

**NATURAL RESOURCES CONSERVATION SERVICE  
STATEMENT OF WORK**

**WASTE FACILITY COVER  
(No.)  
CODE 367**

**DESIGN**

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**Deliverables:**

1. Design documentation that will demonstrate the criteria in the NRCS practice standard have been met and are compatible with other planned and applied practices.
  - a. Compliance with NRCS national and state utility safety policy (NEM Part 503 Safety, Engineering Activities Affecting Utilities 503.00 through 503.06).
  - b. List of associated eFOTG conservation practices included in the project.
  - c. Practice standard criteria substantiating data, computations, and analyses to develop plans and specifications including but not limited to:
    - i. Type of Cover.
    - ii. Structural.
    - iii. Safety.
    - iv. Environmental Considerations (e.g. air quality, water quality).
2. Adequate location map, plan view, profiles, cross sections, details, and specifications to ensure that the project can be properly constructed and permits secured.
  - a. The plan view of the site shall include but is not limited to the following items:
    - i. Location of practices and components to be installed.
    - ii. Water well locations.
    - iii. Access routes.
    - iv. Adequate topographic detail to show how clean and contaminated runoff will be addressed when this is a factor in the design.
3. Design Report and Inspection Plan as appropriate (NEM Part 511, Design Documentation, 511.11 and Part 512, Construction, 512.30 through 512.32).
  - a. The design report shall include, but is not limited to the following:
    - i. Management Assessment.
    - ii. Design Documentation from item 1 listed above.
  - b. The inspection plan must describe the type and frequency of testing, items requiring inspection, the documentation required, and the qualifications of the person doing the work.
4. Operation and Maintenance plan.
5. Itemized Cost Estimate.
6. Certification that the design meets practice standard criteria and complies with applicable laws and regulations (NEM Part 505, Non-NRCS Engineering Services, 505.03(b)(2)).

**CERTIFICATION OF COMPLETION**

Waste Facility Cover (367)

Design

**Program Participant Information**

Name (print): \_\_\_\_\_

Contract Number: \_\_\_\_\_ Contract Item Number(s): \_\_\_\_\_

**Technical Service Provider Information**

Name (print): \_\_\_\_\_

TSP ID Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

*I hereby certify that the technical services I provided as a Technical Service Provider for this component(s) checked above: (1) comply with all applicable Federal, State, Tribal, and Local laws and requirements, (2) meet applicable USDA NRCS conservation practice standards, specifications, and program requirements, (3) are consistent with and meet the particular conservation program goals and objectives, (4) that I have provided the above named Program Participant the Deliverables in this Statement of Work for this component, and (5) comply with all "Certification Terms" as identified in the Technical Service Provider Certification Agreement.*

\_\_\_\_\_  
**Technical Service Provider Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Received By (NRCS Staff)**

\_\_\_\_\_  
**Date**

**STATEMENT OF WORK**

USDA, Natural Resources Conservation Service  
Waste Facility Cover (367)

**INSTALLATION**

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**Deliverables**

1. Documentation of pre-construction conference with client and contractor.
2. Verification that client has obtained required permits.
3. Survey or measurements of treatment areas including measurements and survey notes and drawings.
4. Installation inspection (according to inspection plan).
  - a. Materials used.
  - b. Inspection records.
  - c. Maintaining a job diary with the dates and record of inspections made, testing completed, instruction provided to the contractor, etc., to document compliance with standards and specifications.
5. Facilitate, implement and document required design modifications with client, original designer, permitting and funding agencies.
6. Advise client/NRCS on compliance issues with all federal, state, tribal, and local laws, regulations and NRCS policies during installation.
7. Certification that the installation process and materials meet design and permit requirements.

CERTIFICATION OF COMPLETION

Waste Facility Cover (367)

Installation

**Program Participant Information**

Name (print): \_\_\_\_\_

Contract Number: \_\_\_\_\_ Contract Item Number(s): \_\_\_\_\_

**Technical Service Provider Information**

Name (print): \_\_\_\_\_

TSP ID Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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**Technical Service Provider Signature**

\_\_\_\_\_  
**Date**

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**Received By (NRCS staff)**

\_\_\_\_\_  
**Date**

STATEMENT OF WORK  
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## CHECKOUT

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### Deliverables

1. Supporting documentation.
2. Actual Treatment area drawings
  - a. Drawings with changes from the original treatment areas clearly shown.
  - b. Certification that the installation meets NRCS standards and specifications and is in compliance with permits (NEM Part 505, Non-NRCS Engineering Services, 505.03(c)(1)).
3. Extent of practice units applied and location identified on a map.
  - a. Completed job diary noting inspections made, testing completed, etc.
  - b. Materials documentation.
  - c. Testing reports to determine effectiveness of the amendment.
  - d. Survey notes, measurement notes inspections, and final checkout documenting compliance with standards and specifications.
4. Provide the following information to the NRCS field office servicing the relevant land unit for entry into the Performance Results System (PRS):
  - a. Technical Service Provider Name
  - b. Customer name
  - c. USDA program funding the practice (if known)
  - d. Location of work (state, county, conservation district, land tract identifier)
  - e. Land use of field where the practice was installed (cropland, etc.)
  - f. NRCS practice name and quantity of practice installed in appropriate units
5. Completion report in accordance with permit requirements.

**CERTIFICATION OF COMPLETION**

Waste Facility Cover (367)

Checkout

**Program Participant Information**

Name (print): \_\_\_\_\_

Contract Number: \_\_\_\_\_ Contract Item Number(s): \_\_\_\_\_

**Technical Service Provider Information**

Name (print): \_\_\_\_\_

TSP ID Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

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**Date**

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## **STATEMENT OF WORK**

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Waste Facility Cover (367)

## **REFERENCES**

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AR NRCS Field Office Technical Guide (eFOTG), Section IV, Conservation Practice Standard 367, Waste Facility Cover.

NRCS National Engineering Handbook, Part 651, Agricultural Waste Management Field Handbook (AWMFH).

NRCS National Engineering Manual (NEM).

NRCS National Environmental Compliance Handbook.

NRCS Cultural Resources Handbook.