Drip Irrigation  
Evaluation  
Tool

Blank Data Sheet

## Background Data (\* indicates required field)

|  |  |  |
| --- | --- | --- |
| Site Name \* |  | Each site to have a unique name (REQUIRED) |
| Date \* |  | Enter date evaluation carried out (REQUIRED) |
| Property Name \* |  | Owner or property name (REQUIRED) |
| Valve ID |  | Name grower uses for block tested |
| Emitter Make |  | e.g. Netafim, Toro |
| Emitter Model |  | e.g. Hydrodrip, Typhoon |
| Pressure Compensating? \* |  | Yes/No (REQUIRED) |
| Nominal / Design Emitter Flow Rate (L/h) \* |  | As per system design (REQUIRED) |
| Design Emitter Pressure (kPa) |  | As per system design |
| Emitter Spacing (m) |  | Distance between emitters along lateral |
| Laterals/Tree Row |  | Number of driplines per tree row |
| System Condition |  | e.g. mechanical damage, leaks, blockages, crusting, slime |
| Horizontal Dripline Position |  | e.g. next to tree row, 2 m from tree row |
| Vertical Dripline Position |  | e.g. 1 m above ground, on ground, 20 cm subsurface |
| Water Source |  | e.g. river, backwater, channel, dam, bore |
| Main Filtration System |  | e.g. sand, disc, screen, autoflushing, manual flushing |
| Valve Check Filtration |  | similar to above, or 'absent' |
| Colour of Flush Water |  | Colour of flush water |

## Test Lateral Flow Rate (complete all cells if carrying out this test)

|  |  |  |
| --- | --- | --- |
| Test Lateral Flow Rate (L/h) |  | Measurement |
| Nominal / Design Emitter Flow Rate (L/h) |  | As per system design |
| Emitter Spacing (m) |  | Distance between emitters along lateral |
| Test Lateral Length (m) |  | Measurement |

## Dripper Test Readings (enter at least 9 readings)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Record # | Lateral # | Dripper Position | Duration (S) | Volume (ml) | Pressure (kPa) |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 11 |  |  |  |  |  |
| 12 |  |  |  |  |  |
| 13 |  |  |  |  |  |
| 14 |  |  |  |  |  |
| 15 |  |  |  |  |  |
| 16 |  |  |  |  |  |