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| <b>Biotopname</b><br>Seggenried südlich "Eulengrund"                                                                                                                                                                                                                                                                                                                 |   | <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td>X</td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </table> |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   | X |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  | <b>TK10</b><br><table border="1"> <tr> <td>0</td><td>5</td><td>0</td><td>5</td> <td>-</td> <td>1</td><td>1</td><td>2</td> <td>-</td> <td>4</td><td>0</td><td>1</td><td>1</td> </tr> </table> |  | 0 | 5 | 0 | 5 | - | 1 | 1 | 2 | - | 4 | 0 | 1 | 1 | <b>Biotop-Nr.</b> |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
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| 0                                                                                                                                                                                                                                                                                                                                                                    | 5 | 0                                                                                                                                                                                                                                                                                                               | 5 | -                                                                                                                                                                                              | 1                                                                                                                                                                                                                      | 1 | 2                                                                                    | -                        | 4                                                                                              | 0 | 1 | 1 |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Standort /Geologie</b><br>vermoorte Niederung/Sand der Endmoräne                                                                                                                                                                                                                                                                                                  |   |                                                                                                                                                                                                                                                                                                                 |   | <b>Anschluß in TK</b><br><table border="1"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table> |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
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|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Naturraum</b> Schweriner Seengebiet                                                                                                                                                                                                                                                                                                                               |   |                                                                                                                                                                                                                                                                                                                 |   | <b>Film-Nr.</b><br>Luftbild-Nr. <table border="1"><tr><td>1</td><td>8</td><td>6</td></tr></table>                                                                                              |                                                                                                                                                                                                                        | 1 | 8                                                                                    | 6                        | <b>Bild-Nr.</b><br><table border="1"><tr><td>0</td><td>2</td><td>7</td><td>1</td></tr></table> |   | 0 | 2 | 7                                                                           | 1 |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| 1                                                                                                                                                                                                                                                                                                                                                                    | 8 | 6                                                                                                                                                                                                                                                                                                               |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| 0                                                                                                                                                                                                                                                                                                                                                                    | 2 | 7                                                                                                                                                                                                                                                                                                               | 1 |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <table border="1"> <tr><td>4</td><td>0</td><td>2</td></tr> </table>                                                                                                                                                                                                                                                                                                  |   | 4                                                                                                                                                                                                                                                                                                               | 0 | 2                                                                                                                                                                                              |                                                                                                                                                                                                                        |   | Größe in ha <table border="1"><tr><td></td><td></td><td></td><td>0</td></tr></table> |                          |                                                                                                |   |   | 0 | <table border="1"><tr><td>0</td><td>0</td><td>2</td><td>5</td></tr></table> |   | 0 | 0 | 2 | 5 |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| 4                                                                                                                                                                                                                                                                                                                                                                    | 0 | 2                                                                                                                                                                                                                                                                                                               |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 | 0 |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| 0                                                                                                                                                                                                                                                                                                                                                                    | 0 | 2                                                                                                                                                                                                                                                                                                               | 5 |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Landkreis / Kreisfreie Stadt</b><br>Parchim                                                                                                                                                                                                                                                                                                                       |   | <b>Gemeinde / Stadt</b><br>Crivitz, Stadt                                                                                                                                                                                                                                                                       |   | Länge in m <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>                                                                                                             |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>lfd. Nr. im Biotopverzeichnis</b><br>04844                                                                                                                                                                                                                                                                                                                        |   |                                                                                                                                                                                                                                                                                                                 |   | min. Breite in m <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>                                                                                                       |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Schutzmerkmale</b><br>geschützt nach §20 LNatG