

WOODY RESIDUE TREATMENT CODE 384

Maryland Conservation Practice Implementation Requirements and Certification

Cooperator Name	County	Planner	Date
Farm/Tract/Field(s)	Program/Contract No. (if applicable)		Amount Planned AC

<p>Purpose(s) (check all that apply)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Reduce hazardous fuels <input type="checkbox"/> Reduce the risk of harmful insects and disease <input type="checkbox"/> Protect/maintain air quality by reducing the risk of wildfire <input type="checkbox"/> Improve access for management purposes <input type="checkbox"/> Improve access to forage for livestock and wildlife <input type="checkbox"/> Develop renewable energy systems <input type="checkbox"/> Enhance aesthetics <input type="checkbox"/> Reduce the risk of harm to humans and livestock <input type="checkbox"/> Improve the soil organic matter <input type="checkbox"/> Improve the site for natural or artificial regeneration
<p>Associated Practices</p> <p>This practice may be applied alone or in combination with other supporting Maryland conservation practice standards.</p> <p>The following practices are needed, and have been or will be implemented: (check all that apply)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Forest Stand Improvement (666) <input type="checkbox"/> Prescribed Burning (338) <input type="checkbox"/> Tree/Shrub Site Preparation (490) <input type="checkbox"/> Other practices (specify): <p><input type="checkbox"/> No associated practices are needed.</p>
<p>Practice Specifications</p> <p>Woody Residue Treatment Method(s): (check all that apply)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Light mechanical (e.g., bush-hogging) <input type="checkbox"/> Heavy mechanical (e.g., shearing, root raking, bulldozing, and piling) <input type="checkbox"/> Chipping and hauling <input type="checkbox"/> Pruning/removal <input type="checkbox"/> Prescribed burning <input type="checkbox"/> Other (specify):

Practice Specifications (continued)					
Field or Site No.	Acres	Treatment Method	Equipment and Materials Needed	Timing of Activity	Additional Instructions
<p>Environmentally sensitive areas (e.g., water courses, water bodies, wetlands) present on or bordering the project? <input type="checkbox"/> Yes (shown on attached map) <input type="checkbox"/> No</p> <p>Treatment setbacks and/or other water quality buffers needed? <input type="checkbox"/> Yes (shown on attached map) <input type="checkbox"/> No</p>					
<p>Erosion and Sediment Control Measures, Special Requirements, and Mitigation Measures, if applicable: (Describe and attach additional maps and other documentation, as needed.)</p>					
<p>Additional Recommendations/Notes:</p>					

OPERATION AND MAINTENANCE	
<ul style="list-style-type: none"> • Inspect and maintain erosion and sediment control measures, as necessary. • For safety purposes during treatment, control access to the site by vehicles or people, to the extent feasible. • Monitor populations of harmful pests and the potential of damage to site resources, and take controlling actions if necessary. • Monitor vegetation growth. Unwanted vegetation or excessive re-growth may occur, requiring treatment. <p>Other requirements or follow-up needed (describe):</p>	
CERTIFICATION (FOR AGENCY USE ONLY)	
Supporting Documentation (for file)	
<input type="checkbox"/> Map showing practice location	<input type="checkbox"/> Associated practice IR sheets
<p>Planning Certification</p> <p>This practice was planned according to NRCS standards and specifications.</p> <p style="text-align: center;">Job Class: _____</p> <p>_____ Signature by individual with appropriate JAA Date</p>	<p>Implementation Certification</p> <p>This practice was applied according to NRCS standards and specifications.</p> <p style="text-align: center;">Amount: _____ Date: _____</p> <p>_____ Signature by individual with appropriate JAA Date</p>
Reporting Checklist	
<input type="checkbox"/> CPA-06 Notes <input type="checkbox"/> File copy of completed IR sheet	<input type="checkbox"/> Report in Toolkit <input type="checkbox"/> Other reporting tools (optional)