

Forest Trails and Landings Checkout and Certification

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

Document actual practice completion

Layout	
	Field #:
Setback distances from water or streams:	
Stream crossings at right angles?	Y or N
Landing slopes less than 5%?	Y or N
Maximum skid trail grade:	
Number and size of Landings:	
Amount of trails installed (ft):	

Water Management Measures			
	Field #:		
	Broad-based dip	Rolling Dip	Wing Ditches
Number installed:			
Maximum spacing (ft):			

Notes:
<p><i>(Attach a diagram)</i></p>

Signature: _____

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