Attachment F: Forms and Templates

Contents

North Coast Regional Water Quality Control Board

LILY BULB ORDER
NOTICE OF INTENT

To obtain regulatory coverage and comply with Waste Discharge Requirements General Order for discharges from Commercial Lily Bulb Operations within the Smith River Plain, Order R1-2026-XXXX.

You must complete the entire form. Please send the completed, signed form to the North Coast Regional Water Quality Control Board (North Coast Water Board). Instructions for filling out and sending this form start on page 4.

Enrollment Type

__ **I am enrolling in the Order individually.** By checking this box, I acknowledge that I must fulfill all Monitoring and Reporting requirements in Attachment A: Monitoring and Reporting Program.

__ **I am enrolling in the Order through an approved Coalition.** By checking this box, I acknowledge that I must fulfill all Monitoring and Reporting requirements for Enrollees in a Coalition in Attachment A: MRP.

1. Owner Information

1a. Landowner First Name:	1b. Landowner Last Name:
1c. Landowner Phone Number:	1d. Landowner Email:

1e. Landowner Mailing Address: _____

_____

1f. Is the landowner also the operator of the commercial lily bulb operation? Yes No
(If you checked Yes, skip Operator Information 2a through 2d)

2. Operator Information

2a. Operator First Name:	2b. Operator Last Name:
2c. Operator Phone Number:	2d. Operator Email:

2e. Operator Mailing Address: _____

Lily Bulb Operation Information

Name of Operation (DBA) if applicable: _____

3. Parcel Information

Please list parcels for which you would like to obtain regulatory coverage (*attach additional sheets as necessary*).

Assessor's Parcel Number (APN)	Watershed[3]	APN Acres	Farmed Acres

4. Map of Operation

Attach a map of the lily bulb operation that includes all enrolled parcels with parcel boundaries. A map may be an aerial photograph, topographic map, LiDAR-derived shaded relief map, Google Earth image, or equivalent that depicts features at 1-inch = 50 feet or larger scale. The base map(s) shall include a north arrow and label.

[3] Refer to Figure A.1 for a map of watersheds in the Smith River Plain.

Owner Notification and Certification

If the facility is currently leased or operated by someone other than the owner, this section must be signed by the operator.

> *I certify that the owner of the parcel(s) I am enrolling has been notified of these General Waste Requirements and that I have been designated by the owner as the "Enrollee".*

Operator's Printed Name: _____

Signature: _____

Title: _____Date: _____

Certification

> *"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. In addition, I certify that the provisions of the Order, including the implementation of the Monitoring and Reporting Program, will be complied with."*

Enrollee Printed Name*: _____

Enrollee Signature: _____Date: _____

Submittal of NOI Form

1. Fees

Irrigated Lands Fee information can be found at:
(https://www.waterboards.ca.gov/water_issues/programs/agriculture/)

2. Submittal

This NOI must be completed for existing lily bulb operations and submitted to the North Coast Water Board no later than #**DATE**, or, prior to enrollment by new, expanding, or reoperating previously inactive lily bub operations.

If enrolling in a Coalition, please submit this completed NOI form and appropriate enrollment fee (when applicable) to the Coalition.

If enrolling individually, please submit this completed NOI Form and appropriate enrollment fee (when applicable) to the following address:

North Coast Regional Water Quality Control Board
ATTN: Lily Bulb Order
5550 Skylane Blvd., Suite A
Santa Rosa, CA 95401

Email: NorthCoast@waterboards.ca.gov

North Coast Regional Water Quality Control Board

LILY BULB ORDER
REQUEST FOR TERMINATION

Request to Terminate Coverage of Commercial Lily Bulb Operations under General Order R1-2026-00XX.

