

San Joaquin Valley Air Pollution Control District CONSERVATION MANAGEMENT PRACTICES PLAN APPLICATION

General Information

A Conservation Management Practices (CMP) plan is a requirement for all agricultural operation sites as specified in Section 5.0 of District Rule 4550. The goal of this CMP plan is to reduce sources of PM₁₀ emissions from agricultural operations. Note: The CMPs chosen in this plan must be implemented by July 1, 2004.

Name of Facility: _____

Facility Location: _____

Total Farm Acreage: _____

City/State/Zip Code: _____

Mailing Address: _____

City/State/Zip code: _____

Phone: _____

Fax: _____

Other (Cell): _____

Person Responsible: _____

Title: _____

Signature: _____

Date: _____

Please list the following information for the persons responsible for:

Plan Preparation:

Same as Person Responsible Above?

Name: _____

Title: _____

Address: _____

City/State/Zip code: _____

Phone: _____

Fax: _____

Other (Cell): _____

Plan Implementation:

Same as Person Responsible Above?

Name: _____

Title: _____

Address: _____

City/State/Zip code: _____

Phone: _____

Fax: _____

Other (Cell): _____

FOR CMP PLAN EVALUATOR USE ONLY

This CMP plan application has been verified to contain all supporting information required by the APCO to evaluate the application. Checklist attached.

Name: _____ Title: _____ Office Location: _____

Signature: _____ Date: _____ Phone #: _____

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: ALFALFA

Farm Name: _____ CMP Plan Years: _____ to _____

Maximum Crop Acreage: _____

Fallow Acreage Last Planted in Alfalfa: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	
<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac										
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<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac										
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Harvest	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Baling/Large Balers, _____ ac</td> <td><input type="checkbox"/> Night Harvesting, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Green Chop, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Multiple CMPs in Another Category, _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Baling/Large Balers, _____ ac	<input type="checkbox"/> Night Harvesting, _____ ac	<input type="checkbox"/> Green Chop, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category, _____ ac			
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<input type="checkbox"/> Equipment Change/Tech. Improvements	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac										
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<input type="checkbox"/> Cover Crop, _____ ac	<input type="checkbox"/> Surface Roughening, _____ ac										
<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac										

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: CORN, GRAIN, AND SILAGE

Farm Name: _____ CMP Plan Years: _____ to _____

Maximum Crop Acreage: _____

Fallow Acreage Last Planted in Corn, Grain, or Silage: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs.</p> <p>Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Mulching, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Transgenic Crops, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	
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<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Wind Barrier, _____ ac														
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: COTTON

Farm Name: _____ CMP Plan Years: _____ to _____

Maximum Crop Acreage: _____

Fallow Acreage Last Planted in Cotton: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs.</p> <p>Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Transgenic Crops, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac
<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac												
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<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac												

Harvest	<p>Select at least one of the following CMPs.</p> <p>Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Conservation Tillage, (e.g. no plow-down), _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Conservation Tillage, (e.g. no plow-down), _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	
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**San Joaquin Valley Air Pollution Control District
Supplemental Application Form**

**Conservation Management Practices: DRY BEANS, CEREAL
GRAINS, SAFFLOWER,
WHEAT, AND BARLEY**

Farm Name: _____ CMP Plan Years: _____ to _____
 Maximum Crop Acreage: _____
 Fallow Acreage Last Planted in Dry Beans, Cereal Grains, Safflower, Wheat, or Barley: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table border="0"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Mulching, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Transgenic Crops, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac		
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<input type="checkbox"/> Irrigation Power Units															

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: GRAPES

Farm Name: _____ CMP Plan Years: _____ to _____
 Table Grape Acreage: _____ Wine Grape Acreage: _____ Raisin Acreage: _____
 Fallow Acreage Last Planted in Grapes: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Alternate Till, _____ ac</td> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Mulching, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Cover Crop, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Alternate Till, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Cover Crop, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac
<input type="checkbox"/> Alternate Till, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac														
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<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category														
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<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac														
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<input type="checkbox"/> Cover Crop, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
Harvest	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Continuous Tray/DOV, _____ ac</td> <td><input type="checkbox"/> Night Harvesting, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> No Burning (Paper Trays), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Hand Harvesting, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Continuous Tray/DOV, _____ ac	<input type="checkbox"/> Night Harvesting, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> No Burning (Paper Trays), _____ ac	<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac						
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<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac														
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
Other	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Alternate Till, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> No Burning, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Grinding/Chipping/Shredding, _____ ac</td> <td><input type="checkbox"/> Permanent Crop, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> <td><input type="checkbox"/> Sulfur, Reduct. or Elimination of Dusting, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Irrigation Power Units</td> <td><input type="checkbox"/> Surface Roughening, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mechanical Pruning, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mulching, _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Alternate Till, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> No Burning, _____ ac	<input type="checkbox"/> Grinding/Chipping/Shredding, _____ ac	<input type="checkbox"/> Permanent Crop, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Sulfur, Reduct. or Elimination of Dusting, _____ ac	<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Surface Roughening, _____ ac	<input type="checkbox"/> Mechanical Pruning, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Mulching, _____ ac	
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<input type="checkbox"/> Mechanical Pruning, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
<input type="checkbox"/> Mulching, _____ ac															

