

## RESIDUE AND TILLAGE MANAGEMENT – NO-TILL CODE 329

### Maryland Conservation Practice Implementation Requirements and Certification

|                            |   |                |                                 |
|----------------------------|---|----------------|---------------------------------|
| <b>Cooperator Name</b>     | <b>County</b>                               | <b>Planner</b> | <b>Date</b>                     |
| <b>Farm/Tract/Field(s)</b> | <b>Program/Contract No. (if applicable)</b> |                | <b>Amount Planned</b><br><br>AC |

|   |  |
|---|--|
| <b>Purpose</b>  |  |
| Reduce sheet, rill and wind erosion   | Reduce tillage-induced particulate emissions                           |
| Maintain or increase soil quality and organic matter content                        | Increase plant-available moisture and precipitation storage efficiency |
| Reduce energy use   | Provide food and escape cover for wildlife                             |
| <b>Description of Work</b>  |  |
| <b>Associated Practices (must be implemented in combination with this practice)</b> |  |

| <b>SPECIFICATIONS AND SCHEDULE</b>   |            |       |                   |      |     |                 |                         |                         |
|--|------------|-------|-------------------|------|-----|-----------------|-------------------------|-------------------------|
| Follow the rotation on the RUSLE2 printout (if attached) or the table below. |            |       |                   |      |     | RUSLE2 attached |                         |                         |
| Field(s)   | HEL (Y/N)* | Acres | Cropping Sequence | STIR | SCI | Soil Loss (T)   | % Residue of Prior Crop | % Residue After Harvest |
|  |            |       |                   |      |     |                 |                         |                         |
|  |            |       |                   |      |     |                 |                         |                         |
|  |            |       |                   |      |     |                 |                         |                         |
|  |            |       |                   |      |     |                 |                         |                         |
|  |            |       |                   |      |     |                 |                         |                         |

\* On HEL fields, contact the SCD prior to changing the crop sequence and/or tillage methods.

This Implementation Requirement sheet is not required when the cooperator is not receiving financial assistance and the specifications are included in the practice narrative of the conservation plan. The supporting documentation and reporting checklist items must be addressed in all cases.

**OPERATION AND MAINTENANCE**

- Follow the crop rotation for each field. Contact the SCD prior to changing the crop sequence and/or tillage methods.
- Evaluate/measure the crop residues cover and orientation after each crop to ensure the planned amounts and orientation are being achieved. Adjust management as needed to either plan a new residue amount and orientation or adjust the planting and/or harvesting equipment.
- A Soil Tillage Intensity Rating (STIR) value of 20 or less must be maintained in order to be considered no-till.
- Limited tillage is allowed to close or level ruts from harvesting equipment. No more than 25% of the field may be tilled for this purpose.
- If there are areas of heavy residue accumulation (because of movement by water or wind) in the field, spread the residue prior to planting so it does not interfere with planter operation.

|  |
|--|
| <b>Additional Operations and Maintenance</b> |
|  |

| <b>CERTIFICATION (FOR AGENCY USE ONLY)</b>  |   |
|---|---|
| <b>Supporting Documentation (for file)</b>  |   |
| Map showing practice location   | RUSLE2 printout   |
| <b>Planning Certification</b><br>This practice was planned according to NRCS standards and specifications.<br><br>Job Class: _____<br><br>_____<br>Signature by individual with appropriate JAA    Date | <b>Implementation Certification</b><br>This practice was applied according to NRCS standards and specifications.<br><br>Amount: _____    Date: _____<br><br>_____<br>Signature by individual with appropriate JAA    Date |
| <b>Reporting Checklist</b>  |   |
| CPA-06 Notes<br><br>File copy of completed IR sheet   | Report in Toolkit<br><br>Other reporting tools (optional)   |