

CRP WATERWAY CUSTOMER TECHNICAL CHECK LIST

RECEIVE MAP FROM FSA WITH FARM & TRACT NUMBER –

ARE YOU THE LANDOWNER _____ OR OPERATOR _____ NAME _____

CONTACT INFO: PHONE _____

ADDRESS OF PROJECT: _____

YES NO

_____ IS THE AREA OF WATERWAY ELIGIBLE FOR COST SHARE? IF NO CHECK ON AN EQIP APPLICATION

_____ IS THERE EXISTING TILE IN AREA?

_____ IS IT SYSTEMATICALLY TILED?

_____ CONDITION OF THE TILE AND SIZE IF KNOWN (MATERIAL OF TILE IF KNOWN) _____

_____ ARE YOU PLANNING TO REPLACE THE EXISTING TILE?

_____ IS THERE FUTURE TO INSTALL SYSTEMATIC TILE ALONG THIS WATERWAY?

_____ IS THE OUTLET OF THE WATERWAY AND TILE ON YOUR PROPERTY?

IF NO – WHERE DO YOU THINK IT WILL OUTLET _____

_____ DO YOU KNOW OF ANY UTILITIES IN THE AREA?

_____ DOES THE OUTLET GO INTO A DITCH OR CREEK? _____

REVIEW A WATERSHED

_____ IS THE TILE OUTLET ON A NEIGHBOR? IF YES, HAVE YOU TALKED TO THAT NEIGHBOR AND DO YOU HAVE

PERMISSION TO CROSS? WILL NEED A WRITTEN PERMISSION TO BE KEPT ON FILE.

_____ WHAT IS YOUR CROPPING PLAN ROTATION? _____

_____ IS WHEAT IN ROTATION (WHEN)? _____

_____ WHEN DO YOU PLAN TO CONSTRUCT THE PROJECT? _____

_____ DO YOU WANT A COST SHARE ESTIMATE ON THE PROJECT – BEFORE IT IS FULLY DESIGNED?

_____ DO YOU HAVE A CONTRACTOR LINED UP? NAME OF CONTRACTOR _____

MENTION SEEDING DATES:

SPRING SEEDING – MARCH 15 THROUGH MAY 31

FALL SEEDING – AUGUST 1 THROUGH SEPTEMBER 15