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: NUT CROPS

Farm Name: _____ CMP Plan Years: _____ to _____
 Crop Acreage: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Cover Crop, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Floor Management, _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac	<input type="checkbox"/> Cover Crop, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Floor Management, _____ ac	
<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac														
<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category														
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<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
<input type="checkbox"/> Floor Management, _____ ac															
Harvest	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Floor Management, _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Floor Management, _____ ac							
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<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Wind Barrier, _____ ac														
<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
<input type="checkbox"/> Multiple CMPs in Another Category															

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: ONIONS AND GARLIC

Farm Name: _____ CMP Plan Years: _____ to _____

Maximum Crop Acreage: _____

Fallow Acreage Last Planted in Onions or Garlic: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Transgenic Crops, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Transplanting, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mulching, _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transplanting, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Mulching, _____ ac	
<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category														
<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac														
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<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac														
<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transplanting, _____ ac														
<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
<input type="checkbox"/> Mulching, _____ ac															
Harvest	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Pre-harvest Soil Preparation, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Shed Packing, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Hand Harvesting, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Night Harvesting, _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Pre-harvest Soil Preparation, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Shed Packing, _____ ac	<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Night Harvesting, _____ ac					
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Other	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Application Efficiencies, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> No Burning, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> <td><input type="checkbox"/> Surface Roughening, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Irrigation Power Units</td> <td><input type="checkbox"/> Wind Barrier, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mulching, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Application Efficiencies, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> No Burning, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Surface Roughening, _____ ac	<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Wind Barrier, _____ ac	<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac				
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<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: SUGAR BEETS

Farm Name: _____ CMP Plan Years: _____ to _____

Maximum Crop Acreage: _____

Fallow Acreage Last Planted in Sugar Beets: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac
<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac										
<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category										
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<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac										
<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac										
Harvest	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac						
<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac										
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac										
Other	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Application Efficiencies, _____ ac</td> <td><input type="checkbox"/> No Burning, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> Surface Roughening, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> <td><input type="checkbox"/> Transgenic Crops, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Irrigation Power Units</td> <td><input type="checkbox"/> Wind Barrier, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Application Efficiencies, _____ ac	<input type="checkbox"/> No Burning, _____ ac	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Surface Roughening, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac	<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Wind Barrier, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac
<input type="checkbox"/> Application Efficiencies, _____ ac	<input type="checkbox"/> No Burning, _____ ac										
<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Surface Roughening, _____ ac										
<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac										
<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Wind Barrier, _____ ac										
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac										

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: TREE FRUIT

Farm Name: _____ CMP Plan Years: _____ to _____
 Crop Acreage: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Cover Crop, _____ ac</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Cover Crop, _____ ac	
<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac												
<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category												
<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Non-Tillage/Chemical Tillage, _____ ac												
<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac												
<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac												
<input type="checkbox"/> Cover Crop, _____ ac													
Harvest	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Hand Harvesting, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac								
<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac												
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac												
Other	<p>Select at least one of the following CMPs. Note: 100% of the total crop acreage must be covered by the selected CMPs.</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Grinding/Chipping/Shredding, _____ ac</td> <td><input type="checkbox"/> No Burning, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> <td><input type="checkbox"/> Permanent Crop, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Irrigation Power Units</td> <td><input type="checkbox"/> Surface Roughening, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mechanical Pruning, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Grinding/Chipping/Shredding, _____ ac	<input type="checkbox"/> No Burning, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Permanent Crop, _____ ac	<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Surface Roughening, _____ ac	<input type="checkbox"/> Mechanical Pruning, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	
<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Night Farming, _____ ac												
<input type="checkbox"/> Grinding/Chipping/Shredding, _____ ac	<input type="checkbox"/> No Burning, _____ ac												
<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Permanent Crop, _____ ac												
<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Surface Roughening, _____ ac												
<input type="checkbox"/> Mechanical Pruning, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac												
<input type="checkbox"/> Multiple CMPs in Another Category													