Submission of this form constitutes an official notification to the North Coast Regional Water Quality Control Board (North Coast Water Board) that the lily bulb operation identified below, and all associated APNs, has elected to terminate coverage under the Lily Bulb Order. To officially terminate your enrollment, this form must be completed, physically signed by the individual Owner and/or Operator (herein 'Responsible Party') listed on the operation eNOI and received by the North Coast Water Board.

By submitting this Notice of Termination form, ALL parcels associated with the Responsible Party enrolled in the Lily Bulb Order will be terminated.

Owner/Operator Information

1. Complete this section if currently enrolled in a Coalition:

Responsible Party:	
Member ID (if enrolled through Coalition):	
Phone Number:	
Email:	
Business Mailing Address:	

2. Complete this section if currently enrolled Individually:

Request for Termination

Responsible Party:	
WDID:	
Phone Number:	
Email:	
Business Mailing Address:	

Reason for Termination

No longer farming commercially as of (month, day, year): ___/____/_____

Change in ownership as of (month, day, year): ___/____/_____

Have you notified the new owner of their requirement to send a Notice of Intent to the North Coast Water Board? _____ Yes _____ No

Change in Operator as of (month, day, year): ___/____/_____

Have you notified the new operator of their requirement to send a Notice of Intent to the North Coast Water Board? _____ Yes _____ No

Certification

I certify under penalty of law that the submitted information is to the best of my knowledge true, accurate, and complete.

Responsible Party Signature: _____

Printed Name: _____Date: _____

Submitting Form

Please send this form by mail to:

North Coast Regional Water Quality Control Board
Attn: Lily Bulb Order
5550 Skylane Boulevard. Suite A

Santa Rosa CA, 95403

Or you may send by email to:NorthCoast@waterboards.ca.gov

INSTRUCTIONS FOR
DRINKING WATER WELL INFORMATION FORM

*Note: Fields with an asterisk are the minimum data required for GeoTracker entry. The GeoTracker link and instructions can be found online at: (https://www.waterboards.ca.gov/ust/electronic_submittal/).

Enrollee Information

1a. Enrollee Name*: Name of person who is enrolled in the Lily Bulb Order.

1b. Enrollee Email*: Valid email address for Enrollee.

1c. Enrollee Phone*: Provide working phone number for Enrollee.

1d. Coalition: Identify whether enrolled in a Coalition

1e. Member Mailing Address*: Mailing address of the enrolled member

1f. Property Address: Address of the enrolled parcel if different from the mailing address.

1g. Is the Enrollee also the owner? If yes, skip 2a-2d below. If no, please provide landowner information.

1h. Is the Enrollee (including family) the only consumer of the drinking water?

In the event of nitrate + nitrite as nitrogen or pesticide exceedance - if yes, notify North Coast Water Board; if no, notification required to all users and the North Coast Water Board within 10 days.

Landowner Information

2a. Landowner Name: Provide name of landowner of enrolled parcel(s).

2b. Landowner Mailing Address: Provide a valid mailing address for the landowner of the enrolled parcel(s).

2c. Landowner phone: Provide valid phone number for landowner of enrolled parcel(s).
2d. Landowner email: Provide valid email for landowner of enrolled parcel(s).

