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| <b>Beschreibung / Besonderheiten</b><br>Umgeben vom Laub-Mischwald des "Buchholz" südlich Parchim und über einen etwa 200 Meter langen, alten Graben mit dem südlich gelegenen "LSG Hündchenmoor" verbunden, liegt in einer vermoorten Senke ein Moorbirkenbruch. Auf feuchten bis z.T. sehr feuchten, überwiegend mesotrophen Torfen stockt ein Pfeifengras-Sumpfreitgras-Birkenbruchwald. Es handelt sich um einen dichten, jungen Moorbirken-Reinbestand. Die Krautschicht besteht aus den Entwässerungszeigern Pfeifengras und Flatter-Binse, daneben kommen Sumpfreitgras, Hunds-Sraußgras, Dornfarn, Sumpf-Labkraut, Sumpffarn, Schnabel-Segge, Gem. Helmkraut, Sumpf-Haarstrang u.a. vor. Von dem alten Graben geht eine Entwässerungswirkung aus, sodaß ein Verschluß anzuraten ist.                       |                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                   |                                           |   |                                                                                                                                                      |                                                                                                                                |   |   |   |   |   |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                        |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Wertbestimmende Kriterien</b> <table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> 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 </td> <td style="width: 50%; vertical-align: top;"> vielfältige Standortverhältnisse<br/> historische Nutzungsformen<br/> aktuelle Nutzung<br/> Flächengröße / Länge<br/> Umgebung relativ störungsarm<br/> landschaftsprägender Charakter<br/> Trittsteinbiotop / Vernetzungsfunktion </td> </tr> </table> |                                                                                                                                                                                                                   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| <b>Gefährdung</b><br><br><table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td>Y</td><td>W</td><td>E</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    <table border="1" style="border-collapse: collapse; width: 30px;"> <tr><td></td></tr> </table></div>                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                   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| <b>Empfehlung</b><br><br><table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td>Z</td><td>M</td><td>S</td> <td>Z</td><td>S</td><td>X</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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                   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                                                                                       | S | Z | S | X |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Z                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | M                                                                                                                                                                                                                      | S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Z                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | S                                                                                                                                                 | X                                         |   |                                                                                                                                                      |                                                                                                                                |   |   |   |   |   |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                 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                                                                                                                                                                                                                                                                  |  |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |

| STANDORTMERKMALE ( k - kleinflächig, g - großflächig )                                                                                                                                                                                                                            |  |  |  | TK10                                                                 |  |   |  |                                                                     |  |   |  |                                                                       |  | Biotop-Nr. |  |                                                                             |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|----------------------------------------------------------------------|--|---|--|---------------------------------------------------------------------|--|---|--|-----------------------------------------------------------------------|--|------------|--|-----------------------------------------------------------------------------|--|---|--|---|--|---|--|----------------------------------------------------------------------------|--|---|--|---|--|
|                                                                                                                                                                                                                                                                                   |  |  |  | 0                                                                    |  | 5 |  | 0                                                                   |  | 5 |  | -                                                                     |  | 4          |  | 3                                                                           |  | 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"/> g Torf, wenig gestört                                                                                                                                                                                                                                    |  |  |  | <input type="checkbox"/> <input type="checkbox"/> dystroph           |  |   |  | <input type="checkbox"/> <input type="checkbox"/> trocken           |  |   |  | <input type="checkbox"/> g 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"/> 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"/> Sand                                                                                                                                                                                                                            |  |  |  | <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"/> 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"/> 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"/> 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                                                                        |  |   |  |   |  |
| <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"/> 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"/> g keine Nutzung                                                                                                                                                                                                                                          |  |  |  |                                                                      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Kleingartenbau    |  |   |  |                                                                       |  |            |  | <input type="checkbox"/> <input type="checkbox"/> Grünland, extensiv        |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Grünanlage / Kleingarten |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                   |  |  |  |                                                                      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Erwerbsgartenbau  |  |   |  |                                                                       |  |            |  | <input type="checkbox"/> g 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"/> Feuchtwald / -gebüsch     |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bahnanlage               |  |   |  |   |  |
| k g                                                                                                                                                                                                                                                                               |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  | <input type="checkbox"/> <input type="checkbox"/> Gehölz                    |  |   |  |   |  |   |  | <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"/> Röhricht / Feuchtrache    |  |   |  |   |  |   |  | <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"/> Hochstauden / Ruderalflur |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Gebäude / Siedlung       |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> Weide                                                                                                                                                                                                                           |  |  |  |                                                                      |  |   |  | <input type="checkbox"/> <input type="checkbox"/> sonstige Nutzung: |  |   |  |                                                                       |  |            |  | <input type="checkbox"/> <input type="checkbox"/> Graben                    |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Spülfeld / Halde         |  |   |  |   |  |
| <input type="checkbox"/> <input type="checkbox"/> forstliche Nutzung                                                                                                                                                                                                              |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  |                                                                             |  |   |  |   |  |   |  | <input type="checkbox"/> <input type="checkbox"/> Bodenentnahme            |  |   |  |   |  |
| Pflanzenarten dominant ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )<br>Betula pubescens                                                                                                                                                                      |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  |                                                                             |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
| Pflanzenarten ±zahlreich ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )<br>Agrostis cf canina Calamagrostis canescens Dryopteris carthusiana Juncus effusus<br>Molinia caerulea Salix cinerea Sphagnum spec.                                                   |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  |                                                                             |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
| Pflanzenarten vereinzelt ( unterstrichen: Art der Roten Liste MV, fett: Art der BARTSchV )<br><u>Carex rostrata</u> Galium palustre Lycopus europaeus Peucedanum palustre<br>Polygonum amphibium Salix aurita Scutellaria galericulata Solanum dulcamara<br>Thelypteris palustris |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  |                                                                             |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
| Angaben zur Fauna                                                                                                                                                                                                                                                                 |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  |                                                                             |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
| Verwendete Unterlagen                                                                                                                                                                                                                                                             |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  | Datum erste Begehung: 18.09.1997                                            |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
|                                                                                                                                                                                                                                                                                   |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  | Datum letzte Begehung:                                                      |  |   |  |   |  |   |  |                                                                            |  |   |  |   |  |
| Bearbeiter/in: StAUNLÜBZ-Hippke                                                                                                                                                                                                                                                   |  |  |  |                                                                      |  |   |  |                                                                     |  |   |  |                                                                       |  |            |  | Foto: 2                                                                     |  |   |  |   |  |   |  | Folgeseiten: 0                                                             |  |   |  |   |  |