**SAMPLE ADMINISTRATIVE INCOMPLETE REVIEW LETTER**

Date\_\_\_\_\_\_\_\_

Operator’s Name

Farm Name *(if used in the NMP)*

Operator’s Address

Operator’s Address

Re: Administrative Completeness Review of [*Name1*] Nutrient Management Plan

Dear Mr. / Mrs. / Ms. [*Name1*],

The *[Name2]* County Conservation District (\_\_\_CCD, or District) received the proposed Nutrient Management Plan (NMP or plan) on *[Date3]*, for your animal operation located at *[Address4]*. *[Name2]*) CD staff reviewed the plan in order to determine whether it contains the necessary information, maps and other documents necessary for administrative completeness, and is planned for the proper crop years.

Please be advised that your submission has been deemed ***administratively incomplete***, for the following reasons:

1. (Summary / Appendix #, section within \_\_) and list the first issue

2. (Summary / Appendix #, section within \_\_) and the second issue, etc.

3. (Summary / Appendix #, section within \_\_\_) and list issue, etc.

The *[Name2]* CD office cannot process an administrative incomplete Act 38 NMP and is therefore returning this plan so that corrections can be made. Please discuss the above listed items with your Nutrient Management Specialist and have him/her address these concerns.

The Act 38 program requires the re-submission of a complete NMP within 30 days of receipt of this notice. With that resubmission in mind, the *[Name2]* Conservation District requests you resubmit your Act 38 NMP by *[Date5].* Please expedite your planning efforts in meeting this timeframe.

Once an administratively completed plan is received at the *[Name2]* CD office, staff will perform a technical review of your plan. The *[Name2]* CD office is required to take an action within 90 days from the receipt of an administratively completed plan.

*I am [or Name2 (if the letter is signed by the District Manager)]* CD staff are available to discuss any of the concerns identified above either on the phone, or in person in order to facilitate the plan development process. Please feel free to call our office at *[Phone6].*

Sincerely,

*[Name7]*

*[Name2]*

Title

Attachment: Administratively Incomplete NMP

cc: Author of plan

File

*Name1 =* Name on NMP operator’s and / or farm name. Administrative in complete letters must be addressed to operator (not planner). Planner is copied.

*Name2=* Your conservation district name, first written out, then abbreviated thereafter (ex. Adams County Conservation District (ACCD))

*Date3 =* Date you received the NMP (don’t forget to write this on the plan’s cover page, and / or date-stamp the hard copy plan)

*Address4=* Site address (minus the state and zip code)

*Date 5* = 30 days after sending the administratively incomplete letter

*Phone*6 = CD phone number

*Name7 =* Reviewer of record or District Manager