Drinking Water Well Information

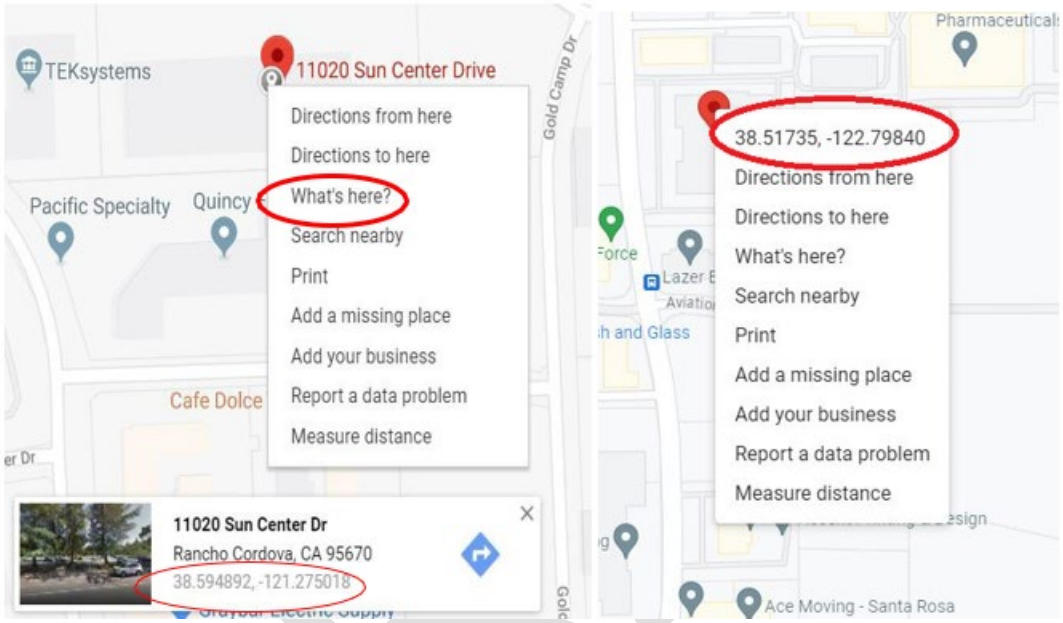
Well Name/Field Point Name*: Provide a specific name for each well. Name should clearly identify well for future sampling events (not to exceed 10 characters). If water is collected after a treatment system provide TRT- at beginning of Well Name (e.g., TRT-SEwell)

An “X” should be placed in the column to the left of the Well Name/Field Point Name field if the well has previously been sampled. This column will be used for previously

sampled wells (within the last 5 years) for data entry or during year 2 of sampling to help the laboratory identify previously sampled wells.

Longitude and Latitude can be found by using a cell phone or computer. Longitude and Latitude must be provided in decimal degrees. To determine your coordinates, while using google maps **on a computer**, type in the address and search. Once the address is displayed on the map, using your mouse, right click the pin drop select What's here? A display box should appear near the bottom of the screen (left). In some versions, the latitude and longitude will appear on the top of the box (right).

In this case of the property on the left, latitude = 38.594892, longitude = -121.275018.



On your cell phone - using google maps drop a pin (by placing finger on map and hold in place where the drinking water well is located). When a dropped pin box comes up at the bottom of the screen, scroll down to pin symbol for latitude and longitude information.

County*: The county the enrolled parcel is located.

APN*: An Assessor's Parcel Number (APN) is a unique number that is assigned to each tract of land in a county by the Tax Assessor. Please provide the APN of the enrolled parcel with the drinking water well.

DRINKING WATER WELL INFORMATION FORM

Complete entire form if you have a drinking water well on an enrolled Assessor's Parcel Number (APN) and submit it with your well samples to an Environmental Laboratory Accreditation Program laboratory for required data entry into the State's GeoTracker. The Enrollee is responsible for uploading the data into GeoTracker if the laboratory will not submit directly to GeoTracker.

1. Enrollee Information

(Personal information will not be available to the public, only APN and well sample data will be available to view through the GeoTracker database) – *Note: fields with asterisk are required to be filled out.

1a. Enrollee Name*

1b. Enrollee Email*:

1c. Enrollee Phone*:

1d. Coalition Enrollment?*:

1e. Member's Mailing Address*:

1f. Property Address (if different from mailing address):

1g. Is the Enrollee also the landowner:

- □ YES (if Yes, skip 2a-2d below)
- □ NO

1h. Is the Enrollee (including family) the only consumer of the drinking water

- □ YES
- □ NO (if no, notification to all consumers and the North Coast Water Board is required if nitrate or pesticide exceedance is identified)

2. Landowner Information

(Fill out if Enrollee is not the landowner)

2a. Landowner's Name:

2b. Landowner's Mailing Address:

2c. Landowner's Phone:

2d. Landowner's Email:

3. Drinking Water Well Information*:

Drinking Water Well
Information Form

List all drinking water well on Irrigated Lands Regulatory Program enrolled parcel(s) below.

