

# MINNESOTA ANNUAL PESTICIDE AND FERTILIZER SURVEY

## DRAFT FOR SURVEYS BEGINNING SPRING OF 2019, 2020, 2021

All requested updates for 2020, 2021 incorporated.

OMB No. 0535-0218  
 Approval Expires: 7/31/2021  
 Project Code: 778 QID: 163695  
 SMetaKey: 3695



United States  
 Department of  
 Agriculture



NATIONAL  
 AGRICULTURAL  
 STATISTICS  
 SERVICE



MINNESOTA  
 DEPARTMENT OF  
 AGRICULTURE

USDA/NASS - MN  
 210 Walnut St., #833  
 Des Moines, IA 50309  
 Phone: 1-800-772-0825  
 FAX: 1-855-271-9802  
 e-mail: NASSRFOUMR@nass.usda.gov

Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is **voluntary**.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0218. The time required to complete this information collection is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The Minnesota Department of Agriculture, in cooperation with the National Agricultural Statistics Service (NASS), will conduct periodic surveys of major crop producers that collect information on pesticide and fertilizer use and pesticide use rates. Survey respondents are randomly selected, and the reported results are based on advanced standardized statistical analyses conducted by NASS nationwide. Your response is necessary to help provide the best statistics possible. If there are any questions, contact the Minnesota State Statistician at (615) 728-3113.

1. Did this operation plant any **[[CORN]]** or **[[SOYBEAN]]** in **[Year]**?

<sup>1</sup> Yes - Continue    <sup>3</sup> No – Go to Conclusion

### Section 2 – 2019 **[Corn]** Crop Acres

2. How many acres of **[Corn]** were planted for the 2019 crop year? (exclude sweet corn) . . . . .

Acres
xxx

[If **[Corn]** acres greater than zero, then continue, otherwise go to **Section 3**.]

3. How many acres of **[Corn]** were treated with herbicides? . . . . .

Acres
xxx

4. How many acres of **[Corn]** were treated with insecticides? (Exclude seed treatments). . . . .

xxx
-----

5. How many acres of **[Corn]** were treated with fungicides? (Exclude seed treatments). . . . .

xxxx
------

### Section 3 – 2019 **[[Soybean]]** Crop Acres

6. How many acres of **[[Soybean]]** were harvested for the 2019 crop year? . . . . .

Acres
xxx

[If **[[Soybean]]** acres are greater than zero then continue, otherwise go to **Section 4**.]

7. How many acres of **[[Soybean]]** were treated with herbicides? . . . . .

Acres
xxx

8. How many acres of **[[Soybean]]** were treated with insecticides? (Exclude seed treatments). . . . .

xxx
-----

9. How many acres of *[[Soybean]]* were treated with fungicides? (Exclude seed treatments) . . . . .

xxxx
------





[If Herbicide, Insecticide or Fungicide type or quantity is unknown] Were any of the Herbicide, Insecticide or Fungicide applied by someone else (i.e. custom applied)? Or would a chemical dealer or co-op know what Herbicide, Insecticide or Fungicide were applied? Yes\_\_ No\_\_

If Yes, may we call your chemical dealer to get the missing information about the fertilizers and nutrients applied to this field?

What is the name of the company that applied your chemical? \_\_\_\_\_

Who should we contact for this follow up information? \_\_\_\_\_

Who should we contact at that company? \_\_\_\_\_

[New Questions added only for records with Soybean Insecticide acres reported in Q7. In the fall of 2017, that was for about 425 of the total responses.]

If Q7 > 0, then

1. If insecticide was applied to the 2019 soybean crop, how it was applied (choose all that apply)?

- a. Farmer- ground application
- b. Farmer- aerial application
- c. Dealer- ground application
- d. Dealer- aerial application
- e. Other

2. For what insect, insecticide application was made (choose all that apply)?

- a. Soybean aphid,
- b. Spider mites,
- c. Others
- d. Do not know

*If for soybean aphid then ask questions 3, 4,5,6, otherwise move to question 7*

3. Who scouted the fields for soybean aphid (choose all that apply)?

- a. Farmer
- b. Dealer
- c. Crop consultant
- d. Other than the above
- e. Did not scout
- f. Do not know

4. What threshold (aphids per plant) did you use for applying the insecticide for soybean aphid (select one)?

- a. Did not use thresholds
- b. 1-30,
- c. 31-50,
- d. 51-100,
- e. 101-150,
- f. 151-200,
- g. 201-250
- h. Over 250
- i. Do not know

5. Were records kept for soybean aphid thresholds?

- a. Yes, for all fields
- b. Yes, for some fields
- c. No
- d. Do not know

6. What factors other than thresholds did you consider to make insecticide application for soybean aphid (choose all that apply)?

