**Recommending Action of a NMP to Another CD**

Date: \_\_\_\_\_\_\_\_\_\_

CD Chairperson Name1

CD Address2

CD Address2

Re: Action (Approval or Disapproval) [select] of \_\_\_\_\_\_\_\_\_\_ [NMP Name] NMP

Dear \_\_\_\_\_\_ (CD Chairpersons name1),

I have completed the required technical review and site visit for the [NMP Name] nutrient management plan (NMP) [or plan amendment] [select], which was written by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Planner Name] of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Planner Company or CCD office]. This is a \_\_\_\_ [# years in NMP] year NMP that includes crop years 20\_\_ through 20\_\_. A crop year is understood to begin October 1 of the previous year; therefore this plan will take effect on October 1, 20\_\_.

I performed this review because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [either the farm operator is a member of your board of directors, or the plan was developed by a member of your staff] [select]. The plan was considered to be in its final form, available for public review, on \_\_\_\_\_\_\_\_\_\_\_\_\_ [date plan is in final form].

\_\_\_\_\_\_\_\_\_\_\_\_\_ [NMP Name], an existing (or proposed) [select] \_\_\_\_\_\_\_\_ [animal type] operation located in \_\_\_\_\_\_\_\_\_\_\_\_ Township, is home to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [animal species and number]. The operation has \_\_\_\_\_\_\_\_\_\_ acres suitable for manure application of which \_\_\_\_\_\_\_\_ acres are cropland and \_\_\_\_\_\_\_\_\_ acres are pasture. Crops grown the operation include \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [list crops grown and included in the NMP]. This operation, having an animal density of \_\_\_\_\_\_ AEUs/Acre, is defined as a \_\_\_\_\_\_\_\_\_\_ (Volunteer or Concentrated Animal Operation) [select] Operation under the PA Nutrient Management Act. The operation (is or is not) [select] considered a CAFO by the Department of Environmental Protection.

Manure application rates to cropland as outlined in the NMP are \_\_\_\_\_\_\_\_\_\_ [list the various application rates in the plan]. All manure application equipment has been calibrated to ensure the target rates can be achieved [or state that manure will be applied by a custom hauler whose equipment has been properly calibrated]. Additionally, \_\_\_\_\_\_\_ [manure type] manure is planned to be imported from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [exporting operation] and applied at \_\_\_\_\_\_\_\_\_\_\_ [list application rate]. [OR] Additionally, \_\_\_\_\_\_\_ [manure type] manure is planned to be exported to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [list importing operation(s)] and applied at according to the submitted Nutrient Balance Sheets.

The plan identifies several areas of concern to address manure management and storm water issues and lists the following best management practices to address these issues: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [list BMPs outlined in the plan].

In closing, based upon my technical review and site visit, I believe the requirements of the Pennsylvania Nutrient Management Act and Regulations have been (or not been) [select] met; therefore, I recommend this plan for approval (or disapproval) [select].

If there are any questions regarding the plan or my recommendation, call our office at \_\_\_\_\_\_\_\_\_\_\_\_\_ [Phone4].

Sincerely,

Name5

Title

 Name 3 County Conservation District

Cc: Planner

CD Chairperson Name1 – This is the chair of the CD that will be acting on the NMP

CD Address2 – Address of CD acting on the NMP

Name3 – Your conservation District Name

Phone4 – Your office phone number

Name5 - Your Name