

County:	Review Date:	Program:	
Customer Name/Other Case File ID:			
NRCS/SCD Employees Certifying Practices:		QAR <input type="checkbox"/> 5% Spot Check <input type="checkbox"/>	
List of Practices Reported as Applied			
Practice	Engineering or Non Eng	Extent	Applied Date
1.	Eng NEng		
2.	Eng NEng		
3.	Eng NEng		
4.	Eng NEng		
5.	Eng NEng		

Planning Section:

1. All Plans must meet National Planning Procedure Handbook and must at a minimum contain the following to meet TNPDG.	
Checked = Yes Blank = No	
<input type="checkbox"/> Plan Map with Practices	<input type="checkbox"/> Cultural Resources Response
<input type="checkbox"/> Soils Map with Legend	<input type="checkbox"/> T&E Request
<input type="checkbox"/> Topo Map	<input type="checkbox"/> T&E Response
<input type="checkbox"/> Location Map	<input type="checkbox"/> CPA-52 Environmental Evaluation
<input type="checkbox"/> Cultural Resources Request	
2. Was the practice designed according to the standard and specifications; and were the planning and design features properly documented as contained in the TNPDG?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
3. Is the practice part of a planned system to solve identified resource concerns on CPA-52?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
4. Does the practice meet the intent and purpose of the standard?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
5. Were the correct tool(s) used to plan and design the practice?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
6. Were adequate signed plans and specifications or engineering notes included in the file folder for construction this practice?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
7. Did the employee signing and certifying the design have adequate Engineering job Approval Authority?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
8. Was the practice signed and approved as meeting standards or specs by a certified conservation planner? Planners Certification Level L1 L2 L3	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
9. Does the folder contain documentation the participant was provided adequate information (narrative, job sheet, lifespan, etc) as part of the plan to apply and maintain this practice?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

Certification of Practices:

1. Does the installed practice meet standards? Is it documented in the case file?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
2. Does the field check of this practice match the planned location and units of the planned practice map?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
3. Does the practice as installed adequately solve the resource concern(s) identified in the planning stages?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
4. Was the practice installed according to the plans and specifications?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
5. Is the practice adequately operated and maintained? Is vegetation adequate, if applicable?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
6. Was the practice properly checked out in accordance with the certification documentation contained in the construction documentation section of the TNPDG?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
7. Did the employee certifying the practices have adequate Engineering Job Approval Authority?	Practices: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

Explain any question that was not checked as meeting the requirements in the space below:

Practice 1:

Practice 2:

Practice 3:

Practice 4:

Practice 5:

Commendable Items:

Needs Improvement:

Action Items:

Training Needs: Are there any training needs identified as a result of this review? YES NO
If yes, list who and the training needed in the Action Items section.

Additional Comments:

Reviewer:	Date:
District Conservationist:	Date:
Area Conservationist:	Date: