**NOTE – This Form will be generated by PracticeKeeper**

**Attachment F**

**Page \_\_\_\_ of \_\_\_\_**

**NUTRIENT MANAGEMENT ACT**

**LEVEL 2 PLAN APPROVAL DATA**

**(Complete a separate page for each approved plan)**

**I. Operation Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approval Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Plan Withdrawn from Program (If applicable)\_\_\_\_\_\_\_\_\_\_\_\_**

**Original Plan or Revision (P/R) \_\_\_\_\_\_\_\_\_\_\_**

**CAFO Site Name (If applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CAO (Yes/No) \_\_\_\_\_\_\_\_\_\_**

**Watershed Code (No. & Letter) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Special Prot. Waters (HQ/EV/None) \_\_\_\_\_\_\_\_\_\_**

**Plan Author \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Author’s NMS Cert. Number \_\_\_\_\_\_\_\_\_\_\_**

**Plan Reviewer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reviewer’s Cert. Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**II. Acreage Table**

|  |  |  |
| --- | --- | --- |
| **Acreage** | **Owned** | **Rented** |
| **Total Plan Acres** |  |  |
| **Nutrient Application Acres** |  |  |

**III. Animal Manure Table**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Animal Type** | **Animal Subgroup** | **AEUs** | **Annual Manure Generated (Tons / Gallons)** | **Exported Manure (Tons / Gallons)** | **Manure Test Date** | **Percent Solids** | **Percent Moisture** | **Total N** | **Ammonia N** | **Total P** | **Water soluble P (if available)** | **Total K** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
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**IV. Imported Manure:**

|  |  |
| --- | --- |
| **Animal Type** | **Tons or Gallons /Yr. Imported** |
|  |  |
|  |  |

**V. Exported Manure:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **NBS Operation or Broker Name** | **Acres** | **Manure Type** | **Tons to Operation or Broker** | **Gallons to Operation or Broker** | **Receiving County** | **Receiving State** | **Out of CB watershed (yes / no)** |
|  |  |  |  |  |  |  |  |
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**VI. Manure Storage Unit 1: \_\_\_\_\_\_\_\_\_ cu. ft. or Unit 2: \_\_\_\_\_\_\_\_\_ cu. ft. or**

**Volume \_\_\_\_\_\_\_\_\_ gallons \_\_\_\_\_\_\_\_\_ gallons**

**VII. BMP Implementation Table**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Practice Code** | **Units** | **Estimate Acres** | **Impl. Quarter** | **Impl. Year** |
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