NATIONAL AGRICULTURAL STATISTICS SERVICE

2005 PEANUT POSTHARVEST CHEMICAL USE SURVEY

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VERSION	ID	SUBTRACT	T-TYPE	TABLE	LINE
01	— — — — — — — — — — —	__ __	**0**	**000**	**00**

CONTACT RECORD		
DATE	**TIME**	**NOTES**

INTRODUCTION:
[*Introduce yourself, and ask for the operator. Rephrase in your own words*.]

We are collecting information on chemical use and need your help to make the information as accurate as possible. Authority for collection of information on the Peanut Postharvest Chemical Use Survey is Title 7, Section 2204 of the U.S. Code. This information will be used for analysis and to compile and publish estimates for your state and the United States. Response to this survey is confidential and voluntary.

We encourage you to refer to your records during the interview.

BEGINNING TIME {MILITARY}. . . . .

004
__ __ __ __

Name_____

Address_____

Phone(_____)_____

[ ] [*Name, address and partners verified and updated if necessary.*

1. Did this operation (*as listed on the label*) handle/receive any peanuts from August 1, 2004 to July 31, 2005?

   [ ] **YES** - [*Go to page 3*.]

   [ ] **NO**- [*Go to page 2*.]

CHANGE IN OPERATION

- **[*Complete this section only if item 1 on the front page is answered "No".*]**

1. Has the operation named on the label been **sold, rented, or turned over** to someone else?

   ☐ **YES** - [*Go to item 2*.]   ☐ **No** – [*Continue.*]

   a. Will the operation handle or receive peanuts or other crops at any of its facilities in 2005?

   ☐ **YES**   ☐ **DON'T KNOW**   ☐ **NO**

   [Write a note to explain the situation, then go to back page, Conclusion.]

   _____

   _____

   _____

2. Please provide the name and address of the operation that has taken over
   the business you formerly operated:

   Operation Name:_____

   Operator Name_____

   Address:_____

   City:_____ State:_____ Zip:_____

   Phone:_____

Make notes below and conclude interview.

NOTES AND CALCULATIONS:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Now I would like to ask about the peanuts handled/received from August 1, 2004 to July 31, 2005.

Please use your records to help us get an accurate record of peanut receipts.

1. What was the total quantity of **unshelled peanuts** handled/received from August 1, 2004 to July 31, 2005 on this operation?. . . . .

| 1 - BUSHEL (60 lbs) |
| 4 - SHORT TON (2,000 lbs) |
| 5 - CWT. (100 lbs) |
| 6 - POUND |
| 7 - METRIC TON (2,204.6 lbs) |
| 9 - OTHER |

QUANTITY		UNIT	If "9" enter POUNDS/UNIT
200 __ __ __ , __ __ __ , __ __ __ . __		201	202 . __

2. What was the total quantity of **shelled peanuts** handled/received from August 1, 2004 to July 31, 2005 on this operation?

QUANTITY		UNIT	If "9" enter POUNDS/UNIT
210 __ __ __ , __ __ __ , __ __ __ . __		211	212 . __

3. Did **ALL** peanuts received from August 1, 2004 to July 31, 2005 receive a postharvest chemical application?

☐ **YES** - [*Go to Section B, page 4.*]   ☐ **NO** - [*Continue.*]

4. Did **ANY** peanuts received from August 1, 2004 to July 31, 2005 receive a postharvest chemical application?

☐ **YES** - [*Continue.*]   ☐ **NO** - [*Go to Section C, page 6.*]

5. Of the peanuts in items 1 and 2, how many, both unshelled and shelled, **DID NOT** receive postharvest chemical applications while in storage, on the ground, in barges, ships, railcars or on trucks?

	QUANTITY NOT TREATED	OR	PERCENT OF TOTAL NOT TREATED
a. **Unshelled peanuts?**.	206 __ __ __ , __ __ __ , __ __ __ . __		207 _____
b. **Shelled peanuts?**.	216 __ __ __ , __ __ __ , __ __ __ . __		217

ENUMERATOR NOTE: [*If postharvest chemicals were applied, go to Section B, page 4.*]

Now I have some questions about postharvest chemical data on **peanuts** handled, stored, or processed by your operation from August 1, 2004 to July 31, 2005. I will be asking for chemical products used, quantity treated, total amount of product applied, timing and method of application. Please use your records to answer the questions as accurately as possible and to insure we do not miss any products used. Include shelled and unshelled peanuts treated while in storage by this operation or on the ground, or in barges, ships, rail cars or on trucks.

