

Conservation Crop Rotation

Conservation Practice Job Sheet

RI - 328

Owner/Operator _____ Farm No. _____ Tract No. _____ Field No. _____

Practice Specifications

- Practice Specifications are prepared in accordance with the Rhode Island NRCS Field Office Technical Guide. Information contained in this document is considered part of the conservation plan. Use "Crop Rotation on Organic Farms: A Planning Manual, NRAES 177" as a guide while completing this jobsheet.

Client Name:		Farm #:	
Field(s):		Tract#:	
Planned By:		Date:	
Approved By:		Total Acres:	

Purpose: (check all that apply)	
To reduce erosion from wind and water	To break pest cycles or to suppress weeds
To increase soil organic matter content	To minimize and reduce soil compaction
To capture/recycle nutrients in the soil profile	To manage soil moisture
To increase biodiversity	Other (specify):

GENERAL CRITERIA:

- When purpose is for erosion (plan to "T") or organic matter (SCI), include RUSLE2 worksheet.
- Crops shall be grown in a planned recurring (rotation), unless a suitable substitution crop is used.
- A map shall accompany this jobsheet indicating location of fields and management units.
- A new jobsheet should be used for each different field and management units.
- Use crops and varieties adapted for your soils and region.
- Cover and green manure crops may be grazed as long as enough biomass remains for the intended purpose(s).

Planning Tips

- Avoid planting the same crop family in the same field too often.
- Alternate cover crops with cash crops.
- Alternate deep-rooted crops with shallow, fine-rooted crops.
- Precede heavy feeders with nitrogen fixing cover crops.
- Avoid following a root crop with another root crop.

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Owner/Operator _____ Farm No. _____ Tract No. _____ Field No. _____

Planned Crop Rotation:

Field/MU	Year	Family	Crop	Plant Date	Harvest Date
_____ Field/MU _____ Acres _____ Soil Quality Index _____ slope	Prior Year	Winter			
		Spring			
	Insert Year	Summer			
		Fall			
_____ Field/MU _____ Acres _____ Soil Quality Index _____ slope	Year -1	Winter			
		Spring			
	Insert Year	Summer			
		Fall			
Fertilizer Applications	Date	Type	Method	Rate/ac	Acres
_____ Field/MU					

Note : Each season has the opportunity to plan up to 3 crops in that map unit. If more than one crop will be grown on an MU, write them all in the cell in the sequence they will be grown. For example, (lettuce/buckwheat cc/fall broccoli).

Owner/Operator _____ Farm No. _____ Tract No. _____ Field No. _____

Field/MU	Year	Family	Crop	Plant Date	Harvest Date
_____ Field/MU _____ Acres _____ Soil Quality Index _____ slope	Year -2 _____ Insert Year	Winter			
		Spring			
		Summer			
		Fall			
_____ Field/MU _____ Acres _____ Soil Quality Index _____ slope	Year -3 _____ Insert Year	Winter			
		Spring			
		Summer			
		Fall			
Fertilizer Applications	Date	Type	Method	Rate/ac	Acres
_____ Field/MU					

Management Units:

The management units should be the area you manage as an independent unit. On vegetable farms, they may be individual beds. Having the farm divided into relatively small units allows you to keep track of exactly what you planted on a particular piece of ground.

Owner/Operator _____ Farm No. _____ Tract No. _____ Field No. _____

Field/MU	Year	Family	Crop	Plant Date	Harvest Date
_____ Field/MU _____ Acres _____ Soil Quality Index _____ slope	Year -4 _____ Insert Year	Winter			
		Spring			
		Summer			
		Fall			
_____ Field/MU _____ Acres _____ Soil Quality Index _____ slope	Year -5 _____ Insert Year	Winter			
		Spring			
		Summer			
		Fall			
Fertilizer Applications	Date	Type	Method	Rate/ac	Acres
_____ Field/MU					

OPERATION / MANAGEMENT AND MAINTENANCE:

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Practice Installation Guidelines

It shall be the responsibility of the landowner to obtain all necessary permits and/or rights, and to comply with all ordinances and laws pertaining to this installation.

Practice designs and specifications shall be reviewed by NRCS planner with the landowner prior to start of work for practice installation.

Contact the NRCS planner _____ at 401- _____ prior to installation. Keep NRCS planner updated throughout the installation process. **Emergency # (401) 828-1300**

Contact the NRCS planner _____ at 401- _____ upon completion of practice. **Emergency # (401) 828-1300**

Practice specifications and special requirements

Installation shall be in accordance with the following specifications and special requirements.
NO CHANGES ARE TO BE MADE IN THE DRAWINGS OR SPECIFICATIONS WITHOUT PRIOR APPROVAL OF THE NRCS.

1. Use Practice Specifications: Use "Crop Rotation on Organic Farms: A Planning Manual, NRAES 177" as a guide while completing this jobsheet.

The landowner/operator acknowledges that:

A) He/she has received a copy of the practice specifications, and Operation and Maintenance plan, and that he/she has an understanding of the contents and the requirements.

B) He/she has or will obtain all of the necessary permits prior to construction.

C) No changes will be made in the installation of the job without prior concurrence of the NRCS technician.

D) This practice has a lifespan of 1 year.

E) Adherence to the Operation and Maintenance plan of the installed work is necessary for proper performance during the practice lifespan.

F) NRCS planner shall be contacted prior to installation for a review of the practice installation and at completion for practice certification.

Accepted by :

Date:

Address :

Practice design approval

Lead Discipline for this practice: **Biological Conservation Sciences Division**

Job Classification:

_____ No design changes were made. _____ Design changes were approved and are included

Design approved by:

Date:

Practice certification

I have made an on-site inspection and have determined that the practice has been installed according to practice standard and specifications. The practice as-built has been appropriately completed on Conservation Practice Map included in job sheet.

Amount Installed:

Certified By:

Date: