# Verifier’s Certainty Report

The following report is the summary of the results of the review process of documents, field inspections, and Maryland Nutrient Trading Tool baseline requirements that must be verified in order for the applicant to become a Certified Certainty Farm. Please refer to the Certainty Program Manual for additional guidance. As the Certified Verifier, by law, you are required to retain the application, information and records in a manner that protects its confidentiality prior to certification and retain all records and information in a manner that protects the identity of the person applying in perpetuity.

**NOTE:** If you have more than one farm parcel that you are reviewing please fill out an additional Certainty report for each farm parcel.

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<thead>
<tr>
<th>Application #:</th>
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<tr>
<td>Verifier Name:</td>
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| Type of review requested (check one) | ☐ “Full Certainty” | OR | ☐ “Farm Evaluation Only” |

<table>
<thead>
<tr>
<th>Date “Farmer’s Checklist” Received:</th>
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<tr>
<td>Date of NM Review Completed:</td>
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<tr>
<td>Date of SCWQP Review Completed:</td>
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<tr>
<td>Date of Farm Inspection:</td>
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<tr>
<td>Date of MNTT baseline Completed:</td>
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<tr>
<td>Date Certainty Report Completed:</td>
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Certainty Report

This Certainty Report will demonstrate that the applicant has a fully implemented Soil Conservation Water Quality Plan that addresses all nitrogen, phosphorous, and sediment runoff issues on the operation and that a current Nutrient Management Plan is being implemented in accordance with applicable MDA regulations COMAR 15.20.07 and 15.20.08. Furthermore, the operation must demonstrate that it meets or exceeds the baseline requirements established by the local or Chesapeake Bay Total Maximum Daily Load using the Maryland Nutrient Tracking Tool.

NOTE: MDE will not be involved in this Certainty Report and it is not the responsibility of the Verifier to contact them. MDE will be contacted directly by MDA after this report has been submitted with all other documents to the Certainty Program.

Name: ____________________________ County: ____________________________
Verifier Name: ____________________________ Farm #: ____________________________

Type of review: □ “Full Certainty” (check one) □ “Farm Evaluation Only”
Map/Parcel: ____________________________
Total Acres: ____________________________

Section I - “Farmer’s Checklist” Review

1. Date that you received the Farmer’s Checklist: ____________________________ Date: ____________________________
2. Was all requested information included with the Checklist? Yes ☐ No ☐
   If No, contact the applicant and request the information needed. See chart below:

<table>
<thead>
<tr>
<th>Missing Information</th>
<th>Date Requested</th>
<th>Date Received</th>
<th>NOTES</th>
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3. Do you have all the documents to complete the review? Yes ☐ No ☐
   NOTE: Do not start your review until all documents have been received.

NOTES:

03/2015 - Version 1.0
Maryland Department of Agriculture • 50 Harry S. Truman Parkway • Annapolis, MD 21401 • 410.841.5868
Section II - Maryland Nutrient Management Plan Review

A full Nutrient Management Plan Implementation Evaluation will be conducted by a MDA Nutrient Management Specialist. It is the Verifier’s responsibility to contact the appropriate Nutrient Management Specialist to complete this review process. This review will take some time to complete, so contacting the NM Specialist early in the review process is essential. Please attach a copy of the Plan Implementation Evaluation to this report when you receive it.

1. Who is the NM Specialist that will be conducting the Plan Implementation Evaluation for this farm parcel?
   - Name
   - Region
   - Phone #

2. When did you request the NM review?
   - Date

3. When did you receive the completed report?
   - Date

   A. Were there any deficiencies found that need corrective action?  
      Yes □  No □
      NOTE: All NM deficiencies in the report need to be addressed to be eligible for the Certainty Program.

      | Deficiencies | Date Fixed | NOTES |
      |--------------|------------|-------|
      |              |            |       |
      |              |            |       |
      |              |            |       |

   B. Have all follow-up reviews been completed at this time?  
      Yes □  No □

4. Does page 3 of the NM Plan Implementation Evaluation Report indicate that this review serves as the 1st Notice of Agency Action “Warning” issued by MDA?  
   - Yes □  No □

   NOTE: Any operation that has this warning is not eligible for the Program.

