United States Department of Agriculture

589C– Cross Wind Trap Strip Implementation Requirements

Producer: _____ **Project or Contract:** _____

Location: _____ **County:** _____

Farm Name: _____ **Tract Number:** _____

Practice Location Map

(showing detailed aerial view of where practice is to be installed on farm/site, showing all major components, stationing, relative location to any landmarks, and survey benchmarks)

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_____ Cover Sheet

_____ Specifications

_____ Operation & Maintenance

Utility Safety/ One-Call System Information

Description of work:

NRCS Review Only

Designed By: _____ **Date:** _____

Approved By: _____ **Date:** _____

589C – Cross Wind Trap Strip
Implementation Requirements

PRACTICE PURPOSE(S): (check all that apply)

____ Reduce soil erosion from wind and wind-borne sediment deposition.

____ Induce snow deposition to improve soil moisture management.

____ Improve plant health by protecting the growing crops from damage by wind-borne soil particles.

____ Improve air quality by reducing the generation of airborne particulate matter.

SPECIFICATIONS:

Design Soil Map Unit:	**Texture:**	**Field Width (ft):**
Prevailing Wind Direction (degrees):	**Design Critical Erosion Period (mo):**	

Design Factors	Strip 1	Strip 2	Strip 3
1. Contributing area (acres)			
2. Wind erosion (T/A/Y)			
3. Total erosion (row 1 × 2)			
4. Saltation % (range = 50–80)			
5. Total sediment (row 3 × 4)			
6. Bulk density value (table 1)			
7. Trap strip width (ft)			
8. Deposition depth (in/yr) (row 5 × 6 ÷ 7)			
9. Vegetative height (ft)			

Permanent Seed and/or Plant Requirements

Note: To figure pure live seed (PLS) rates, multiply the percent purity by the percent germination. Divide the seeding rate by the percent PLS to find the bulk seed needed per acre.
For example, 98% purity × 60% germination = 0.588% PLS 10 lbs/acre 0.588% PLS = 17 lbs/acre.

Seeding Time:

Species/cultivar	Seeding rate PLS (lb/ac)	Seeding date	Recommended fertilizer (N-P-K lbs/ac)
1.			
2.			
3.			

Method of seeding/planting:

Other notes: (e.g., inoculants, irrigating, management, plant protection, etc.)

Additional Layout Drawings (if needed)

OPERATION AND MAINTENANCE:

_____ Maintain original width and depth of vegetated area. After establishment, perennial trap strips shall be fertilized as needed to maintain plant vigor.

_____ Harvest, mow, reseed, and fertilize to maintain plant density and vigorous plant growth.

_____ Mowing or grazing of trap strips shall be managed to allow regrowth to the planned height before periods when wind erosion or crop damage is expected to occur. When feasible, schedule harvest, mowing or other mechanical disturbance of vegetation outside of the primary nesting season for ground-nesting birds.

_____ Wind-borne sediment accumulated in trap strips shall be removed and distributed over the surface of the field as determined appropriate and trap strip reestablished if necessary. Trap strips shall be reestablished or relocated as needed to maintain plant density, width, and height.

_____ Turn off pesticide sprayers when turning on the trap strip.

_____ Control noxious weeds.

_____ Periodically evaluate the trap strip effectiveness to meet the planned purpose(s) and adapt management as needed.

Practice Specifications Approval and Completion Certification

NRCS Review Only

DESIGN INSTALLATION AND LAYOUT APPROVAL:

Designed By:	Date:	Job Approval Authority (JAA):
Approved By:	Date:	Job Approval Authority (JAA):

LANDOWNER/OPERATOR ACKNOWLEDGES:

a. They have received a copy of the specifications and understand the contents including the scope and location of the practice.
b. They have obtained all necessary permits and/or rights in advance of practice application, and will comply with all ordinances and laws pertaining to the application of this practice.
c. No changes will be made in the installation of the job without prior concurrence of the NRCS.
d. Maintenance of the installed work is necessary for proper performance during the life of the practice. The practice life is _____.

I have reviewed all specifications and agree to install as specified:

Landowner/operator name (type or print):		
Landowner/operator Signature:		Date:

RECORD OF COMPLETION AND CHECK OUT CERTIFICATION:

Treated Acres:	Date Completed by Client:	Date Certified:	Approver's Initials:

CERTIFICATION STATEMENT:

I certify that implementation of this conservation practice is complete, meets criteria for the stated purpose(s), and meets the NRCS conservation practice standard and specifications.

NRCS Signature:	Date:	Job Approval Authority (JAA):
Notes:		

CLEAR FORM