Dear _______________________,

SELF CERTIFICATION OF COMPLETEION AND STATUS REVIEW OF CONSERVATION
RESERVE PROGRAM ACRES.
ACTION: Please return to NRCS office.

This letter is being sent to you to verify the status of your Conservation Reserve Program Contract number _______. Please put a check mark next to the appropriate item in each paragraph below that describes your situation. Then sign and return in the enclosed envelope by . The information on this form will be used by USDA to verify your eligibility for your CRP payment(s).

PROGRESS IN APPLYING MY CONSERVATION PLAN (check one)

______ All of the required practices listed in my CRP plan (seeding, tree planting, etc.) have been completed as scheduled. Bills, seed tags and other required documentation has been turned in to FSA for verification and payment.

______ Some practices have not yet been completed, due to adverse weather conditions or unavailability of grass seed or other plant materials. Weeds have been or will be controlled and a temporary cover has been or will be planted according to my conservation plan. (Weeds, crop residue, etc. are not acceptable as temporary cover under any circumstance).

______ Practice has been started and is planned to be completed by _______________(date).

CONDITION OF INSTALLED PRACTICES IN MY CONSERVATION PLAN (check one)

________ Grass seeding or tree / shrub planting is adequately established and weeds are being controlled.

________ Permanent cover has not yet become adequately established. An additional evaluation will be needed to determine if the cover meets the requirements of the plan.

NEED FOR REVISION OF MY CONSERVATION PLAN (check one)

______ No - my CRP conservation plan does not need any revisions.

______ Yes - my conservation plan needs to be changed. List the changes needed:

NEED FOR ADDITIONAL NRCS TECHNICAL ASSISTANCE

______ Yes. Please call me: _________________________________(phone #).

______ No

ADDITIONAL COMMENTS:

Signed __________________________________  ______________________

Contract Holder      Date

Sign and return in the enclosed envelope.