

FOR FORAGE AND BIOMASS PLANTING (512)

WORKSHEET 2 - PRACTICE IMPLEMENTATION CHECKLIST

<b>Name:</b>	<b>Farm No./Tract No.:</b>
<b>Address:</b>	<b>Field Number(s):</b>
<b>Cost-Share Program:</b>	<b>Contract Number:</b>

<b>Description of Management Units</b>
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<b>Field No(s).:</b>	<b>Total Acres:</b>	<b>Forage Species:</b>
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**Purpose of the planting (and type of livestock, if applicable):**       **New Planting**       **Overseeding**

*Pre-Planting Activities*

Soil tested?  Yes     No    If *Yes*, date when tested: \_\_\_\_\_

**pH**  
 1. Soil pH: \_\_\_\_\_    Lime needed?  Yes     No    If *Yes*, recommended amount: \_\_\_\_\_ T/ac

**Planned treatment(s) (preplant activities):**

**Applied (what and when) (preplant activities):**

**2. Fertilizer**

<i>Nutrient Levels</i>	<i>Planned Treatment(s)</i>	<i>Applied (what and when)</i>
N:		
P:		
K:		

3. Vegetation present?  Yes     No    If *Yes*, describe:

Need to destroy existing vegetation?  Yes     No

Planned Method(s): <input type="checkbox"/> Herbicide (describe): <input type="checkbox"/> Mechanical (describe): <input type="checkbox"/> Animal (over graze for frost seeding)	Applied Method(s)/dates: <input type="checkbox"/> Herbicide (describe): <input type="checkbox"/> Mechanical (describe): <input type="checkbox"/> Animal (overgraze for frost seeding)
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