M-V                                                                                                                                                                                                                                                                                                                |   | <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                             |   | max. Breite in m <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>                                                                                                       |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   | 1 - vollständig 2 - überwiegend 3 - zum geringen Teil                                                                                                                                                                                                                                                           |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   | NLP <input type="checkbox"/> FND <input type="checkbox"/> NP <input type="checkbox"/> FiB <input type="checkbox"/>                                                                                                                                                                                              |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   | NSG <input type="checkbox"/> LSG <input type="checkbox"/> BR <input type="checkbox"/> FFH-Geb. <input type="checkbox"/>                                                                                                                                                                                         |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   | ND <input type="checkbox"/> GLB <input type="checkbox"/> FnB <input type="checkbox"/> Wald-Totalreservat <input type="checkbox"/>                                                                                                                                                                               |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Hauptcod.</b>                                                                                                                                                                                                                                                                                                                                                     |   | <b>Nebencode</b>                                                                                                                                                                                                                                                                                                |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      | <b>Überlagerungscode</b> |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| Code V   G   R                                                                                                                                                                                                                                                                                                                                                       |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| %                                                                                                                                                                                                                                                                                                                                                                    |   | 1   0   0                                                                                                                                                                                                                                                                                                       |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Vegetationseinheiten</b><br>Sumpfschilf-Ried                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Habitate + Strukturen</b>                                                                                                                                                                                                                                                                                                                                         |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
|                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Beschreibung / Besonderheiten</b><br>Innerhalb einer entwässerten Niederung, die großflächig als Grünland genutzt wird, hat sich nahe eines Kleingewässers ein Sumpfschilf-Ried erhalten. Das dichte Ried auf den feuchten - sehr feuchten vererdeten Torfen ist reich an Brennnessel. Neben Gräben und Extensivgrünland grenzt auch kleinflächig Ruderalflur an. |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Wertbestimmende Kriterien</b>                                                                                                                                                                                                                                                                                                                                     |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| Artenreichtum (Flora)<br>Vorkommen seltener / typischer Tierarten<br>seltener / gefährdeter Pflanzenbestand<br>seltene / gefährdete Pflanzengesellschaft<br>natürliche / naturnahe Ausprägung des Biotops<br>gute Ausbildung eines halbnatürlichen Biotops<br>typische Zonierung von Biotoptypen<br>Struktur- und Habitatreichtum                                    |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                | vielfältige Standortverhältnisse<br>historische Nutzungsformen<br>aktuelle Nutzung<br>Flächengröße / Länge<br>Umgebung relativ störungsarm<br>landschaftsprägender Charakter<br>Trittsteinbiotop / Vernetzungsfunktion |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Gefährdung</b>                                                                                                                                                                                                                                                                                                                                                    |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| Y   W   S                                                                                                                                                                                                                                                                                                                                                            |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                | keine Gefährdung                                                                                                                                                                                                       |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| <b>Empfehlung</b>                                                                                                                                                                                                                                                                                                                                                    |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |
| Z   S   E                                                                                                                                                                                                                                                                                                                                                            |   |                                                                                                                                                                                                                                                                                                                 |   |                                                                                                                                                                                                |                                                                                                                                                                                                                        |   |                                                                                      |                          |                                                                                                |   |   |   |                                                                             |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                   |  |

| STANDORTMERKMALE ( k - kleinflächig, g - großflächig )                  |  |  |  | TK10                                                                       |  |   |  |                                                                               |  |   |  |                                                                            |  | Biotop-Nr.                       |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|-------------------------------------------------------------------------|--|--|--|----------------------------------------------------------------------------|--|---|--|-------------------------------------------------------------------------------|--|---|--|----------------------------------------------------------------------------|--|----------------------------------|--|------------------------------------------------------|--|---|--|---|--|---|--|----------------|--|---|--|---|--|
|                                                                         |  |  |  | 0                                                                          |  | 5 |  | 0                                                                             |  | 5 |  | -                                                                          |  | 1                                |  | 1                                                    |  | 2 |  | - |  | 4 |  | 0              |  | 1 |  | 1 |  |
| <b>Substrat</b>                                                         |  |  |  | <b>Trophie</b>                                                             |  |   |  | <b>Wasserstufe</b>                                                            |  |   |  | <b>Relief</b>                                                              |  |                                  |  | <b>Exposition</b>                                    |  |   |  |   |  |   |  |                |  |   |  |   |  |
