

Required Check-off Signatures			
Natural Resources Conservation Service (NRCS) Representative or Technical Service Provider (TSP):			
Plan Designed by: _____			Date: _____
Layout by: _____			Date: _____
Planted by: _____	Agency (Name) or Private TSP:		Date: _____
Checked by: _____			Date: _____
3/Certified by: _____	Agency (Name) or Private TSP:		Date: _____
3/ Plans designed for forestry practices 650-Windbreak/Shelterbelt Renovation and 666-Forest Stand Improvement require <u>approval of a professional forester</u> from NRCS, the Nebraska Forest Service (NFS), a Natural Resources District (NRD), or a TSP.			
Producer's Statement:			
The design of this practice has been discussed with me and I concur in the design. I understand no changes are allowed without the approval of the NRCS Representative or the Technical Service Provider.			
Signature: _____			Date: _____
Print Name of Producer: _____			