(Note: If well was previously sampled and data is entered into GeoTracker, place an "X" in column to the left of the Well Name/Field Point Name.)

X	Well Name / Field Point Name (required)	Latitude	Longitude	County (required)	Assessor Parcel Number (APN) (required)

4. Certification

"I certify under penalty of law that to the best of my knowledge and belief, this document and any attachments submitted is, true, accurate, and complete and was prepared by me or under my direction or supervision. I am aware that there are significant penalties for knowingly submitting false information."

Signature (required) Date

DRINKING WATER NOTIFICATION TEMPLATE

At a minimum, the Enrollee or non-Enrollee owner shall notify drinking water well users of the exceedance by providing them a copy of a Drinking Water Notification Template approved by the Executive Officer. The template shall be signed by the Enrollee or non-Enrollee owner certifying notice has been provided to the users. A copy of the signed template shall be sent to the North Coast Water Board and retained by the Enrollee or non-Enrollee owner.

Please complete template on next page for any Drinking Water Well that exceeds the Nitrate MCL of 10 mg/L. Provide a copy of this Drinking Water Notification Template to all users of the drinking water well within 10 days of learning of the exceedance and submit a copy to the North Coast Water Board.

For exceedances of a Water Quality Benchmark for pesticides, please complete the template on the page after and submit a copy to the North Coast Water Board.

North Coast Regional Water Quality Control Board
ATTN: Lily Bulb Order Drinking Water Well Notification
5550 Skylane Blvd STE A
Santa Rosa CA 95403-1072

NITRATE EXCEEDANCE NOTIFICATION
Do Not Drink Your Water

Use Only Bottled Water Until Further Notice

Failure to follow this advisory could result in serious illness.

Test Result: ___ mg/L

Nitrate in your well was found to exceed the drinking water standard of 10 mg/L established for safe drinking water.

- **Pregnant women are at increased risk** for potential health effects and should not drink water with high levels of nitrate. Drinking water with high nitrate levels may also cause serious complications in pregnancy.
- **Do not give the water to infants.** Infant formula and other edible products should be prepared with bottled water or other water with low levels of nitrate. Infants are at increased risk to become seriously ill or even death from consumption of high levels of nitrate.
- **Do not boil your water.** Boiling your water may increase nitrate levels.

This notification was provided by:

Assessor's Parcel Number (APN):

County:

Name *(of Landowner/Operator)*:

Date:Signature:

Coalition (if applicable):

Member ID:

- □ No one drinks or cooks with this well water.
- □ Notification has been provided to the user(s) or appropriate landowner(s).
- □ Replacement water has been provided to the user(s).

Please submit a signed copy of this notification to the **North Coast Water Board**:

NITRATE FACT SHEET

What is nitrate?

Nitrate can occur naturally in surface and groundwater at levels that do not cause health problems. However, levels of nitrate in excess of the standard drinking water are dangerous, especially for infants and pregnant women. Nitrate contamination in groundwater is generally associated with septic systems, confined animal feeding operations, or fertilizer use.

What health concerns are associated with nitrate in drinking water?

High nitrate levels can interfere with the ability of red blood cells to carry oxygen to the tissues of the body, producing a condition called methemoglobinemia. This is of greatest concern in infants; clinical effects on infants ingesting high levels of nitrate are often referred to as the "blue baby syndrome." Symptoms include shortness of breath and blueness in the skin. Symptoms in infants can develop rapidly, with health deteriorating over a period of days. If symptoms occur, seek medical attention immediately. High nitrate levels may also reduce the oxygen-carrying ability of the blood in pregnant women and increase the risks for complication in their pregnancies.

