Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Landowner Name: | Area of Field: | Project Location  Field ID:  Watershed:  County:  Township:  Range:  Section: |
| Address: | Conservation Practice(s): |

Field Representative/Third Party Verifier Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Field Representative/Third Party Verifier Program ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total number of fields under management? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Crop Rotation in this Field: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Inspection Purpose(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Site application & establishment | |  | Site re-establishment after request for maintenance |
|  | Agricultural producer requested site change | |  | Appeal or compliant resolution |
|  | Other: |  | | |

Inspection Purpose(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Site application & establishment | |  | Site re-establishment after request for maintenance |
|  | Agricultural producer requested site change | |  | Appeal or compliant resolution |
|  | Other: |  | | |

Inspection Purpose(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Site application & establishment | |  | Site re-establishment after request for maintenance |
|  | Agricultural producer requested site change | |  | Appeal or compliant resolution |
|  | Other: |  | | |

Inspection Purpose(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Site application & establishment | |  | Site re-establishment after request for maintenance |
|  | Agricultural producer requested site change | |  | Appeal or compliant resolution |
|  | Other: |  | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Crop |  | | | | | | | | | | | |
| WQIag Tool Year |  | | |  | | |  | | |  | | |
| Date of Inspection |  | | |  | | |  | | |  | | |
| WQIag Values & Weighting Factors | Ranking/Value | | Change Noted\* | Ranking/Value | | Change Noted\* | Ranking/Value | | Change Noted\* | Ranking/Value | | Change Noted\* |
| **Field Physical Factors** | | | | | | | | | | | | |
| Slope |  | |  |  | |  |  | |  |  | |  |
| Hydrologic Soil Group |  | |  |  | |  |  | |  |  | |  |
| K-factor |  | |  |  | |  |  | |  |  | |  |
| Organic Matter Content |  | |  |  | |  |  | |  |  | |  |
| Rainfall Vegetation Cover |  | |  |  | |  |  | |  |  | |  |
| Comments: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| \*Change Noted Values: Yes (Y), No (N), Not Applicable (N/A) | | | | | | | | | | | | |
|  |  | |  |  | |  |  | |  |  | |  |
| WQIag Values & Weighting Factors | Ranking/Value | | Change Noted\* | Ranking/Value | | Change Noted\* | Ranking/Value | | Change Noted\* | Ranking/Value | | Change Noted\* |
| **Nutrient Management Factors** | | | | | | | | | | | | |
| Nitrogen Application Rate |  |  | |  | |  |  |  | |  |  | |
| Phosphorus Application Rate |  |  | |  | |  |  |  | |  |  | |
| Synthetic Fertilizer Timing |  |  | |  | |  |  |  | |  |  | |
| Synthetic Fertilizer Source |  |  | |  | |  |  |  | |  |  | |
| Synthetic Fertilizer Placement |  |  | |  | |  |  |  | |  |  | |
| Manure Application Timing and Placement |  |  | |  |  | |  |  | |  |  | |
| Comments: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Tillage Management** | | | | | | | | | | | | |
| Tillage Management |  |  | |  | |  |  |  | |  |  | |
| Comments: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Pesticide Management** | | | | | | | | | | | | |
| Pesticide Management |  |  | |  | |  |  |  | |  |  | |
| Comments: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| \*Change Noted Values: Yes (Y), No (N), Not Applicable (N/A) | | | | | | | | | | | | |
| WQIag Values & Weighting Factors | Ranking/Value | | | Ranking/Value | | | Ranking/Value | | | Ranking/Value | | |
| **WQIag – Base Score (unadjusted by Tile, Irrigation or Conservation Practice Adjustment Factors)** | | | | | | | | | | | | |
| WQIag Base Score: |  | | |  | | |  | | |  | | |
| **Tile Adjustment Factor** | | | | | | | | | | | | |
| Tile Adjustment |  | | |  | | |  | | |  | | |
| Additional Tile Added? |  | | |  | | |  | | |  | | |
| Open Inlets? |  | | |  | | |  | | |  | | |
| Comments: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Irrigation Adjustment Factor** | | | | | | | | | | | | |
| Irrigation Adjustment Factor |  | | |  | | |  | | |  | | |
| Equipment O&M Adequate? Y/N |  | | |  | | |  | | |  | | |
| Comment: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Conservation Practice #1** | | | | | | |
| Name:  Attach Conservation Practice Inspection Form | | | | | | |
| Conservation Practice functioning properly (Y/N)? |  |  | |  | |  |
| Comment: | | | | | | |
|  | | | | | | |
| **Conservation Practice #2** | | | | | | |
| Name:  Attach Conservation Practice Inspection Form | | | | | | |
| Conservation Practice functioning properly (Y/N)? |  |  | |  | |  |
| Comment: | | | | | | |
|  | | | | | | |
| **Conservation Practice #3** | | | | | | |
| Name:  Attach Conservation Practice Inspection Form | | | | | | |
| Conservation Practice functioning properly (Y/N)? |  |  | |  | |  |
| Comment: | | | | | | |
|  | | | | | | |
| **Final WQIag Adjusted Score** | | | | | | |
| WQIag score: |  |  |  | |  | |
| Comments: | | | | | | |
|  | | | | | | |
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**Evaluation of Farm Required Elements (only required on the establishment field recording form):**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Field Stewards Program Requirements | Verified | Unable to Verify |
| 1. | Feedlot compliance |  |  |
| 2. | Wetland compliance |  |  |
| 3. | Septic System compliance |  |  |
| 4. | Pesticide and fertilizer compliance |  |  |
| 5. | Shoreland and riparian buffer compliance |  |  |
| 6. | Certification with MAWQCP program without any pending BMPs |  |  |

|  |  |
| --- | --- |
| **Final WQIag Adjusted Score** | |
| WQIag score: |  |
| Inspection Date: |  |

On behalf of Conservation Marketplace Midwest and the Field Stewards Program, I certify that I have inspected the records, field and Conservation Practice area(s) and, to the best of my knowledge, this inspection form and the associated documentation accurately represents the current condition of the field at the time of inspection.

Field Representative/Third Party Verifier:

Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Copies of Certification Field Inspection Form provided to: Field Stewards certified field representative/Field Steward Aggregator; Administrator’s office; Third Party Verifier, if needed