

## Report of Completed Best Management Practices

Instructions: Fill out form and send in with your Progress Report and Reimbursement Request

Project Name				County	
Grantee Name				Date BMPs Completed	
Edison ID		Grant FFY <i>(Do not change)</i>		Acres Impacted by Project	
Cooperator Name				TN House District Number	
Address of BMP Location				TN Senate District Number	

<b>Total Project Cost:</b>		<b>Payment to Cooperator:</b>		<b>Cooperator Contribution to Match:</b> ( = Total Cost – Payment to Cooperator)	
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BMP Name	NRCS Practice Code Number	Units of BMP (acres, feet, sq.ft, etc.)	Latitude Coordinates	Longitude Coordinates (always negative):

8-Digit HUC Number		12-Digit HUC Number		Name of Stream the BMP site drains to	
Is Stream on the 303(d) List?			If Yes, TDEC Waterbody Segment Number from 303(d) List		
Predominant Land Use of BMP Site (urban, cropland, pasture, forest, feedlots)			Nearest Crossroad or Landmark to the BMP site		

I certify that these BMPs have been completed and inspected. All work has generally met the standards of the USDA Natural Resources Conservation Service or the Guidelines of the TDA Agricultural Resources Conservation Fund. Any septic work has been inspected and approved by TDEC. All expenditures claimed on this request are pertinent, accurate and allowable in accordance with provisions of the grant contract.

<b>Technical Representative for Grantee</b>	<b>Date</b>
<b>TDA Watershed Coordinator</b>	<b>Date</b>

Nonpoint Source Program Use Only

<b>Date Payment Processed:</b>		<b>Initials:</b>	