What can consumers do to reduce exposure to nitrate in drinking water?

Use bottled water until an appropriate treatment system is in place.

Drinking water may be treated to remove nitrate. Home filters such as Brita filters do not remove nitrate from drinking water, but other systems can be used to remove nitrate. Please consult the State Water Board's residential water treatment approved list (https://www.waterboards.ca.gov/drinking_water/certlic/device/Documents/wtd2017/76Registered%20Models%20for%20Nitrate%20listing%20081117_WITH%20LINKS%20TO%20PDS.pdf).

Boiling water is not a solution, as it can concentrate the nitrate level.

Do not make infant formula with drinking water that contains nitrate levels above 10 mg/L.

Can nitrate-contaminated water be used to bathe babies and children?

Yes. Babies and children can be bathed in water with high levels of nitrate. Showers may also be taken. Nitrate is only a concern for ingestion (eating and drinking). Nitrate is not absorbed through your skin. People who install filter systems for nitrate often install them just for their kitchen sink faucet, because they use that faucet for their cooking and drinking water.

Can nitrate-contaminated water be used to wash fruits and vegetables before they are eaten?

Generally, fruits and vegetables can be washed with water with high nitrate levels. The amount of water used for this purpose is small, and if the fruits and vegetables are wiped or blotted dry after washing, there should be no health risk. The water should not be used for cooking.

For more information

Or, for more information about nitrate in wells used for drinking water, visit the Groundwater Information Sheet regarding Nitrate online (www.waterboards.ca.gov/gama/docs/coc_nitrate.pdf).

PESTICIDE EXCEEDANCE NOTIFICATION

Test Result: ____ units: _____

The following pesticide was found in a concentration in your well that exceeds a human health level.

Pesticide: _____

Refer to the table below for human health levels and a brief description below.

Parameter	Benchmark (ug/L)	Benchmark Exceedance	Source or Reference[xcvii]
Diuron	Acute: 1028 Chronic: 2.0	2 consecutive exceedances of the chronic Benchmark or a single exceedance of the acute.	Chronic: USGS Health Based Screening Level (HBSL) for one-in-a-million cancer risk estimate Acute: CDPR Human Health Reference Level (HHRL)
Imidacloprid	Acute: 283 Chronic: 500	2 consecutive exceedances of the chronic Benchmark or a single exceedance of the acute.	Acute: DPR Human Health HHRL Chronic: USEPA Chronic Human Health Benchmarks for Pesticides (HHBPs)
Mefenoxam	Acute: 3000 Chronic: N/A	A single exceedance of the Benchmark	USEPA One-Day or Acute HHBP
Napropramide	Chronic: 710	2 consecutive exceedances of the chronic Benchmark	USEPA Chronic or Lifetime HHBP
Nitrate	10 (mg/L)	A single exceedance of the Benchmark	USEPA Maximum Contaminant Level (MCL)

HHRL: The Human Health Reference Levels (HHRLs) are identified by DPR's Human Health Assessment Branch. For some pesticides and degradates, HHA calculated acute and chronic HHRLs. Residues measured in groundwater exceeding these reference levels indicate a health concern.

MCL: The Maximum Contaminant Level (MCL) is the highest level of a contaminant that is allowed in drinking water. MCLs are federally enforceable standards.

Chronic or Lifetime HHBP: USEPA Chronic or Lifetime Human Health Benchmarks for Pesticides (HHBPs) are non-enforceable advisory values in drinking water protective of chronic non-carcinogenic effects over a lifetime of exposure, assuming that 20% of the

exposure to a given pesticide is from water and additional exposure is derived from another source such as food, air, or dermal contact.

Acute or One-Day HHBP:: USEPA Acute or One-day Human Health Benchmarks for Pesticides (HHBPs) are non-enforceable advisory values in drinking water protective of acute or up to one-day non-carcinogenic effects, assuming that the entire exposure to a given pesticide is from drinking water.

