

**PLANTING PLAN FOR FIELD PLANTING, SPECIAL PLANTING,
 OR INCREASE PLANTING**

Year _____ Field Planting No _____ Field Office _____

County FIPS Code _____ MLRA _____ State Code 06 RCD _____

Cooperator _____ Purpose _____

Soil MU Symbol and MU Name _____ Vegetative Soil Group _____

PLANTS TO BE EVALUATED

Common Name	Cultivar	Accession Number or Planting Density	PLS Seeding Rate Needed	Total By 1/	Supplied
1.					
2.					
3.					
4.					
5.					

1/ Enter "PMC" or name of seed supplier if PMC does not have it.

Acres to be Planted = _____

ATTACH LOCATION MAP

Legal Description _____ GPS Coordinates _____

Irrigated(Y/N) ___ Precipitation ___ inches Elevation ___ feet Slope ___ % Exposure _____

Site history for previous 3 years:

19 _____
 19 _____
 19 _____

Methods of planting will be _____ Estimated Planting Date is _____

Materials Needed	Rate	Total
Fertilizer		
Mulch		
Other		

Cooperator: _____ Date: _____
 Signature

Approved: _____ Date: _____
 RCD Board

Approved: _____ Date: _____
 PMC MGR

1. Does the cooperator understand the purpose of the planting or practice as well as the culture and management required for its success? (Yes/No)

2. Does the site meet the requirements stipulated in the planting guide? (Yes/No)
 - a. Is it conveniently located? (Yes/No)
 - b. Is it on a soil identified in the planting guide in the project plan? (Yes/No)
 - c. If it is to be grazed, is the field a separately fenced unit of adequate size? (Yes/No)

3. Has the cooperator agreed to establish and manage the planting as stipulated in the planting guide? (Yes/No)

4. Are planned weed control measures adequate? (Yes/No)

5. Will the field and equipment be checked before planting? (Yes/No)

6. Will an NRCS technician help with the planting? (Yes/No)

7. Will follow up assistance be provided
 - a. To obtain adequate weed control? (Yes/No)
 - b. To obtain evaluations as outlined in the planting guide ? (Yes/No)

8. Has the LOCATION MAP been completed? (Yes/No)

9. Comments and explanations of No answers.

Recommended: _____
District Conservationist

Date: _____

INSTRUCTIONS: The District Conservationist consults with appropriate Area Office technical staff, completes the Worksheet, obtains needed signatures, makes a file copy, and forwards the original and the location map to the PMC

Manager for approval. The PMC Manager returns an approved copy to the District Conservationist and Area Office and has the seed and/or plants shipped to the Field Office.