**San Joaquin Valley Air Pollution Control District
Supplemental Application Form**

**Conservation Management Practices: VEGETABLES, TOMATOES,
MELONS, AND OTHER**

Farm Name: _____ CMP Plan Years: _____ to _____
 Maximum Crop Acreage: _____
 Fallow Acreage Last Planted in Vegetables, Tomatoes, Melons, or Other: _____

Land Preparation/ Cultivation	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table border="0"> <tr> <td><input type="checkbox"/> Bed/Row Size or Spacing, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Chemigation/Fertigation, _____ ac</td> <td><input type="checkbox"/> Night Farming, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Precision Farming (GPS), _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Irrigation, _____ ac</td> <td><input type="checkbox"/> Surface Roughening, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Conservation Tillage, _____ ac</td> <td><input type="checkbox"/> Transgenic Crops, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Transplanting, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mulching, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac	<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Surface Roughening, _____ ac	<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Transplanting, _____ ac	<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac
<input type="checkbox"/> Bed/Row Size or Spacing, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category														
<input type="checkbox"/> Chemigation/Fertigation, _____ ac	<input type="checkbox"/> Night Farming, _____ ac														
<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Precision Farming (GPS), _____ ac														
<input type="checkbox"/> Conservation Irrigation, _____ ac	<input type="checkbox"/> Surface Roughening, _____ ac														
<input type="checkbox"/> Conservation Tillage, _____ ac	<input type="checkbox"/> Transgenic Crops, _____ ac														
<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Transplanting, _____ ac														
<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
Harvest	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table border="0"> <tr> <td><input type="checkbox"/> Combined Operations, _____ ac</td> <td><input type="checkbox"/> Night Harvesting, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac</td> <td><input type="checkbox"/> Shed Packing, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Hand Harvesting, _____ ac</td> <td><input type="checkbox"/> Shuttle System, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Harvesting, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Shed Packing, _____ ac	<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac						
<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Harvesting, _____ ac														
<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Shed Packing, _____ ac														
<input type="checkbox"/> Hand Harvesting, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac														
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														
Other	<p>Select at least one of the following CMPs. Note: 100% of the maximum crop acreage must be covered by the selected CMPs.</p> <table border="0"> <tr> <td><input type="checkbox"/> Application Efficiencies, _____ ac</td> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> </tr> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> No Burning, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Integrated Pest Management (IPM), _____ ac</td> <td><input type="checkbox"/> Surface Roughening, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Irrigation Power Units</td> <td><input type="checkbox"/> Wind Barrier, _____ ac</td> </tr> <tr> <td><input type="checkbox"/> Mulching, _____ ac</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac</td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____ _____ _____</p>	<input type="checkbox"/> Application Efficiencies, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> No Burning, _____ ac	<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Surface Roughening, _____ ac	<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Wind Barrier, _____ ac	<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac				
<input type="checkbox"/> Application Efficiencies, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category														
<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> No Burning, _____ ac														
<input type="checkbox"/> Integrated Pest Management (IPM), _____ ac	<input type="checkbox"/> Surface Roughening, _____ ac														
<input type="checkbox"/> Irrigation Power Units	<input type="checkbox"/> Wind Barrier, _____ ac														
<input type="checkbox"/> Mulching, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac														

**San Joaquin Valley Air Pollution Control District
Supplemental Application Form**

**Conservation Management Practices: UNPAVED ROADS AND
UNPAVED VEHICLE/
EQUIPMENT AREAS FOR
CROPS**

Farm Name: _____ CMP Plan Years: _____ to _____
 Unpaved Road Mileage: _____ Unpaved Vehicle/Equipment Areas Acreage: _____

**Unpaved
Roads**

If daily vehicle trips are ≥ 75 on unpaved roads, select at least one of the following controls (Reg. VIII compliance).

- | | |
|---|---|
| <input type="checkbox"/> Dust Suppressant, _____ mi | <input type="checkbox"/> Washed Gravel, _____ mi |
| <input type="checkbox"/> Paving, _____ mi | <input type="checkbox"/> Water, _____ mi |
| <input type="checkbox"/> Road Mix, _____ mi | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ mi |
| <input type="checkbox"/> Road Oil, _____ mi | |

Please describe the specifics of the practice(s) chosen above: _____

If daily vehicle trips are < 75 on unpaved roads, select at least one of the following controls (CMP compliance).