This notification was provided by:

Assessor's Parcel Number (APN):

County:

Name *(of Landowner/Operator)*:

Date:Signature:

Coalition (if applicable):

Member ID:

- □ Notification has been provided to the user(s) or appropriate landowner(s).
- □ Replacement water has been provided to the user(s).

Please submit a signed copy of this notification to the **North Coast Water Board**:

[xcvii] Water Quality Benchmarks were derived from water quality criteria are generally consistent with the State Water Board's guidelines for listing impaired waters under Section 303(d) of the Clean Water Act. As a general approach, North Coast Water Board staff reviewed all available pesticide water quality criteria and selected the most protective (i.e., lowest) values for relevant beneficial uses of surface waters and groundwater in the Smith River Plain. In surface waters, Water Quality Benchmarks (except the acute benchmark for ethoprop and the BLM-derived benchmarks for copper) are sourced from USEPA Aquatic Life Benchmarks. The BLM Instantaneous Water Quality Criteria or BLM-IWQC is a criterion developed using a set of ten parameters to account for complex chemical reactions associated with copper in the environment: pH, Dissolved Organic Carbon (DOC), Calcium (Ca), Magnesium (Mg), Sodium (Na), Sulfate (SO4), Potassium (K), Chlorine (Cl), Alkalinity, and Temperature. The IWQC is used as a water quality threshold for dissolved copper for that specific site and sampling event only. The model's output also includes a toxicity unit (numerical value) to represent the relative risk of copper toxicity in the waterbody at the time of sample collection. For groundwater Water Quality Benchmarks, the North Coast Water Board relies on the applicable Drinking Water Maximum Contaminant Level (MCL), if available. If an MCL is not available, the North Coast Water Board has selected the best

available Drinking Water Standard available. Human Health Reference Levels (HHRL) are identified by California Department of Pesticide Regulation's Human Health Assessment Branch. Pesticide concentrations measured in water exceeding these reference levels indicate a health concern. They are not legally enforceable standards but can be used to identify pesticide levels in drinking water that could pose a human health risk. USEPA Chronic or Lifetime Human Health Benchmarks for Pesticides (HHBPs) are non-enforceable advisory values in drinking water protective of chronic non-carcinogenic effects over a lifetime of exposure, assuming that 20% of the exposure to a given pesticide is from water and additional exposure is derived from another source such as food, air, or dermal contact. USEPA Acute or One-day Human Health Benchmarks for Pesticides (HHBPs) are non-enforceable advisory values in drinking water protective of acute or up to one-day non-carcinogenic effects, assuming that the entire exposure to a given pesticide is from drinking water. Health-Based Screening Levels (HBSLs) are federal, non-enforceable water-quality benchmarks developed by the United States Geological Survey. The HBSL concentration level for diuron, for example, represents a one-in-one million cancer risk range.

Attachment B:
CEQA Mitigation Measures

Irrigation and Nitrogen Management Plan (INMP) Worksheet

Coalition ID (provided by Coalition):_____
If you are not enrolled in a Coalition, leave blank.

Nitrogen Management Unit ID (if applicable): _____Total Farm Area Acres:_____

Enrollee Name: _____GeoTracker ID# (if applicable):_____

Was this parcel or Nitrogen Management Unit identified as a statistical outlier by the Coalition or North Coast Water Board last year?

□ Yes □ No

Crop Year (Harvested):

Instructions:

Fill out the INMP Worksheet. The INMP must be certified under the following conditions: (1) the Lily Bulb Operation is located within a high vulnerability groundwater area, or (2) the Enrollee was notified that they are a statistical outlier. Complete instructions are located at the back of the worksheet.

