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| Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   | B                | L | T                                                                                                                                                                                                                                                                                                                                                                                  | T | P | S                                              | B                                                                                                                                     | L | M |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
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| <b>Vegetationseinheiten</b><br>Besenginster-Gebüsch, Frühlingspark-Silbergras-Flur, Brombeer-Gebüsch                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |                  |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| <b>Habitate + Strukturen</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |   |                  |   | H                                                                                                                                                                                                                                                                                                                                                                                  | H | Z | D                                              | G                                                                                                                                     | B | D | G                                         | M | D | H                                                                                                                                                                                                                                                                                                                                                                                                     | B                                                                                                                                                          | D | H                                                                                                                                   | M | C | Z | V |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| <b>Beschreibung / Besonderheiten</b><br>Auf einem aufgelassenem, südexponierten Flachhang am nördlichen Waldrand der Slater Tannen südwestlich Parchims hat sich nach Nutzungsaufgabe auf sandigem, mäßig trockenem und nährstoffarmem Boden ein kleinflächiges Mosaik verschiedener Biotoptypen gebildet. Der größte Teil des struktur- und habitatreichen Biotops wird von einem Besenginster-Gebüsch eingenommen, durchsetzt von zahlreichen Überhälter- Kiefern und -Sand-Birken. Dazu kommen Sal-Weide, Rose und Schlehe. Am Nordrand, wo die Verbuschung lückiger ist, befinden sich einige kleine Geländemulden, ehemalige Bodenentnahmestandorte. Hier, wie auch an und unterhalb einer Böschung, die zum unbefestigten Sandweg abfällt, kommt eine Frühlingspark- Silbergras-Flur auf, mit Berg-Jasione und Kl. Sauerampfer. Es sind Sandmagerrasenarten, wie Feld-Beifuß, Kl. Habichtskraut und Hasen-Klee vorhanden, dazu Waldsaumarten, wie Gew. Goldrute und der Zichzack-Klee (Mittel-Klee). Beeinträchtigt wird das Biotop durch Müllablagerungen (Bauschutt, Welleternit), die beseitigt werden müssten, ansonsten sollte es der Sukzession überlassen werden. |   |                  |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| <b>Wertbestimmende Kriterien</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |   |                  |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> Artenreichtum (Flora)<br><input type="checkbox"/> Vorkommen seltener / typischer Tierarten<br><input type="checkbox"/> seltener / gefährdeter Pflanzenbestand<br><input type="checkbox"/> seltene / gefährdete Pflanzengesellschaft<br><input type="checkbox"/> natürliche / naturnahe Ausprägung des Biotops<br><input type="checkbox"/> gute Ausbildung eines halbnatürlichen Biotops<br><input type="checkbox"/> typische Zonierung von Biotoptypen<br><input checked="" type="checkbox"/> Struktur- und Habitatreichtum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |                  |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   | <input type="checkbox"/> vielfältige Standortverhältnisse<br><input type="checkbox"/> historische Nutzungsformen<br><input type="checkbox"/> aktuelle Nutzung<br><input type="checkbox"/> Flächengröße / Länge<br><input type="checkbox"/> Umgebung relativ störungsarm<br><input type="checkbox"/> landschaftsprägender Charakter<br><input type="checkbox"/> Trittsteinbiotop / Vernetzungsfunktion |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| <b>Gefährdung</b><br><br><table border="1" style="width:100%; text-align: center;"> <tr> <td>Y</td><td>A</td><td>W</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> <div style="text-align: right;">keine Gefährdung    <input type="checkbox"/></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |                  |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  | Y | A | W |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | A | W                |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| <b>Empfehlung</b><br><br><table border="1" style="width:100%; text-align: center;"> <tr> <td>Z</td><td>M</td><td>S</td> <td>Z</td><td>S</td><td>A</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |   |                  |   |                                                                                                                                                                                                                                                                                                                                                                                    |   |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  | Z | M | S | Z | S | A                                                                                                                                                                                                                                    |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |
| Z                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | M | S                | Z | S                                                                                                                                                                                                                                                                                                                                                                                  | A |   |                                                |                                                                                                                                       |   |   |                                           |   |   |                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                            |   |                                                                                                                                     |   |   |   |   |  |  |  |  |                                                                                                                                           |  |   |   |   |   |   |                                                                                                                                                                                                                                      |  |                                                                                                                                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |                                                                                                                                                                            |  |  |  |  |  |  |  |  |  |  |  |

| STANDORTMERKMALE ( k - kleinflächig, g - großflächig )                                                                                                                                                                                                                                                                                                                                   |  |  |  | TK10                                                                 |  |   |  |                                                                  |  |   |  |                                                                            |  | Biotop-Nr. |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|----------------------------------------------------------------------|--|---|--|------------------------------------------------------------------|--|---|--|----------------------------------------------------------------------------|--|------------|--|-------------------------------------------------------|--|---|--|---|--|---|--|-----------------------------------------------------------------------|--|---|--|---|--|