- | | |
|--|---|
| <input type="checkbox"/> Chips/Mulches, _____ mi | <input type="checkbox"/> Sand, _____ mi |
| <input type="checkbox"/> Less Than 10 Vehicle Trips on Any Day, _____ mi | <input type="checkbox"/> Speed Limit Posted, _____ mi |
| <input type="checkbox"/> Mechanical Pruning, _____ mi | What Speed? _____ mph (must be ≤ 25 mph) |
| <input type="checkbox"/> Organic Materials, _____ mi | <input type="checkbox"/> Track Out Control, _____ mi |
| <input type="checkbox"/> Paving, _____ mi | <input type="checkbox"/> Water, _____ mi |
| <input type="checkbox"/> Polymers, _____ mi | <input type="checkbox"/> Washed Gravel, _____ mi |
| <input type="checkbox"/> Restricted Access, _____ mi | <input type="checkbox"/> Wind Barrier, _____ mi |
| <input type="checkbox"/> Road Oil, _____ mi | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ mi |

Please describe the specifics of the practice(s) chosen above: _____

**Unpaved
Vehicle/
Equipment
Areas**

If average daily vehicle trips (on an annual basis) are ≥ 50 on unpaved equipment yards, or if average daily trips (on an annual basis) are ≥ 25 by three or more axle vehicles, or if maximum daily trips on any day ≥ 150 during a 30 day period or less, select at least one of the following controls (Reg. VIII compliance).

- | | |
|---|---|
| <input type="checkbox"/> Dust Suppressant, _____ ac | <input type="checkbox"/> Vegetative Material, _____ ac |
| <input type="checkbox"/> Paving, _____ ac | <input type="checkbox"/> Washed Gravel, _____ ac |
| <input type="checkbox"/> Road Mix, _____ ac | <input type="checkbox"/> Water, _____ ac |
| <input type="checkbox"/> Road Oil, _____ ac | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac |

Please describe the specifics of the practice(s) chosen above: _____

If average daily vehicle trips (on an annual basis) are < 50 on unpaved equipment yards, or if average daily trips (on an annual basis) are < 25 by three or more axle vehicles, or if maximum daily vehicle trips on any day are < 150 during a 30 day period or less, select at least one of the following controls (CMP compliance).

- | | |
|--|---|
| <input type="checkbox"/> Chips/Mulches, _____ ac | <input type="checkbox"/> Speed Limit Posted, _____ ac |
| <input type="checkbox"/> Less Than 10 Vehicle Trips on Any Day, _____ ac | What Speed? _____ mph (must be ≤ 15 mph) |
| <input type="checkbox"/> Organic Material, _____ ac | <input type="checkbox"/> Track Out Control, _____ ac |
| <input type="checkbox"/> Paving, _____ ac | <input type="checkbox"/> Water, _____ ac |
| <input type="checkbox"/> Polymers, _____ ac | <input type="checkbox"/> Washed Gravel, _____ ac |
| <input type="checkbox"/> Restricted Access, _____ ac | <input type="checkbox"/> Wind Barrier, _____ ac |
| <input type="checkbox"/> Road Oil, _____ ac | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac |
| <input type="checkbox"/> Sand, _____ ac | |

Please describe the specifics of the practice(s) chosen above: _____

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: DAIRY

Farm Name: _____	CMP Plan Years: _____ to _____	
Maximum Number of Milk Cows: _____	Maximum Number of Dry Cows: _____	Maximum Number of Support Stock: _____

