

# EARLY DETECTION PEST SPECIES REPORTING FORM

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## DIRECTIONS

- 1) Fill out this form.
- 2) Flag location and label flagging with "EDRR," name of person making ID, and date.
- 3) Take a photo(s) and make sure species and any distinguishable features are visible in the photo(s). If possible, include a common item (e.g. coin) for scale. Include additional photos of signs and symptoms.
- 4) ASAP, send card and/or information on card and photos to designated park contact (see species list pages) and Kurt Helf at the CUPN office:

PO Box 8  
Mammoth Cave, KY 42259  
Phone: 270-758-2163  
Fax: 270-758-2609  
Kurt\_Helf@nps.gov

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## GENERAL INFORMATION

Name(s): \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

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## SPECIES INFORMATION

Park: \_\_\_\_\_

State & County: \_\_\_\_\_

Species name: \_\_\_\_\_

GPS Coordinates (UTMs or DD's--circle):

Y (Northing): \_\_\_\_\_

X (Easting): \_\_\_\_\_

UTM Zone: 16 or 17 (circle)

Datum: \_\_\_\_\_

Error (meters): \_\_\_\_\_

How were the coordinates obtained (e.g. phone, GPS unit etc.)? \_\_\_\_\_

Over

PEST

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## SPECIES INFORMATION (cont.)

Location Description (be as specific as possible):

Habitat (eg. forest edge, mixed forest, open field):

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Host Species Involved: \_\_\_\_\_  
\_\_\_\_\_

DBH (if tree species): \_\_\_\_\_

Host Species Stem Count: \_\_\_\_\_

Type of Evidence Present (circle):

1. Crown dieback
2. Foliar injury (chlorosis, necrosis, other discoloration)
3. Sawdust
4. Exit holes
5. Other \_\_\_\_\_

Specimen Collected (circle one)? Yes No

Photograph Taken (circle one)? Yes No

Certainty of Identity (circle one):

Extremely confident  
Moderately confident  
Not very confident

Other Comments (eg. site accesibility):

# EARLY DETECTION PLANT SPECIES REPORTING FORM

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## DIRECTIONS

- 1) Fill out this form.
- 2) Flag location and label flagging with "EDRR," name of person making ID, and date.
- 3) Take a photo(s) and make sure any flowers, fruits, and any other distinguishable features are visible in the photo(s). If possible, include a common item (e.g. dollar bill) for scale.
- 4) ASAP, send card and/or information on card and photos to designated park contact (see Species List pages) and Teresa Leibfreid at the CUPN office:

PO Box 8  
Mammoth Cave, KY 42259  
Phone: 270-758-2135  
Fax: 270-758-2609  
Teresa\_Leibfreid@nps.gov

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## GENERAL INFORMATION

Name(s): \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

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## SPECIES INFORMATION

Park: \_\_\_\_\_

State & County: \_\_\_\_\_

Species name: \_\_\_\_\_

GPS Coordinates (UTMs or DD's--circle):

Y (Northing): \_\_\_\_\_

X (Easting): \_\_\_\_\_

UTM Zone: 16 or 17 (circle)

Datum: \_\_\_\_\_

Error (meters): \_\_\_\_\_

How were the coordinates obtained (e.g. phone, GPS unit etc.)? \_\_\_\_\_

Over

PLANT

# EARLY DETECTION PLANT SPECIES REPORTING FORM

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## SPECIES INFORMATION (cont.)

Location Description (be as specific as possible):

Infested Area (choose one):

\_\_\_\_\_ Sq. ft. \_\_\_\_\_ Sq. m. \_\_\_\_\_ Acres \_\_\_\_\_ Hectares

Gross Area (choose one):

\_\_\_\_\_ Sq. ft. \_\_\_\_\_ Sq. m. \_\_\_\_\_ Acres \_\_\_\_\_ Hectares

Habitat (eg. forest edge, mixed forest, open field)

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Canopy Closure (check one) :

Trace (<1%)  Low (1-5%)  Moderate (5.1 - 25%)  High (25.1 - 100%)

Abundance/Density:

Single  Scattered  Scattered dense patches  
 Dense monoculture  Linearly scattered

Stem Count : \_\_\_\_\_

Plant Description (check all that apply):

In Flower  In Fruit  Seedlings/Rosettes  Seeds  
 Dormant/Dead  Bolting  Unknown

Certainty of Identity (circle one):

Extremely confident  
Moderately confident  
Not very confident

Other Comments (eg. site accesibility):