

Vineyard Disease Management Inspection Checklist

Date of Inspection:

Inspector Name:

Block/Row/Section:

1. Visual Evaluation

Criteria	Checked	Notes
Evidence of powdery mildew	<input type="checkbox"/>	
Evidence of downy mildew	<input type="checkbox"/>	
Botrytis (grey mold) presence	<input type="checkbox"/>	
Black rot symptoms	<input type="checkbox"/>	
Other disease symptoms	<input type="checkbox"/>	

2. Disease Management Practices

Practice	Yes	No	Notes
Canopy management performed	<input type="checkbox"/>	<input type="checkbox"/>	
Proper pruning observed	<input type="checkbox"/>	<input type="checkbox"/>	
Sanitation measures in place	<input type="checkbox"/>	<input type="checkbox"/>	
Fungicide application according to schedule	<input type="checkbox"/>	<input type="checkbox"/>	

3. Weather & Environmental Factors

Observation	Yes	No	Notes
Recent heavy rainfall	<input type="checkbox"/>	<input type="checkbox"/>	
Prolonged humidity observed	<input type="checkbox"/>	<input type="checkbox"/>	
Standing water present	<input type="checkbox"/>	<input type="checkbox"/>	

4. Additional Notes & Recommendations

