



THE
AMERICAN
CHESTNUT
FOUNDATION

Tree Locator Form

Purpose. This form is to help TACF record, map, and analyze chestnut trees across its range. This form should be printed and filled out with as much information as available and submitted with a leaf and twig sample to the office listed below. An analysis of the characteristics and microscopics will be completed by a TACF identification expert and the results will be sent to the submitter.

Leaf and Twig Sample. Please cut a mature leaf that has been growing in the full sun and a twig with some leaf buds and place them in an envelope. Do not use plastic due to the molding effect. Wrap the samples in a single paper towel to cushion in the mail. **We appreciate your participation**

SUBMIT SAMPLE TO:

Dr. Martin Cipollini (or)
Matt Summerlin
P.O. Box 430 Berry College
Rome, GA 30161

Questions? Contact:
e-mail: ga@acf.org

For more information, please visit:
<http://www.gatacf.org>

Location:

County: _____ Town: _____ State: _____

Latitude (N): _____ Longitude (W): _____

Location information is crucial. The closer you can get us to a tree with your directions, the better. Lat/Long measures are the best way to give us good location information. A great program to use for obtaining location information is Google Earth (<http://earth.google.com/>) or TopoZone (<http://www.topozone.com>). If you can't obtain Lat/Long measurements, then please attach a map and directions to the tree from the nearest road.

Tree Information:

Diameter (inches @ 4.5ft): _____ Height (feet): _____

Isolated Tree Clump of Trees (number): _____

Clearcut w/ many _____ (~acres)

Burs: None Few Many Unknown

Catkins: Present Absent Unknown

Surroundings: Full Sunlight Partial Shade Full cover

Blight: Not Visible Visible Sunken Canker(s)

Swollen Canker(s)

Could we reach the tree with a large truck? Yes No

Comments _____

Owner of Property Information

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Are there restrictions to viewing the tree? Yes No
Is permission of the owner suggested before viewing? Yes No

Form Submitted By:

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Analysis Information

Checker: _____ Date: _____

Classification: American Other Hybrid

Grade: _____ Type: _____ Type: _____

Spp: _____ (if hybrid, what was found?)

Notes:

Tree Name: _____ Tree Code: _____