NMP Certification

I have reviewed the Nutrient Management Plan and Plan Implementation Evaluation Report and have determined that plan (☐ does meet or ☐ does not meet) the standards set forth in COMAR 15.20.07 and 15.20.08 at this time.

   Verifier Signature  
   Date

   Verifier Name  
   Verifier ID
Section III - Soil Conservation Water Quality Plan Review

1. What is the plan date for this SCWQP?  
   Date

2. Does the plan have all required signatures?  
   Yes ☐ No ☐  
   NOTE: Need all signatures to be a complete plan. If not, have plan signed.

3. Are there any BMPs that are planned and not applied that are required to address nitrogen, phosphorous, or sediment problems?  
   Yes ☐ No ☐  
   If No, state reason(s)

4. Is the crop rotation consistent with RUSLE2, SCWQP and NMP?  
   Yes ☐ No ☐  
   If No, state reason(s)

5. Has the plan been fully implemented?  
   Yes ☐ No ☐  
   If No, state reason(s)

6. Date the Farm inspection was completed:  
   Date

   A. Are there any addition BMPs needed to address nitrogen, phosphorous, or sediment problems on this farm parcel? List below.  
   Yes ☐ No ☐  
   NOTE: All erosion problems and required BMPs need to be addressed for eligibility in the Program. Do not continue this review until they are addressed.

<table>
<thead>
<tr>
<th>Erosion / Needed BMPs</th>
<th>Date Fixed</th>
<th>NOTES</th>
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SCWQP Certification

I have completed the Soil Conservation Water Quality Plan review and have found that this plan (☐ does meet or ☐ does not meet) the standards set forth in COMAR 15.20.11 for a SCWQP to address all nitrogen, phosphorous, and sediment issues on the operation.

Verifier Signature  
Date

Verifier Name  
Verifier ID
Section IV - Maryland Nutrient Tracking Tool Baseline Review

1. Do you have all of the required data to run the MNTT?  Yes ☐ No ☐

2. Have you entered all data into the MNTT?  Yes ☐ No ☐
   NOTE: Please attach a copy of the summary printout from MNTT to this report.

3. Please enter the results:
   Summary Date

   A. What are the TMDL allowable baseline loads for this operation?
      N  lbs/yr  P  lbs/yr  Sediment  lbs/yr

   B. What are the Current loads for this operation?
      N  lbs/yr  P  lbs/yr  Sediment  lbs/yr

   C. Are all the current loads less than the baselines?  Yes ☐ No ☐
      NOTE: You must be below baseline for nitrogen, phosphorus and sediment for the Certainty Program.

      If No, please contact the applicant and discuss what additional BMPs may be needed to meet baseline and run MNTT again with the agreed upon future BMPs.

      List BMP's needed below and the date planned for implementation:

      | Additional BMPs Needed to Meet Baseline | Planned Date | Applied Date | NOTES |
      |----------------------------------------|--------------|--------------|-------|
      |                                        |              |              |       |
      |                                        |              |              |       |

      NOTE: If additional BMPs are needed to meet baseline, the operation is NOT eligible for the Certainty Program until all of the BMPs have been implemented and a new MNTT summary report has been run.

   D. Are the new Current loads less than the baseline?  Attach new report.  N/A ☐ Yes ☐ No ☐
      N  lbs/yr  P  lbs/yr  Sediment  lbs/yr

MNTT Certification

I have completed the Maryland Nutrient Tracking Tool review and have found that this operation (☐ does meet or ☐ does not meet) the baseline requirements established by the local or Chesapeake Bay TMDL using the MNTT.

Verifier Signature  Date
Verifier Name  Verifier ID