



**U.S. Department of Agriculture
Conservation Reserve Program**

SD-LTP-102
June 2020

South Dakota Field Documentation Worksheet

Name of Client:		Client Phone Number: () _____ - _____	
		Client e-mail:	
Farm Number:	Field Number(s):	Location Description:	County:
Tract Number:			State:
CRP Practice:	CRP Acres:	Current Contract Expiration Date:	Current Contract Length:

*Include photos, maps and any additional information to support field observations. When answering “no” to any of the below questions, photo documentation and a written description of field observations is the minimum documentation required. This information along with this form will be supplied to FSA.

1. Is the approved vegetative cover established?

Yes, approved cover established.

No, approved cover not established.

2. Is the approved vegetative cover being maintained?

Yes, approved cover maintained.

No, approved cover not maintained.

3. Is the conservation plan being followed?

Yes, participant is following the conservation plan.

No, participant is not following the conservation plan.

4. If applicable, are structural practices functioning?

Yes, structural practices functioning.

No, structural practices not functioning.

5. If re-enrollment, are additional acres needed to improve resource protection?

Yes, additional acres needed in the contract to address the resource concern.

No, current contracted acres addressing the resource concern.

6. Describe the observed plant community and any other general observations:

Notes:

Field Visit Completed By: _____

Date Field Visit Completed: _____