- a. Did not consider anything other than thresholds
- b. Followed an IPM plan
- c. Followed a calendar schedule
- d. Followed advice from dealer
- e. Followed advice from crop consultant

f. Followed other farmers

7. What factors other than cost and effectiveness were considered important when choosing an insecticide product (choose all that apply)?

- a. Safety to the applicator
- b. Safety to insect predators
- c. Setbacks from water
- d. Label language regarding bees
- e. None

8. Were there any bee hives within 3 miles of any soybean field when insecticide was applied?

- a. Yes
- b. No
- c. Do not know

9. What setbacks from water, if any, were used?

- a. None
- b. Setbacks listed on the label
- c. Label did not require setbacks from water
- d. No water around the field
- e. Do not know

10. What percentage of your soybean seeds were treated with insecticide (for all soybean acres)? (This question is placed at the end to avoid confusion with other insecticide application questions)

- a. None
- b. 1-25
- c. 26-50
- d. 51-75
- e. 76-99
- f. 100
- g. Do not know

## Section 6 – [Corn] Fertilizer Management

I will now ask you about your fertilizer inputs on [Corn] acres.

Did all your [Corn] fields receive manure for the [2019] crop year?

1. Yes, all my [Corn] fields received manure. Go to Section 7.
2. No, I have at least 1 [Corn] field with no manure applied.

First on a [Corn] field with no manure or compost applied in the fall of [2018] and no manure or compost applied anytime during the 2019 crop year.

**A1.** Do you have a [Corn] field without manure applied in the fall of 2018 or anytime in [2019] before or during the crop year? Yes \_\_\_\_ [continue] No \_\_\_\_ [Skip to Section 7]

Think about your largest [Corn] field that you planted in 2019 without any manure.

I will now ask you questions about that specific field. All following questions will be in relation to that specific field.

**A5.** How many acres are in this field in 2019? \_\_\_\_\_

**A2.** Was this field irrigated? Yes No

**A3.** What was the crop grown on this field in 2018 before the 2019 [Corn] crop? (Not including cover crop)

- 1 Soybeans
- 2 corn
- 3 alfalfa
- 4 small grains

Respondent Name: _____	9911	9910	MM	DD	YY
Phone: _____		Date: _____			

**This completes the survey. Thank you for your help.**

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-Mail	9903	9998	9900	9985	9989			
2-R		2-Sp		2-Tel					_____			
3-Inac		3-Acct/Bkpr		3-Face-to-Face					_____			
4-Office Hold		4-Partner		4-CATI					_____			
5-R – Est		9-Oth		5-Web					_____			
6-Inac – Est				6-e-mail					_____			
7-Off Hold – Est				7-Fax					_____			
		8-CAPI	9907				9908	9906	9916			
		19-Other										

S/E Name

99 other

**A4. If corn [A3 (2)]** What was the crop harvested from this field in the 2017 season, before the last two crops?

- 1 Soybeans
- 2 corn
- 3 alfalfa
- 4 small grains
- 99 other

**A5.** How many acres are in this field in [Prev Year]? \_\_\_\_\_

(New) What was the yield goal when planting this field in 2019? \_\_\_\_\_ bushels per acre.

**A6.** What was the average [Corn] yield of this field over the past three [Corn] crops? (or estimate average yield if not farmed for 3 [Corn] crops) \_\_\_\_\_

**A7.** Was any commercial fertilizer applied to this [Corn] field for the 2019 [Corn] crop? Yes No  
IF no go to **Second Field**.

**A8.** Was any commercial fertilizer applied **on this [Corn] field** with a variable rate or more than one rate such as by management zone or grid on this [Corn] field? Yes No