Corral/ Manure Handling	<p>Select one of the following CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Fibrous Layer in Dusty Areas</td> <td><input type="checkbox"/> Scraping/Harrowing (in Morning Hours)</td> </tr> <tr> <td><input type="checkbox"/> Freestall Housing</td> <td><input type="checkbox"/> Shaded Areas in Open Corrals</td> </tr> <tr> <td><input type="checkbox"/> Frequent Scraping and/or Manure Removal</td> <td><input type="checkbox"/> Sprinkling of Open Corral</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis)</td> </tr> <tr> <td><input type="checkbox"/> Pull Type Manure Harvesting Equipment</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Fibrous Layer in Dusty Areas	<input type="checkbox"/> Scraping/Harrowing (in Morning Hours)	<input type="checkbox"/> Freestall Housing	<input type="checkbox"/> Shaded Areas in Open Corrals	<input type="checkbox"/> Frequent Scraping and/or Manure Removal	<input type="checkbox"/> Sprinkling of Open Corral	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis)	<input type="checkbox"/> Pull Type Manure Harvesting Equipment	
<input type="checkbox"/> Fibrous Layer in Dusty Areas	<input type="checkbox"/> Scraping/Harrowing (in Morning Hours)										
<input type="checkbox"/> Freestall Housing	<input type="checkbox"/> Shaded Areas in Open Corrals										
<input type="checkbox"/> Frequent Scraping and/or Manure Removal	<input type="checkbox"/> Sprinkling of Open Corral										
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis)										
<input type="checkbox"/> Pull Type Manure Harvesting Equipment											
Overall Management/ Feeding	<p>Select one of the following CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> Placing Wet Material in Feedwagon First</td> </tr> <tr> <td><input type="checkbox"/> Downwind Shelterbelts/Boundary Trees</td> <td><input type="checkbox"/> Wet Feed During Mixing</td> </tr> <tr> <td><input type="checkbox"/> Feeding Youngstock Near Dusk</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis)</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Placing Wet Material in Feedwagon First	<input type="checkbox"/> Downwind Shelterbelts/Boundary Trees	<input type="checkbox"/> Wet Feed During Mixing	<input type="checkbox"/> Feeding Youngstock Near Dusk	<input type="checkbox"/> Other (approved on a case-by-case basis)	<input type="checkbox"/> Multiple CMPs in Another Category			
<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Placing Wet Material in Feedwagon First										
<input type="checkbox"/> Downwind Shelterbelts/Boundary Trees	<input type="checkbox"/> Wet Feed During Mixing										
<input type="checkbox"/> Feeding Youngstock Near Dusk	<input type="checkbox"/> Other (approved on a case-by-case basis)										
<input type="checkbox"/> Multiple CMPs in Another Category											

San Joaquin Valley Air Pollution Control District Supplemental Application Form

Conservation Management Practices: FEEDLOT

Farm Name: _____ CMP Plan Years: _____ to _____
 Maximum Number of Cattle: _____

Pens/Manure Handling	<p>Select one of the following CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Fibrous Layer in Working Areas</td> <td><input type="checkbox"/> Sprinkling</td> </tr> <tr> <td><input type="checkbox"/> Frequent Scraping and/or Manure Removal</td> <td><input type="checkbox"/> Pull Type Manure Harvesting Equipment</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis)</td> </tr> <tr> <td><input type="checkbox"/> Shaded for Animals</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Fibrous Layer in Working Areas	<input type="checkbox"/> Sprinkling	<input type="checkbox"/> Frequent Scraping and/or Manure Removal	<input type="checkbox"/> Pull Type Manure Harvesting Equipment	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis)	<input type="checkbox"/> Shaded for Animals	
<input type="checkbox"/> Fibrous Layer in Working Areas	<input type="checkbox"/> Sprinkling								
<input type="checkbox"/> Frequent Scraping and/or Manure Removal	<input type="checkbox"/> Pull Type Manure Harvesting Equipment								
<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Other (approved on a case-by-case basis)								
<input type="checkbox"/> Shaded for Animals									
Overall Management/ Feeding	<p>Select one of the following CMPs.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Bulk Materials Control</td> <td><input type="checkbox"/> Placing of Wet Material in Feedwagon First</td> </tr> <tr> <td><input type="checkbox"/> Downwind Shelterbelts/Boundary Trees</td> <td><input type="checkbox"/> Wet Feed During Mixing</td> </tr> <tr> <td><input type="checkbox"/> Feeding Near Dusk</td> <td><input type="checkbox"/> Other (approved on a case-by-case basis)</td> </tr> <tr> <td><input type="checkbox"/> Multiple CMPs in Another Category</td> <td></td> </tr> </table> <p>Please describe the specifics of the practice(s) chosen above: _____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Placing of Wet Material in Feedwagon First	<input type="checkbox"/> Downwind Shelterbelts/Boundary Trees	<input type="checkbox"/> Wet Feed During Mixing	<input type="checkbox"/> Feeding Near Dusk	<input type="checkbox"/> Other (approved on a case-by-case basis)	<input type="checkbox"/> Multiple CMPs in Another Category	
<input type="checkbox"/> Bulk Materials Control	<input type="checkbox"/> Placing of Wet Material in Feedwagon First								
<input type="checkbox"/> Downwind Shelterbelts/Boundary Trees	<input type="checkbox"/> Wet Feed During Mixing								
<input type="checkbox"/> Feeding Near Dusk	<input type="checkbox"/> Other (approved on a case-by-case basis)								
<input type="checkbox"/> Multiple CMPs in Another Category									

