

### Silvopasture Establishment Checkout and Certification

Cooperator:	Field Office:		
Plan No.:	Location:		
Checkout By:	Title:	Date:	

#### *Document actual practice completion*

*\*Attach diagram or map indicating completion of tree/shrub and/or forage establishment location.*

EXISTING PASTURE WHERE TREES ARE ADDED				
	Field #:	Field #:	Field #:	Field #:
Method of Site Preparation:				
Species Planted:				
Type of Planting Material:				
Number of Tree Rows per set:				
Alley Width:				
Area of Zone Protected (Ac):				
Within Row Spacing (ft):				
Spacing Between Rows (ft):				
Date Planted:				
Acres Planted:				

EXISTING FOREST WHERE FORAGES ARE ADDED				
	Field #:	Field #:	Field #:	Field #:
Forage Species planted:				
Existing Tree Species:				
Alley Width:				
Tree Row Width:				
Date Planted:				
Acres Planted:				

<b>Notes:</b>

Signature: \_\_\_\_\_

*I certify that this practice has been carried out as documented and meets standards and specifications.*