



# C & C Peat Co., Inc.

## Premium Quality Potting Media

(800) 330-4866

<http://www.cepeat.com>

[info@cepeat.com](mailto:info@cepeat.com)

### Potting Media Research Survey

C&C Peat is conducting some market research into the various markets that we serve to see if there are any trends in types of plants grown, pot sizes, watering techniques, or other aspects that will let us better serve you. We would greatly appreciate any input you can give to the following questions. All information will be kept in the strictest confidence. Please return by fax to 352-365-0367. Each nursery that returns this form will **receive 5% off** their next delivery (delivered by 7/30/10). Thank You for participating!

Nursery Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ Phone/Fax: \_\_\_\_\_

Website: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### Primary Crops Grown:

Size of Plants:

Size of Container:

- |          |       |       |
|----------|-------|-------|
| 1) _____ | _____ | _____ |
| 2) _____ | _____ | _____ |
| 3) _____ | _____ | _____ |
| 4) _____ | _____ | _____ |
| 5) _____ | _____ | _____ |

(If there are significantly more crops than 5, please list on a separate page)

#### Potting Media:

Do you use different potting media for different plants? \_\_\_\_\_ Yes \_\_\_\_\_ No

If No, what is your primary potting media mix: \_\_\_\_\_

If Yes, what potting media mixes do you use:

- |                     |             |
|---------------------|-------------|
| 1) Mix/Media: _____ | Crop: _____ |
| 2) Mix/Media: _____ | Crop: _____ |
| 3) Mix/Media: _____ | Crop: _____ |

#### Watering Techniques: Please list your basic watering techniques (ie: drip, overhead, etc):

- |                     |  |
|---------------------|--|
| 1) Technique: _____ | Duration: _____(hours) _____(times/week) |
| 2) Technique: _____ | Duration: _____(hours) _____(times/week) |
| 3) Technique: _____ | Duration: _____(hours) _____(times/week) |

Does your nursery Top-Dress with **Fertilizer/Pesticides**? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, what Fertilizers/Pesticides:

- |          |             |
|----------|-------------|
| 1) _____ | Crop: _____ |
| 2) _____ | Crop: _____ |
| 3) _____ | Crop: _____ |

Survey Respondent's Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Fertilizers**



**Quality Potting Media**



**Quality Service**

**1650 County Road 470  
Okahumpka, FL 34762  
Office: (352) 323-8213  
Fax: (352) 365-0367**