

Name of Practice: PRECISION NUTRIENT MANAGEMENT ON CROPLAND –
PHOSPHORUS APPLICATION
DCR Specification for No. NM-5P

A. Description and Purpose

This practice will encourage the use of precision nutrient management practice components that support a higher intensity of phosphorous management in the field than existing standard nutrient management practices. This practice is limited to row crops, small grains and highly managed hayland including alfalfa hay production systems.

This practice supports multiple enhanced nutrient management components such as zone or grid soil fertility samples, and all variable rate phosphorous application technologies based upon the soil test results of zone or grid (subfield) sampling. This practice may only be used on fields that apply phosphorous based upon test results identified in section B. 2. whether they have organic nutrient applications or not, with the exception of biosolids applications.

The variable rates of phosphorus listed below (in B.1.) apply to all row crops, small grains and highly managed hay crops. Other macro-micro nutrients or soil amendments may be applied concurrently.

B. Policies and Specifications

1. This is an annual practice. Results from any test conducted to develop a phosphorous application prescription must be used to determine the phosphorous application rates for the current or following crop as appropriate, and that prescription must be followed during the application of phosphorous.
2. Phosphorous applications must be based upon the soil test results of zone or grid (subfield) sampling recommendations; other macro-micro nutrients may be applied concurrently.

Plant tissue samples or petiole samples must be submitted at the correct growth stage and handled in accordance with laboratory guidelines to ensure sample viability and usability. The results of these tests may be used by the participant to support this practice.

3. Total phosphorus application rates shall not exceed the recommendations of the zone or grid sampling recommendations.
4. In order to be eligible for cost-share or tax credit, producers must be fully implementing a current Nutrient Management Plan (NMP) on all agricultural production acreage contained within the field that this practice will be implemented on. The NMP must comply with all requirements set forth in the Nutrient Management Training and Certification Regulations, (4VAC50-85 et seq.) and the

Virginia Nutrient Management Standards and Criteria (revised July 2014), must be prepared and certified by a Virginia certified nutrient management planner, and must be on file with the local District before any cost-share payment is made to the participant. Plans shall also contain any specific production management criteria designated in the BMP practice (4VACV50-85-130G).

5. The total number of acres that qualify for this practice will be based upon the total acres that were sampled in zones (zone shall be no larger than 20 acres and based upon soil type) grids (grid size shall be of 1 to 4 acres in size), or had mid-season testing such as variable rate or zone/grid (subfield) applications of phosphorus, based upon the zone or grid soil sampling recommendations.
6. The participant **must** provide written verification of the recommendation(s) and the resulting application(s) (examples include but are not limited to: results of laboratory test(s), a work order or detailed bill/invoice showing application rates, and an as-applied application map of field(s) to the District within forty-five days of the phosphorous application to verify that the recommendations were followed
7. The participant **must** sign up for this practice before April 1st of each year that the practice will be utilized.
8. Fields that have received applications of biosolids within the previous 24 months are not eligible.

C. Rates

1. As set forth by Virginia Code § 58.1-339.3 and §58.1-439.5, Virginia currently provides a tax credit for implementation of certain BMP practices. The current tax credit rate, which is subject to change in accordance with the Code of Virginia, is 25% of the total eligible cost not to exceed \$17,500.00.
2. For participants who certify in writing (*see language on last page of this specification*) that they will not utilize the tax credit set forth above with regard to the implementation of this practice and who are not receiving payment for precision application of phosphorus from another source on the same acreage, a state cost share payment rate of 75% of the application charge, up to a maximum amount of \$8.00 per acre, for the acres receiving variable rate zone or grid (subfield) application of phosphorous on row crops, small grains or highly managed hayland production systems.
3. No per sample cost-share is available for zone/grid (subfield) soil fertility testing. Many commercial applicators include zone/grid (subfield) soil fertility sampling in their variable rate application charge.

D. Technical Responsibility

Technical and administrative responsibility is assigned to qualified technical DCR and District staff in consultation, where appropriate and based on the controlling standard, with DCR, Virginia Certified Nutrient Management Planner(s), NRCS, DOF, and VCE. Individuals certifying technical need and technical practice installation shall have appropriate certifications as identified above and/or Engineering Job Approval Authority (EJAA) for the designed and installed component(s). All practices are subject to spot check procedures and any other quality control measures.

Revised March, 2018

Certification from an Agricultural Best Management Practice Participant that
a Tax Credit will not be Utilized

I, _____, hereby certify that I will not claim the tax credit which is available for participation in the Precision Nutrient Management on Cropland – Phosphorus Application, NM-5P practice, and therefore I am eligible for cost-share funding available under that practice for participants who do not wish to utilize the tax credit. I understand that any cost-share funds received must be returned should I claim the tax credit.

Signed: _____

Date: _____