

**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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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"/> Baling/Large Balers, _____ 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 Harvesting, _____ ac</td> </tr> <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"/> Green Chop, _____ 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"/> Baling/Large Balers, _____ ac	<input type="checkbox"/> Multiple CMPs in Another Category	<input type="checkbox"/> Combined Operations, _____ ac	<input type="checkbox"/> Night Harvesting, _____ ac	<input type="checkbox"/> Equipment Change/Tech. Improvements, _____ ac	<input type="checkbox"/> Shuttle System, _____ ac	<input type="checkbox"/> Green Chop, _____ ac	<input type="checkbox"/> Other (approved on a case-by-case basis), _____ ac
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