OFFICE USE
LINES IN TABLE

T-TYPE	TABLE	LINE	399
3	**001**	**99**	

TIMING CODES FOR COLUMN 2
5 - In Bound
6 - Putting in Warehouses
7 - While Stored
8 - Out Bound

NOTES	LINE	1 What product was applied? (in Respondent Booklet)		2 When was this product applied? [Enter code from above.]	3 (a) Type of Peanut? 1 = Shelled 2 = Unshelled CODE	3 (b) What was the total quantity of peanuts treated with this chemical (in column 1)?
		(a) COMMON OR TRADE NAME	**(b) PRODUCT CODE**			
	01		305	307	320	321 .
	02		305	307	320	321 .
	03		305	307	320	321 .___
	04		305	307	320	321 .
	05		305	307	320	321 .
	06		305	307	320	321 .___
	07		305	307	320	321 .
	08		305	307	320	321 .
	09		305	307	320	321 .___
	10		305	307	320	321 .

[*For pesticides not listed in Respondent Booklet, specify---*]

LINE NO.	EPA No. or Trade name and Formulation	Form Purchased (*Liquid or Dry*)	Where Purchased [*Ask only if EPA No. cannot be reported.*]
_____			
_____			
_____			
_____			

UNIT CODES FOR COLUMN 4

1 - BUSHEL (*60 lbs*)
4 - SHORT TON (*2,000 lbs*)
5 - CWT. (*100 lbs*)
6 - POUND
7 - METRIC TON (*2,204.6 lbs*)
9 - OTHER

UNIT CODES FOR COLUMN 7

1 - POUNDS
12 - GALLONS
13 - OUARTS
14 - PINTS
15 - OUNCES, LIQUID
28 - OUNCES, DRY
30 - GRAMS
40 - KILOGRAMS
41 - LITERS
45 - PELLETS
46 - TABLETS
50 - OTHER (*Specify* _____)

APPLICATION CODES FOR COLUMN 8

3 - DIRECT SPRAY DURING LOADING
5 - TOP DRESS
7 - FUMIGATION WITH PELLETS/TABLETS
9 - HEAD SPACE MISTING DEVICE
10 - FUMIGATION WITH GAS
11 - OTHER (Specify _____)

L I N E	4 [*Enter Unit code from above*]	5 If column 4 unit equals "9" enter pounds per unit.	6 **What was the total amount of formulated product applied to the amount of peanuts in column 3b?**	7 [*Enter unit code from above.*]	8 **What was the method used to apply this product?** **CODE**
01	322	323	309 .___	310 .___ ___	311
02	322	323	309 .___	310 .___ ___	311
03	322	323	309 .___	310 .___ ___	311
04	322	323	309 .___	310 .___ ___	311
05	322	323	309 .___	310 .___ ___	311
06	322	323	309 .___	310 .___ ___	311
07	322	323	309 .___	310 .___ ___	311
08	322	323	309 .___	310 .___ ___	311
09	322	323	309 .___	310 .___ ___	311
10	322	323	309 .___	310 .___ ___	311

Enumerator Notes:

_____

_____

_____

_____

Now I have some questions about pest management practices you may have used at your facilities. Include **all peanuts** handled.

T-TYPE 0	TABLE 000	LINE 00

1. **Did you use a ---**

                                                                 CODE

   a. power probe?

       ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*].   650

   b. aeration controller?

       ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*].   651

   c. phosphine pellet dispenser?

       ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*].   652

   d. temperature cable?

       ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*].   653

   e. re-circulation fumigation device?

       ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*].   655

   f. deep bin sampler?

       ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*].   656

2. How often are your peanuts inspected for insects in your (*concrete silos, flat storage warehouses, or other structures*) (***including*** wood bins) during the spring/summer and fall/winter months?

