



Noxious Weed List Priority Change Request

Requestor Information

Name: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Phone: _____ Email: _____
Date of Request: _____

Noxious Weed Information

Common Name: _____

Scientific Name: _____

Life Span: Annual Biennial Perennial

Additional Life Span
Details

Growth
Characteristics

Method of Reproduction

Seeds Rhizomes Fragmentation
 Stolons Suckers Other: _____

Habitat

**Distribution in MT
(Where, How much,
How long it has
been here)**

**Methods of Control
(include details on
biological,
mechanical, and
chemical options)**

**Evidence of
behavior in other
states**

Request this species be listed as a priority:

- 1A 1B 2A 2B 3

Requesting a change of an existing species and its priority:

**Species Name
and Reason for
Change**