

Position 3

USDA- Rural Development
 Form RD 1940-21
 (Rev. 6-88)

ENVIRONMENTAL ASSESSMENT FOR CLASS I ACTION

1. Description

- a. Name of Project: _____
- b. Project Number: _____
- c. Location: _____

2. Protected Resources

The following land uses or environmental resources will either be affected by the proposal or are located within the project site. (Check appropriate box for every item of the following checklist. If more than one item is checked "yes" the environmental assessment format for a Class II action must be completed, except if the action under review is either (1) an application for a Housing Preservation Grant or (2) normally a categorical exclusion that has lost its exclusion status. The reviewer should not initiate the Assessment for a Class I action when it is obvious that the assessment format for a Class II will be required.)

	YES	NO
a. Wetlands	<input type="checkbox"/>	<input type="checkbox"/>
b. Floodplains	<input type="checkbox"/>	<input type="checkbox"/>
c. Wilderness (designated or proposed under the Wilderness Act)	<input type="checkbox"/>	<input type="checkbox"/>
d. Wild or Scenic River (proposed or designated under the Wild and Scenic Rivers Act)	<input type="checkbox"/>	<input type="checkbox"/>
e. Historical, Archeological Sites (listed on the National Register of Historical Places or which may be eligible for listing)	<input type="checkbox"/>	<input type="checkbox"/>
f. Critical Habitat or Endangered/Threatened Species (listed or proposed)	<input type="checkbox"/>	<input type="checkbox"/>
g. Coastal Barrier included in Coastal Barrier Resources System	<input type="checkbox"/>	<input type="checkbox"/>
h. Natural Landmark (Listed on National Registry of Natural Landmarks)	<input type="checkbox"/>	<input type="checkbox"/>
i. Important Farmlands	<input type="checkbox"/>	<input type="checkbox"/>
j. Prime Forest Lands	<input type="checkbox"/>	<input type="checkbox"/>
k. Prime Rangeland	<input type="checkbox"/>	<input type="checkbox"/>
l. Approved Coastal Zone Management Area	<input type="checkbox"/>	<input type="checkbox"/>
m. Sole Source Aquifer Recharge Area (designated by Environmental Protection Agency)	<input type="checkbox"/>	<input type="checkbox"/>

For an item checked "yes", I have attached as Exhibit I both the necessary documentation to demonstrate compliance with the Agency's requirements for the protection of the resource and a discussion setting forth the reasons why the potential impact on the resource is not considered to be significant. If item e. is checked "no", the results of the consultation process with the State Historic Preservation Officer is also attached.

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(see reverse)

Form serve as method of documenting the completion of an environmental assessment for Class I actions. Only Class I action can be assessed using this form. These actions are defined in Section 1940.310(a) and 1940.311 of RD Instruction 1940-G.

- PROCEDURE FOR PREPARATION : RD Instructions 1940-G and 1965-A.
- PREPARED BY : RD official authorized in Section 1940.302 of RD Instruction 1940-G.
- NUMBER OF COPIES : If action under review is applicable for financial assistance or request for subdivision approval, original plus number of copies required by the applicable program instruction for pre-approval documents used in application processing and docket assembling.
- : If other action, original and one copy.
- SIGNATURES REQUIRED : Preparer's and, as required by Section 1940.316 of RD Instruction 1940-G, the concurring official's and the State Environmental Coordinator's.
- DISTRIBUTION COPIES : If action under review is applicable for financial assistance or request for subdivision approval, original retained with original the application docket or request for subdivision approval and copies distributed as required by the applicable program instruction for pre-approval documents used in application processing and docket assembling.
- : If other action, original to accompany approval documents and copy to remain with originating office.

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3. General Impacts

I have reviewed the environmental data submitted, dated and signed by the applicant as well as any previously completed environmental impact analysis and conclude the following:

- a. The project, the project area, and the primary beneficiaries are adequately identified;
- b. No incompatible land uses will be created nor direct impacts to parks, beaches, dunes, barrier islands, or important wildlife habitats or recreational areas; and
- c. Only minimal impacts or no impacts will result to the following checked items:

- | | |
|---|---|
| <input type="checkbox"/> Air Quality | <input type="checkbox"/> Wildlife |
| <input type="checkbox"/> Water Quality | <input type="checkbox"/> Energy |
| <input type="checkbox"/> Solid Waste Management | <input type="checkbox"/> Construction Impacts |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Secondary Impacts |
| <input type="checkbox"/> Noise | |

An analysis of an item which cannot be checked, therefore having a potential for more than minimal impacts, is attached as Exhibit _____. *(If more than one item is unchecked, the environmental assessment format for a Class II action must be completed.)*

4. State, Regional and/or Local Government Consultation

- Yes No This project is subject to review State, regional, or local agencies under requirements of Executive Order 12372, Intergovernmental Review of Federal Programs.

If "yes" is checked, complete (a), or (b), or (c). *(If negative environmental comments have been received, the environmental assessment format for a Class II action must be completed.)*

- a. The review period has expired and no comments were received.
- b. No negative comments of an environmental nature were received and the review period is complete, with the comments attached.
- c. Negative comments of an environmental nature have been received.

5. Controversy

- Yes No This action is controversial for environmental reasons or is the subject of an environmental complaint. If yes, check on of the following:

- The action is the subject of isolated environmental complaints or questions have been raised which focus on a single impact. Attached as Exhibit ____ is an analysis of the complaint or questions, and no further analysis is considered necessary.

