Application # :	
application in .	



## MARYLAND'S AGRICULTURAL CERTAINTY PROGRAM

## **NTT Required Data Collection Sheet**

This sheet will be used by the Verifier to document the operator's crop management details that will be used in the Chesapeake Bay Nutrient Tracking Tool baseline run. Please interview the operator and provide answers to all of the following questions. Please document the typical crop rotation for all fields for this application. Document crops planted, planting method & dates, fertilizer type & amount (N &  $P_2O_5$ ).

Operator Name:					County:			
Verifier Name:					Farm #: Tract #:			
Type of review:   "Full Certainty"					Map/Parcel: /			
(check one)   "Farm Evaluation Only"				Total Acres:				
Field #'s				]	Acres			
Year Crop Type	Method Planting date MM/DD	Nutrie	ent Type Ibs/ac Date	Incorporated? Depth inches		Tillage operations Date	Harvest Cover Crop	
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			

Application #:

eld #'s				Acres				
Year Plan	Method Planting date MM/DD	Nutrient Type Ibs/ac Date		Incorporated? Depth inches		Tillage operations Date	Harvest Cover Crop	
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No			
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No "			

Field #'s				] ,	Acres		
Year Crop Type	Method Planting date MM/DD	Nutrient Type lbs/ac Date		Incorporated? Depth inches		Tillage operations Date	Harvest Cover Crop
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No		
					"		
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No		
					"		
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No		
					u		
		N:	P2O5:	Yes	No		
					"		
		N:	P2O5:	Yes	No		
					"		
		N:	P <sub>2</sub> O <sub>5</sub> :	Yes	No		
					u		