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  | 0                                                                    |  | 5 |  | 0                                                                |  | 5 |  | -                                                                          |  | 4          |  | 3                                                     |  | 2 |  | - |  | 4 |  | 0                                                                     |  | 0 |  | 6 |  |
| <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"/> eben                     |  |            |  | <input type="checkbox"/> <input type="checkbox"/> N   |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> 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"/> g 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"/> g Sand                                                                                                                                                                                                                                                                                                                                 |  |  |  | <input type="checkbox"/> <input type="checkbox"/> k 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"/> feucht         |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Berg / Rücken            |  |            |  | <input type="checkbox"/> <input type="checkbox"/> g S |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Lehm                                                                                                                                                                                                                                                                                                                                   |  |  |  |                                                                      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> 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"/> g 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"/> k 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                                                                   |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> intensiv                                                                                                                                                                                                                                                                                                                               |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Fischerei                |  |            |  |                                                       |  |   |  |   |  |   |  | <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"/> Stillgewässer       |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> g aufgelassen                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Erholung                 |  |            |  |                                                       |  |   |  |   |  |   |  | <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"/> Grünland, intensiv  |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Erwerbsgartenbau         |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Grünland, extensiv  |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Ferienhäuser             |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> g Weg               |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bodenentnahme            |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Straße, Parkplatz   |  |   |  |   |  |
| <b>Nutzungsart</b>                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| k g                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Acker                                                                                                                                                                                                                                                                                                                                  |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Verkehr                  |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bahnanlage          |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Wiese                                                                                                                                                                                                                                                                                                                                  |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Ver- / Entsorgungsanlage |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Gewerbe / Industrie |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Weide                                                                                                                                                                                                                                                                                                                                  |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  | <input type="checkbox"/> <input type="checkbox"/> sonstige Nutzung:        |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Silo / Stallanlage  |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> forstliche Nutzung                                                                                                                                                                                                                                                                                                                     |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Gebäude / Siedlung  |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Spülfeld / Halde    |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bodenentnahme       |  |   |  |   |  |
| Pflanzenarten dominant ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )<br>Avenella flexuosa Sarothamnus scoparius                                                                                                                                                                                                                                                      |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| Pflanzenarten ±zahlreich ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )<br>Corynephorus canescens Pinus sylvestris Prunus spinosa Rubus caesius<br>Solidago virgaurea                                                                                                                                                                                                 |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| Pflanzenarten vereinzelt ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )<br>Artemisia campestris Betula pendula Hieracium pilosella Jasione montana<br>Oenothera biennis Plantago lanceolata Quercus robur Rosa cf canina<br>Rumex acetosella Salix caprea Scleranthus annuus Spargula morisonii<br>Tanacetum vulgare Trifolium arvense Trifolium medium Urtica dioica |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| Angaben zur Fauna                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  |                                                       |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| Verwendete Unterlagen                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  | Datum erste Begehung: 12.09.1997                      |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  | Datum letzte Begehung:                                |  |   |  |   |  |   |  |                                                                       |  |   |  |   |  |
| Bearbeiter/in: StAUNLÜBZ-Hippke                                                                                                                                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  |                                                                  |  |   |  |                                                                            |  |            |  | Foto: 2                                               |  |   |  |   |  |   |  | Folgeseiten: 0                                                        |  |   |  |   |  |