	SPRING/SUMMER	FALL/WINTER		CODE
Concrete Silos.	658	659		1 - DAILY
				2 - TWICE A WEEK
Flat Storage Warehouses.	660	661	. . . .	3 - WEEKLY
				4 - EVERY 2 WEEKS
				5 - MONTHLY
Other Structures (*Include wood bins*).	662	663		6 - OTHER – (*Specify_____*)
				7 - DO NOT MONITOR
				8 - DO NOT HAVE STRUCTURE

3. How often do you measure peanut temperature in your (*concrete silos, flat storage warehouses, or other structures*) (***including*** wood bins) during the spring/summer and fall/winter months?

	SPRING/SUMMER	FALL/WINTER		CODE
Concrete Silos.	664	665		1 - DAILY
				2 - TWICE A WEEK
Flat Storage Warehouses.	666	667	. . . .	3 - WEEKLY
				4 - EVERY 2 WEEKS
				5 - MONTHLY
Other Structures (*Include wood bins*).	668	669		6 - OTHER – (*Specify_____*)
				7 - DO NOT MONITOR
				8 - DO NOT HAVE STRUCTURE

4. Which practices do you use at your storage facilities---

   Did you ---

                                                                     CODE

   a. sweep or vacuum, empty warehouse floors?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 670 |

   b. hose down empty warehouse floors?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 671 |

   c. use residual insecticides on inner surface of empty warehouses?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 672 |

   d. pick up spilled peanuts/clean surrounding areas?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 673 |

   e. control vegetation around warehouses?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 674 |

   f. clean dump pits and transfer legs?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 675 |

   g. use rodent traps or bait stations?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** – [*Continue.*]. . . . . | 676 |

5. Did you do any other cleaning activities besides the ones listed above to your storage facilities?

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO** [*Go to item 6.*]. . . . . | 677 |

   a. What did you do? [*Record responses below.*]

                                                                        OFFICE USE

   _____ | 678 |

   _____ | 679 |

   _____ | 680 |

   _____ | 681 |

6. Did you fumigate peanuts?   **CODE**

   ☐ **YES** – [*Enter code 1 and continue.*]   ☐ **NO –** *Go to Conclusion*.]. . . . . | 682 |

   a. What was the strategy(ies) you used to decide when to fumigate peanuts?
   (*Enter up to two strategies.*)

1 - PRESET CALENDAR DATE	
2 - WAREHOUSE SAMPLES	
3-SCHEDULED WITH OTHER HANDLING OPERATIONS	
4 - INSECT TRAP COUNTS	683
5 - VISUAL PEANUT INSPECTION	
6 - CUSTOMER REQUEST	684
7 - OTHER – (*Describe* **)**	

	COMPLETION CODE for CHEMICAL APPLICATIONS TABLE		**COMPLETION CODE for PEST MANAGEMENT SECTION**	
	1 – Incomp/R	300	1 - Incompl/R	600
	3 – Valid Zero			

CONCLUSION

SURVEY PUBLICATIONS

That completes the survey. Would you like to receive a free copy of the
results when they are published? (Results will also be available on the Internet at http://www.usda.gov/nass/)

CODE

☐ **YES** – [*Enter code 1 and continue*.]   ☐ **NO** – [*Continue.*]. . . . .

099

[*Thank the respondent then review this questionnaire*.]

ENDING TIME [*MILITARY*]. . . . .

005
__ __ __ __ __

OFFICE USE
TIME IN HOURS

006
. __

RECORDS USE

Did respondent use operation records to report chemical data?

☐ **YES** – [*Enter code 1 and continue*.]   ☐ **NO** – [*Continue.*]. . . . .

064

SUPPLEMENTS USED

NUMBER

Record the total number of chemical treatment supplements used to
complete this interview. . . . .

068

Reported by: _____ Telephone No.(_____) _____

Response		Respondent		Mode		Enum.	Eval.	Date MM DD YY	R Unit	Adj Factor	Optional	Optional
1-Comp 2-R 3-Inac 4-Office Hold 8-Known Zero	9901	1- Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Other	9902	2-Tel 3-Face-to -Face	9903	098	100	007 __ __ __ __**05**	921	922	002	003
S/E Name												

8