dd.mmmm °): _____ ° N _____ ° W

Elevation (m): _____

Description of healthy elm

Habitat: _____

Height: _____ m Circumference: _____ cm

Crown diameter: _____ m Crown shape: _____

Leaf characteristics: _____

Twig characteristics: _____

- Are there short branches along the trunk? Yes No
- Can a hanging branch end be reached? Easily Pole pruner Out of reach
- Has this tree been treated to prevent disease? Yes No Not known

If yes, when? _____

- Are dead elms nearby? Many Few No

Largest dead elm circumference: _____ cm

Collection Information

Have the following been collected?

- Photos? Yes No

If yes, image numbers: _____

- Herbarium voucher? Yes No

- Scions? Yes No

Additional Notes:

Map for detailed location of elm(s)

The map should include:

- Directional arrow pointing north
- Closest town or highway with names/numbers of roads, streets, or side roads
- Clear mark to indicate the elm location
- Indication of distances (please indicate if elm is visible from the road)

Completed forms can be e-mailed to: elmrecov@uoguelph.ca