**U.S. Department of Agriculture**  
*Conservation Reserve Program CP33 Habitat Buffers for Upland Birds*  
*Documentation of Suitability and Feasibility Worksheet (Version 2.1 May 2019)*

<table>
<thead>
<tr>
<th>Name of Client:</th>
<th>Client Phone Number: (       ) ______ - ________</th>
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<tr>
<th>Farm Number:</th>
<th>Field Number(s):</th>
<th>Location Description:</th>
<th>State:</th>
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<tr>
<td>Tract Number:</td>
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<td>County:</td>
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*Refer to the Worksheet Instructions for guidance on completing a Suitability and Feasibility Determination.*

**CP33, Habitat Buffers for Upland Birds Practice Purpose:** Provide food and cover for quail and upland birds in cropland areas.

### Element #1 Site Conditions/Program Requirements

Note: Cropland fields less than 5 acres in size are not eligible (pivot corners may be less than 5 acres.)

Identify if offer area meets CP33 site condition criteria by checking all of the following:

- □ Minimum average width of the buffer is equal to or greater than 30 feet
- □ Maximum average width of the buffer does not exceed 120 feet

Current Cover Type in Offer Area: ________________________________

Current Land Use in Offer Area: ________________________________

- □ YES – All Site Conditions Referenced Above are Met  
- □ NO – Site Conditions Not Met

### Element #2 Practice Needs

Is there a resource concern within the offer area that is targeted by CP33 per the practice purpose?  
*If existing cover is solving the resource concern(s) in the practice purpose, then the determination must be that the CP is not needed. Reference Worksheet Instructions for guidance on CRP contract re-enrollment.*

Indicate which NRCS resource concern causes are present within the offer area:

**Primary Resource Concern Cause (The following resource concern cause must be present to meet practice need)**

- □ Inadequate Habitat for Fish and Wildlife: Habitat degradation

**Secondary Resource Concern Cause (Not required to be present to meet practice need)**

- □ Water Quality Degradation: Excessive sediment in surface waters
- □ Soil Erosion: Sheet, rill and wind
- □ Soil Erosion: Concentrated flow
- □ Soil Quality Degradation: Compaction
- □ Soil Quality Degradation: Organic matter depletion

- □ YES – Practice is Needed  
- □ NO – Practice Not Needed

### Element #3 Practice Feasibility

Will the implementation of CP33 solve or address the resource concern(s) listed in the practice purpose?  
*To meet feasibility, the size and location of the offer must follow CP33 policy as written in 2-CRP.  
*To meet feasibility, the client must agree to not use the buffer as turn rows, roads, or storage of crops or equipment.

- □ YES – Practice is Feasible  
- □ NO – Practice is Not Feasible
Element #4 Practice Suitability
Are the offered acres suitable for installation of the NRCS conservation practices needed to apply CP33?
*Offer acres must be suitable for the establishment of wildlife habitat primarily for quail and upland bird species. Offer acres may not exceed 25% undrained hydric or inundated soils (including frequently flooded floodplains) to be considered suitable.

☐ YES – Practice is Suitable  ☐ NO – Practice is Not Suitable

Suitability and Feasibility Determination Findings:

☐ The location and size of the offered acres as shown on the CRP-2C, digital imagery/map meet all four elements of the Suitability and Feasibility determination.

☐ The offer DOES NOT meet the Suitability and Feasibility requirements. Check the element(s) that were not met.

☐ Site Conditions/Program Requirements
☐ Practice Needs
☐ Practice Feasibility
☐ Practice Suitability

☐ Modification of the offer (either location, size or practice) would result in meeting all four S&F determination elements. See documentation.

Documentation:
Provide information supporting the determination of each element in this section.
Conservation Planner has attached or provided to FSA (check all that applies):

☐ Notes on form NRCS CPA-6  ☐ Map
☐ Photo’s  ☐ Electronic File with GPS Points or GIS Shapefile
☐ Other: ____________________________

Field Visit Completed by: __________________________ Date:_____________ Date returned to FSA:_____________

Suitability and Feasibility Determination Completed by: ________________________________