1. Parcel Management

APN	Watershed	Parcel Acres	Farm Area Acres

Total Farm Area Acres: _____

Comments:

2. Irrigation Pre-Season Planning

Crop Evapotranspiration (ET, inches):

Anticipated Crop Irrigation (inches):

Irrigation Water N Concentration (ppm or mg/L, as NO3 -N):

3. Irrigation Method

(Check one for Primary; if applicable, check one for Secondary)

Primary Secondary[1]

□ Drip

□ Micro Sprinkler

□ Furrow

□ Sprinkler

□ Border Strip

□ Flood

[1] A secondary irrigation system could be used for crop germination, frost protection, crop cooling, etc.

4. Irrigation Efficiency Practices (Check all that apply)

- □ Laser Leveling
- □ Use of ET in scheduling irrigations
- □ Water application schedule to need
- □ Use of moisture probe (e.g., tensiometer)
- □ Soil Moisture Neutron Probe
- □ Pressure Bomb
- □ Other: _____

5. Harvest/Yield Information

Production Unit (e.g., tons): _____Converted to lbs.: _____

Harvested Yield (lbs/acre): Expected: _____ Actual: _____

6. Nitrogen Efficiency Practices (Check all that apply):

- □ Split Fertilizer Applications

- □ Irrigation Water N Testing
- □ Soil Testing
- □ Tissue/Petiole Testing
- □ Fertigation
- □ Foliar N Application
- □ Cover Crops
- □ Variable Rate Applications using GPS
- □ Other:

7. Nitrogen Applied and Nitrogen Sources:

Sources	**Recommended/ Planned N (A)**	**Actual N (B)**
Soil – Available N in Root Zone (Annualized, lbs/ac)		
N in Irrigation Water* (Annualized, lbs/ac)		
Organic Amendments* (Manure/Compost/Other, lbs/ac estimate)		
Dry/Liquid Fertilizer N* (lbs/ac)		
Foliar Fertilizer N* (lbs/ac)		
Total Nitrogen Applied (lbs/ac)		

8. Nitrogen Removed*:

Nitrogen Removed	Harvest Yield x Crop Removal Coefficient** (C_N)	Nitrogen Removed (lbs/acre)
Harvest Yield (lbs/acre)		

*****Nitrogen Removed includes nitrogen removal via harvest and nitrogen sequestered in permanent wood of perennial crops. This is incorporated into the Crop Removal Coefficient which calculates the nitrogen removed in one season per pound per acre of winegrapes harvested.

******The North Coast Water Board will provide you a C_N

Total Nitrogen Applied (lbs./acre): _____

Total Nitrogen Removed (lbs/acre): _____

Irrigation Nutrient Management Plan Certification

Check a box below:

- □ This INMP does not need to be certified (skip Certification).
- □ This INMP does need to be certified.

Certification:

The person signing this Irrigation and Nitrogen Management Plan (INMP) certifies, under penalty of law, that the INMP was prepared under his/her direction and supervision, that the information and data reported is to the best of his/her knowledge and belief, true, accurate, and complete, and that he/she is aware that there are penalties for knowingly submitting false information. Where the person signing the INMP is not the Enrollee, he/she may rely on the information and data provided by the Member and is not required to independently verify the information and data.

The person signing the INMP below further certifies that he/she used sound irrigation and nitrogen management planning practices to develop irrigation and nitrogen application recommendations and that the recommendations are informed by applicable training for meeting the crop's agronomic needs while minimizing nitrogen loss to surface water and groundwater. Where the person signing the INMP is not the Enrollee, he/she is not responsible for any damages, loss, or liability arising from subsequent implementation of the INMP by the Member in a manner that is inconsistent with the INMP's recommendations for nitrogen application. **This certification does not create any liability for claims for environmental violations.**

The person signing this document is:

- □ Certified INMP Specialist (e.g., Certified Crop Adviser who has completed CDFA training)

- □ Self-Certified by Enrollee who has completed the CDFA training program
- □ Self-Certified by the Enrollee who follows NRCS or UC site-specific recommendations (documentation required)
- □ I do not apply nitrogen

I, _____, certify this INMP in accordance with the statement above.

