

NRCS FARM BILL PROGRAM
2012 Practice Implementation Sheet
Forage and Biomass Planting (512.3)
Overseeding

 Farm Bill Program Participant

 Contract Number

Purpose: To overseed perennial pastures with legumes or annual grasses utilizing no-till equipment or straight disking and broadcasting.



- All species will be overseeded within the recommended planting dates and at the recommended planting rates.
- Planted species will be adapted to the soil and climate as determined by the Field Office Technical Guide.
- Fertilization for establishment will be performed according to the TAMU recommendations.
- Weeds will be controlled for establishment (if necessary) according to the **Herbaceous Weed Control (315)** Standard.

NRCS will:

- Assist participants in preparing a plan for planting including species selection, planting rates, and dates.
- Assist the participant with the development of plans for supporting practices such as Nutrient Management (590), Herbaceous Weed Control (315) and Integrated Pest Management (595) as needed.
- Measure and certify planted acres.

Participant will:

- ____ Plant adapted species at adapted rates within designated planting dates.
- ____ Defer new plantings from grazing until the planted species is well rooted and established.
- ____ Notify NRCS if shredding (to prevent seeding), tillage, or weed control are needed.
- ____ Follow NRCS Nutrient Management (590), Herbaceous Weed Control (315) and Integrated Pest Management (595) Standards and Specifications. This includes providing the NRCS with soil test results, pesticide application records/anticipated pesticide applications, if needed.
- ____ Apply nutrients and amendments (Lime) based on NRCS nutrient management plan recommendations. **Over or under application of nutrients may be considered a contract violation.**
- ____ Provide NRCS with all bills associated with the practice including costs of seeding operation, seed, fertilizer (NPK) and lime.

****Payment will be made upon completion of the planting operation, the initial nutrient application (if required), and presentation of all associated bills.**

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I understand the requirements of the practice, and my questions concerning the practice have been answered. I further understand that a failure to adhere to the above requirements may jeopardize any and all payments.

Participant Signature

Date