**San Joaquin Valley Air Pollution Control District
Supplemental Application Form**

**Conservation Management Practices: UNPAVED ROADS AND
UNPAVED VEHICLE/
EQUIPMENT AREAS FOR
ANIMAL FEEDING
OPERATIONS**

Farm Name: _____ CMP Plan Years: _____ to _____

Unpaved Road Mileage: _____ Unpaved Vehicle/Equipment Areas Acreage: _____

**Unpaved
Roads**

If daily vehicle trips are ≥ 75 on unpaved roads, select at least one of the following controls (Reg. VIII compliance).

- | | |
|---|---|
| <input type="checkbox"/> Dust Suppressant, _____ mi | <input type="checkbox"/> Washed Gravel, _____ mi |
| <input type="checkbox"/> Paving, _____ mi | <input type="checkbox"/> Water, _____ mi |
| <input type="checkbox"/> Road Mix, _____ mi | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ mi |
| <input type="checkbox"/> Road Oil, _____ mi | |

Please describe the specifics of the practice(s) chosen above: _____

If daily vehicle trips are < 75 on unpaved roads, select at least one of the following controls (CMP compliance).

- | | |
|--|---|
| <input type="checkbox"/> Chips/Mulches, _____ mi | <input type="checkbox"/> Speed Bumps (Dairies only), _____ mi |
| <input type="checkbox"/> Less Than 10 Vehicle Trips on Any Day, _____ mi | <input type="checkbox"/> Speed Limit Posted, _____ mi |
| <input type="checkbox"/> Organic Materials, _____ mi | What Speed? _____ mph (must be ≤ 25 mph) |
| <input type="checkbox"/> Paving, _____ mi | <input type="checkbox"/> Track Out Control, _____ mi |
| <input type="checkbox"/> Polymers, _____ mi | <input type="checkbox"/> Water, _____ mi |
| <input type="checkbox"/> Restricted Access, _____ mi | <input type="checkbox"/> Washed Gravel, _____ mi |
| <input type="checkbox"/> Road Oil, _____ mi | <input type="checkbox"/> Wind Barrier, _____ mi |
| <input type="checkbox"/> Sand, _____ mi | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ mi |

Please describe the specifics of the practice(s) chosen above: _____

**Unpaved
Vehicle/
Equipment
Areas**

If average daily vehicle trips (on an annual basis) are ≥ 50 on unpaved equipment yards, or if average daily trips (on an annual basis) are ≥ 25 by three or more axle vehicles, or if maximum daily trips on any day ≥ 150 during a 30 day period or less, select at least one of the following controls (Reg. VIII compliance).

- | | |
|---|---|
| <input type="checkbox"/> Dust Suppressant, _____ ac | <input type="checkbox"/> Vegetative Material, _____ ac |
| <input type="checkbox"/> Paving, _____ ac | <input type="checkbox"/> Washed Gravel, _____ ac |
| <input type="checkbox"/> Road Mix, _____ ac | <input type="checkbox"/> Water, _____ ac |
| <input type="checkbox"/> Road Oil, _____ ac | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac |

Please describe the specifics of the practice(s) chosen above: _____

If average daily vehicle trips (on an annual basis) are < 50 on unpaved equipment yards, or if average annual daily trips (on an annual basis) are < 25 by three or more axle vehicles, or if maximum daily vehicle trips on any day are < 150 during a 30 day period or less, select at least one of the following controls (CMP compliance).

- | | |
|--|---|
| <input type="checkbox"/> Chips/Mulches, _____ ac | <input type="checkbox"/> Speed Limit Posted, _____ ac |
| <input type="checkbox"/> Less Than 10 Vehicle Trips on Any Day, _____ ac | What Speed? _____ mph (must be ≤ 15 mph) |
| <input type="checkbox"/> Organic Material, _____ ac | <input type="checkbox"/> Track Out Control, _____ ac |
| <input type="checkbox"/> Paving, _____ ac | <input type="checkbox"/> Water, _____ ac |
| <input type="checkbox"/> Polymers, _____ ac | <input type="checkbox"/> Washed Gravel, _____ ac |
| <input type="checkbox"/> Restricted Access, _____ ac | <input type="checkbox"/> Wind Barrier, _____ ac |
| <input type="checkbox"/> Road Oil, _____ ac | <input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac |
| <input type="checkbox"/> Sand, _____ ac | |

Please describe the specifics of the practice(s) chosen above: _____