6. Cumulative Impacts

- Yes No The cumulative impacts of this action and other Rural Development actions, of the federal actions, or related nonfederal actions exceed the criteria for a Class I action; or the action represents a phase or segment of a larger project, the latter which exceeds the criteria for a Class I action.

7. Need for the Project and Alternatives to it

Attached as Exhibit ____ is a brief statement of Rural Development's position regarding the need for the project. Also, briefly discussed are (a) the alternatives which have been considered by the applicant and Rural Development and (b) the environmental impacts of these alternatives. Alternatives include alternative locations, alternative designs, alternative projects having similar benefits, and no action.

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8. Measures to Avoid or Mitigate Adverse Environment Impacts

Yes No Mitigation measures are required. Attached as Exhibit ____ is a description of the site or design change that the applicant has agreed to make as mitigation measures that will be placed as special condition within the offer or financial assistance or subdivision approval.

9. Compliance With Highly Erodible Land and Wetland Conservation Requirements

Yes No This action is subject to the highly erodible land and wetland conservation requirements contained in Exhibit M of RD Instruction 1940-G

If "yes" is checked, please complete (a), (b), (c), and (d).

a. Attached as Exhibit ____ is a completed Form SCS-CPA-026 which documents the following:

Yes No Highly erodible land is present on the farm property.

Yes No Wetland is present on the farm property.

Yes No Converted wetland is present on the farm property.

b. Yes No This action qualifies for the following exemption allowed under Exhibit M:

c. Yes No The applicant must complete the following requirements prior to approval of the action in order to retain or regain its eligibility for Agency financial assistance:

d. Yes No Under the requirements of Exhibit M, the applicant's proposed activities are eligible for Agency financial assistance.

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10. Environmental Determinations

The following recommendations shall be completed and the environmental reviewer shall sign the assessment in the space provided below.

a. Based on an examination and review of the foregoing information and such supplemental information attached hereto, I recommend that the approving official determine that this project:

- will have significant effect on the quality of the human environment and an Environmental Impact Statement must be prepared;
- will not have a significant effect on the quality of the human environment;
- will require further analysis through completion of the assessment format for a Class II action.

b. I recommend that the approving official make the following compliance determinations for the below listed environmental requirements.

Not In Compliance	In Compliance	
<input type="checkbox"/>	<input type="checkbox"/>	Clean Air Act
<input type="checkbox"/>	<input type="checkbox"/>	Federal Water Pollution Control Act
<input type="checkbox"/>	<input type="checkbox"/>	Safe Drinking Water Act-Section 1424(e)
<input type="checkbox"/>	<input type="checkbox"/>	Endangered Species Act
<input type="checkbox"/>	<input type="checkbox"/>	Coastal Barrier Resources Act
<input type="checkbox"/>	<input type="checkbox"/>	Coastal Zone Management Act-Section 307(c)(1) and (2)
<input type="checkbox"/>	<input type="checkbox"/>	Wild and Scenic Rivers Act
<input type="checkbox"/>	<input type="checkbox"/>	National Historic Preservation Act
<input type="checkbox"/>	<input type="checkbox"/>	Archeological and Historic Preservation Act
<input type="checkbox"/>	<input type="checkbox"/>	Highly Erodible Land and Wetland Conservation, Food Security Act
<input type="checkbox"/>	<input type="checkbox"/>	Executive Order 11988, Floodplain management
<input type="checkbox"/>	<input type="checkbox"/>	Executive Order 11990, Protection of Wetlands
<input type="checkbox"/>	<input type="checkbox"/>	Farmland Protection Policy Act
<input type="checkbox"/>	<input type="checkbox"/>	Departmental Regulation 9500-3, Land Use Policy
<input type="checkbox"/>	<input type="checkbox"/>	State Office National Resource Management Guide

c. I have reviewed and considered the types and degrees of adverse environmental impacts identified by the assessment. I have also analyzed the proposal for its consistency with Rural Development environmental policies, particularly those related to land use, and have considered the potential benefits of the proposal. Based upon a consideration and balancing of these factors, I recommend from an environmental standpoint that the project

- be approved
- not be approved because of the attached reason (see Exhibit ____)

**Signature of Preparer*

Date

Title _____

*See Section 1940.302 for listing of officials responsible for preparing assessment.

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*Signature of Concurring Official*¹

Date

Title _____

I have reviewed the environmental assessment and supporting documentation. Following are my positions regarding its adequacy and the recommendations reached by the preparer. For any matter in which I do not concur, my reasons are attached as Exhibit ____.

- | | | |
|--------------------------|--------------------------|------------------------------------|
| Do not | | |
| Concur | Concur | |
| <input type="checkbox"/> | <input type="checkbox"/> | Adequate Assessment |
| <input type="checkbox"/> | <input type="checkbox"/> | Environmental Impact Determination |
| <input type="checkbox"/> | <input type="checkbox"/> | Compliance Determination |
| <input type="checkbox"/> | <input type="checkbox"/> | Project Recommendation |

*Signature of State Environmental Coordinator*²

Date

¹ See Section 1940.316 for both the instances when a concurring official must sign the assessment and who is authorized to sign as the concurring official.

² See Section 1940.316 for instances when State Environmental Coordinator's review is required.