



NORS-DUC & CDFA BMP Program Questionnaire



Nursery Name:	Nursery Type:	Nursery Lic #:	
Site Address:	City:	Zip:	
Mailing Address:	City:	State:	Zip:
Contact Person:	Phone:	Email:	

- *Please include a site map with nursery layout if possible**
- *Information is accurate as of (insert date)**

Types of plants grown (natives, ornamental, restoration plants, trees, etc):	
Acreage on property:	Acreage in production:
Average number of plants:	Range of sizes of potted plants/liners:
Source of irrigation water:	Source of potting soil:
Buy-in product or propagate on site:	# of Greenhouses and Square Footage:
Location of other production/holding sites within and outside of CA:	Number of employees:
Additional Comments:	