

UPLAND WILDLIFE HABITAT MANAGEMENT (645) CONSERVATION PRACTICE DOCUMENTATION WORKSHEET

CLIENT: _____ LOCATION: _____
 FARM No. TRACT: FIELD/PASTURES(S): ACRES: JOB APPROVAL CLASS:
 NRCS Technician: CONTRACT No. | ITEM No.: |

Field(s) or areas that have Upland Wildlife Habitat Management planned are identified on conservation plan map? YES NO

LAND USE

Cropland	Riparian (<i>Lotic</i>)
Hayland	Wetland (<i>Lentic</i>)
Pasture	Forest
Grazed Range	

INVENTORY

Appropriate wildlife habitat inventory evaluation completed for land use identified above:

<i>Attached</i>	<i>In Case File</i>
Cropland (NV-ECS-17)	Forest (NV-ECS-22)
Hayland (NV-ECS-18)	Riparian (NV-ECS-20)
Pasture (NV-ECS-33)	Wetland (NV-ECS-21)
Grazed Range (NV-ECS-19)	

Wildlife Habitat Inventory Evaluation rating is 0.5 or greater for the specified land use?
 YES NO

GRAZING LANDS

Grazed lands that have the maintenance or improvement of wildlife habitat as an objective have resource inventory and planning forms completed?

Not Applicable
 NV-ECS-01(s) (page 1): *Attached In Case File*
 NV-ECS-03: *Attached In Case File*
 NV-ECS-04: *Attached In Case File*
 NV-ECS-8a: *Attached In Case File*
 NV-ECS-16a: *Attached In Case File*

Grazed lands have a planned grazing system in place or scheduled for implementation?

Not Applicable Attached In Case File
 A planned grazing system has been developed to guide livestock movements and specify periods of deferment, rest, and other treatments for each grazing management unit that will maintain or improve identified wildlife habitat elements. The number; the kind and class of animals to be grazed; the timing of use; and, the length of each grazing period for each pasture in the grazed unit are specified.

List planned component practices required to facilitate application of Upland Wildlife Management.

OPERATION & MAINTENANCE

Habitat conditions will be monitored on a regular basis in order to adapt planned conservation measures and ensure implementation schedule. Annual inspections will be made to inspect and repair structural and vegetative components of this practice.

PRACTICE CERTIFICATION

Practice specifications have been reviewed and practice application is *agreed to*:

Client Signature and Date

I certify that the above practice has been applied and meets NRCS Practice Standards and Specifications.

NRCS Planner Signature and Date