



2018

Nutrient Management Annual Implementation Report

Due March 1, 2019

For Office Use

Farmer/Operator Information

1. County _____
2. MDA Operator Number _____
3. Operator/Owner **Legal** Name Last _____ Suffix _____
First _____ Middle _____
4. Farm/Operation Name _____
5. Mailing Address _____
6. City _____ 7. State _____ 8. Zip _____
9. E-Mail address _____
10. Telephone Number(s) Office _____ Home _____
Cell _____

Farm/Operation Information

11. _____ Total Farmed Acres including Pastures

12. Operation Type (Check all that apply)

- Crop Production
- Hay / Pasture
- Nursery/Greenhouse
- Organic
- Animal
- No-Land (0 Managed Acres)
- Other _____

13. Nutrient Sources (Check all that apply)

- Commercial Fertilizers No-Land
- Biosolids/Sewage Sludge
- Animal Manure
- Other _____

14. Animals - Number of head during 2018.

- _____ Beef, cows and bulls
- _____ Beef, feeder cattle, 500 lbs and over
- _____ Beef, young stock, less than 500 lbs
- _____ Dairy, cows
- _____ Dairy, heifers
- _____ Dairy, calves
- _____ Swine, sows and boars
- _____ Swine, growers
- _____ Sheep
- _____ Goats
- _____ Horses
- _____ Other _____

Poultry

15. Poultry (in 1,000s per flock)

- _____ Broilers/Roasters _____ Pullets
- _____ Layers _____ Turkeys

16. _____ Number of Flocks per year

Poultry (continued)

17. Poultry Company Name: _____

18. _____ Number of Poultry Houses

19. _____ Total square feet of all poultry houses

20. _____ Poultry litter in tons removed during crust outs in 2018. Check if Windrowed

21. _____ Poultry litter in tons removed during partial or total cleanout(s) in 2018.

22. Account ID updates - List changes to Account ID's, and check if added or deleted from operation since your 2017 AIR report. Attach additional pages if needed.

No change of account ID(s)

Added Deleted

- | | | |
|--------------------------|--------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Manure/Organics

23. _____ tons Solid manure collected (other than poultry)

24. _____ gals. Liquid manure/waste collected

25. Manure or Organics, all sources, imported or exported within the State of Maryland.

Imported Check if None

Tons

Gallons

- _____ Manure/Poultry Litter
- _____ Biosolids/Sewage Sludge
- _____ Other Organics

Exported Check if None

Tons

Gallons

- _____ Manure/Poultry Litter
- _____ Biosolids/Sewage Sludge
- _____ Other Organics

26. Manure or Organics, all sources, **imported from or exported to another state.**

Op ID _____

Imported Check if **None**

<u>State</u>	<u>Tons</u>	<u>Gallons</u>
_____	_____	_____ Manure/Poultry Litter
_____	_____	_____ Biosolids/Sewage Sludge
_____	_____	_____ Other Organics

Exported Check if **None**

<u>State</u>	<u>Tons</u>	<u>Gallons</u>
_____	_____	_____ Manure/Poultry Litter
_____	_____	_____ Biosolids/Sewage Sludge
_____	_____	_____ Other Organics

27. _____ Tons
_____ Gals. Total manure used, including imported from all animal types.
28. _____ Number of manure storage structures? Check if **None**
29. _____ Cu. Ft
_____ Gals
_____ Tons Total available storage
30. Yes No Temporary stockpiling of manure/organics?

Innovative Management Practices Total Number of Acres for each question. Put "0" if not applicable.

31. _____ Liquid manure applied with injector or other sub-surface applicator.
32. _____ Liquid manure incorporated within 48 hrs with vertical tillage equipment (Ex: "Turbo Till").
33. _____ Poultry litter incorporated within 48 hrs with vertical tillage equipment (Ex: "Turbo Till").
34. _____ Container nursery/greenhouse irrigation runoff and leachate capture and reuse.
35. _____ Acres under conservation tillage with 30%-59% residue coverage at planting.
36. _____ Acres under conservation tillage with 60% or more residue coverage at planting.
37. _____ Acres using variable rate fertilizer application or split application.
38. _____ Acres where Nitrogen was applied based on the recommendations of the Pre-Sidress Nitrogen Test (PSNT).
39. _____ Crop land under irrigation.
40. _____ Commercial fertilizer Nitrogen that was incorporated within 24 hours.
41. _____ Commercial fertilizer Phosphorus that was incorporated within 24 hours.
42. _____ Acres of manure application that were applied at the crops phosphorus removal rate.

Nutrient Management Consultant and Plan Information

43. Name of Nutrient Management Plan Writer: _____
44. Certificate # _____
45. License # _____
46. Date Nutrient Management Plan Written: _____
47. Date Nutrient Management Plan Expires: _____

Report Certification : The information contained within this 2018 Nutrient Management Annual Implementation Report (AIR) is true to the best of my knowledge. A valid nutrient management plan for my operation(s) for calendar year 2019 will be developed and implemented.

48. Operator's Signature _____
49. Printed Name: _____
50. Date signed: _____

51. Summary of Nutrient Applications by Crop See Instructions for help with this table.

TOTAL pounds of AVAILABLE nutrients applied. If you did not apply nutrients, list the crop, the crop acreage and write “none applied” across the row.

CROP Include Pastures	Acres	Commercial Fertilizer in pounds			Manure in pounds			Sewage Sludge in pounds			Other Organic Sources in pounds		
		N	P ₂ O ₅	K ₂ O	N	P ₂ O ₅	K ₂ O	N	P ₂ O ₅	K ₂ O	N	P ₂ O ₅	K ₂ O
Corn grain, dry land													
Corn grain, irrigated													
Corn silage													
Soybeans, full season													
Soybeans, double crop													
Small grains, Spring 2018													
Small grains, Fall 2018													
Hay, grass													
Hay, legume													
Pasture													
Vegetables													
Tobacco													
List other crops:													

Op ID