| k g                                                                     |  |  |  | k g                                                                        |  |   |  | k g                                                                           |  |   |  | k g                                                                        |  |                                  |  | k g                                                  |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Torf, wenig gestört   |  |  |  | <input type="checkbox"/> <input type="checkbox"/> dystroph                 |  |   |  | <input type="checkbox"/> <input type="checkbox"/> trocken                     |  |   |  | <input type="checkbox"/> <input type="checkbox"/> g eben                   |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> N  |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> g Torf, degradiert    |  |  |  | <input type="checkbox"/> <input type="checkbox"/> oligotroph               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> mäßig trocken               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> wellig                   |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> NO |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Antorf                |  |  |  | <input type="checkbox"/> <input type="checkbox"/> mesotroph                |  |   |  | <input type="checkbox"/> <input type="checkbox"/> wechselfeucht               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> kuppig                   |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> O  |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Sand                  |  |  |  | <input type="checkbox"/> <input type="checkbox"/> g eutroph                |  |   |  | <input type="checkbox"/> <input type="checkbox"/> frisch                      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> düinig                   |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> SO |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Kies / Steine         |  |  |  | <input type="checkbox"/> <input type="checkbox"/> poly- / hypertroph       |  |   |  | <input type="checkbox"/> <input type="checkbox"/> g feucht                    |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Berg / Rücken            |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> S  |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Lehm                  |  |  |  |                                                                            |  |   |  | <input type="checkbox"/> <input type="checkbox"/> k sehr feucht               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Riedel                   |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> SW |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Ton                   |  |  |  |                                                                            |  |   |  | <input type="checkbox"/> <input type="checkbox"/> naß                         |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Flachhang <= 9°          |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> W  |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Halbkalk / Kalk       |  |  |  |                                                                            |  |   |  | <input type="checkbox"/> <input type="checkbox"/> offenes Wasser              |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Steilhang > 9°           |  |                                  |  | <input type="checkbox"/> <input type="checkbox"/> NW |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Schlamm / Faulschlamm |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Nische                   |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  |                                                                            |  |   |  | <input type="checkbox"/> <input type="checkbox"/> quellig                     |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Senke / Strecksenke      |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> gestörter Boden       |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Kerbtal                  |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Sohlental                |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <b>NUTZUNGSMERKMALE ( k - kleinflächig, g - großflächig )</b>           |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <b>Nutzungsintensität</b>                                               |  |  |  |                                                                            |  |   |  | <b>Umgebung</b>                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| k g                                                                     |  |  |  | k g                                                                        |  |   |  | k g                                                                           |  |   |  | k g                                                                        |  |                                  |  | k g                                                  |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> intensiv              |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Fischerei                |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Acker / Gartenbau           |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Fließgewässer            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> extensiv              |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Angeln                   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Ackerbrache                 |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Stillgewässer            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> g aufgelassen         |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Erholung                 |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Grünland, intensiv          |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Trockenbiotop            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> keine Nutzung         |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Kleingartenbau           |  |   |  | <input type="checkbox"/> <input type="checkbox"/> g Grünland, extensiv        |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Grünanlage / Kleingarten |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Erwerbsgartenbau         |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Laub- / Mischwald           |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Weg                      |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Ferienhäuser             |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Nadelwald                   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Straße, Parkplatz        |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <b>Nutzungsart</b>                                                      |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bahnanlage               |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| k g                                                                     |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Gewerbe / Industrie      |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Acker                 |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Bodenentnahme            |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Feuchtwald / -gebüsch       |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Silo / Stallanlage       |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Wiese                 |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Verkehr                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Gehölz                      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Gebäude / Siedlung       |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Weide                 |  |  |  | <input type="checkbox"/> <input type="checkbox"/> Ver- / Entsorgungsanlage |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Röhricht / Feuchtrache      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Spülfeld / Halde         |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> forstliche Nutzung    |  |  |  | <input type="checkbox"/> <input type="checkbox"/> sonstige Nutzung:        |  |   |  | <input type="checkbox"/> <input type="checkbox"/> k Hochstauden / Ruderalflur |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bodenentnahme            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  |                                                                            |  |   |  | <input type="checkbox"/> <input type="checkbox"/> g Graben                    |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Pflanzenarten dominant                                                  |  |  |  | ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )          |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Carex acutiformis                                                       |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Pflanzenarten ±zahlreich                                                |  |  |  | ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )          |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Urtica dioica                                                           |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Pflanzenarten vereinzelt                                                |  |  |  | ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )          |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Cirsium oleraceum                                                       |  |  |  | Lythrum salicaria                                                          |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Angaben zur Fauna                                                       |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  |                                  |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Verwendete Unterlagen                                                   |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  | Datum erste Begehung: 05.04.2000 |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
|                                                                         |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  | Datum letzte Begehung:           |  |                                                      |  |   |  |   |  |   |  |                |  |   |  |   |  |
| Bearbeiter/in: IBS-Dubbert                                              |  |  |  |                                                                            |  |   |  |                                                                               |  |   |  |                                                                            |  | Foto: 1                          |  |                                                      |  |   |  |   |  |   |  | Folgeseiten: 0 |  |   |  |   |  |