_____ Signature _____ Date

If the certifier is not the Enrollee, the Enrollee additionally agrees as follows:

I,_____, Enrollee, have provided information and data to the certifier above that is, to the best of my knowledge and belief, true, accurate, and complete, that I understand that the certifier may rely on the information and data provided by me and is not required to independently verify the information and data, and that I further understand that the certifier is not responsible for any damages, loss, or liability arising from subsequent implementation of the INMP by me in a manner that is inconsistent with the INMP's recommendations for nitrogen application. I further understand that the certification does not create any liability for claims for environmental violations.

_____ Signature _____ Date

Irrigation and Nitrogen Management Plan (INMP) Worksheet Instructions

Complete an Irrigation and Nitrogen Management Plan (INMP) Worksheet for every parcel or Nitrogen Management Unit enrolled in the Order. All INMP Worksheets must be kept on farm and made available upon request during inspections by the North Coast Regional Water Quality Control Board (North Coast Water Board).

Each section heading below (in bold) corresponds to the section heading on the INMP Worksheet. The numbered references correspond to each numbered box on the INMP Worksheet.

Irrigation and Nitrogen Management Plan

Enter the Enrollee ID generated by your Coalition and name of the Owner or Operator enrolled in the Order.

Indicate if the parcel(s)/Nitrogen Management Unit you are writing the plan for was identified as a **Statistical Outlier** by the North Coast Water Board for the previous crop year. The North Coast Water Board conducts a statistical analysis on the data provided from individually enrolled Enrollees for the nitrogen applied and nitrogen removed (based on yield) to determine statistical outliers and will notify those Enrollees. If the parcel/Nitrogen Management Unit was identified as a statistical outlier by the North Coast Water Board in the previous crop year, mark “Yes”.

Enter the **Crop Year (Harvested)**. Information on INMP Worksheets should be based on the calendar year in which harvest was completed. If the crop was harvested in November of 2028, enter ‘2028” in this space.

1. Parcel Management

Use this table to account for all parcels for which the plan applies. Multiple parcels, portions of parcels, or Nitrogen Management Units (not to exceed 640 acres) may be included in a single plan if they all have the same: crop, fertilizer inputs, irrigation management, and nitrogen management practices.

Enter the **Assessor’s Parcel Number (APN)** and **County** for each parcel associated with your plan.

Enter the Farm Area acres for each parcel or portion of parcel to which this plan applies. Farm Area acres incorporate all of the Farm Area (The planted area and appurtenant structures, maintenance areas, mixing and loading sites, and appurtenant storage yards on a Lily Bulb Operation). For example, if the parcel is 10 acres, but the Farm Area only includes 5 acres, record 5 acres in that box. Sum the Farm Area acres from each parcel for the Total Acres covered under the plan Use the Comment/Notes box to provide any further information that may be pertinent to the worksheet (e.g., nitrogen use efficiency, nitrogen removal rates, reasons for substantial differences between plan and actual numbers, etc.).

2. Irrigation Pre-Season Planning

Crop Evapotranspiration. Enter the potential crop evapotranspiration (ETc) in inches anticipated for the season. Evapotranspiration rates are provided by geographical location and multiplied by a crop- specific coefficient to estimate the amount transpired by your crops.

Anticipated Crop Irrigation. Enter the amount of irrigation water in inches expected to be applied over the course of the season.

Irrigation Water N Concentration. Enter the concentration of nitrogen in the irrigation water used on your crop as parts per million (ppm) or milligrams per liter (mg/L). The concentration of nitrogen in your irrigation water can be obtained from sources such as local district testing, laboratory analysis, or other sources. These results can be reported as either Nitrate as N, nitrate-nitrogen, or NO3-N.

Irrigation Method. Check the box to indicate the irrigation method used the most for crop irrigation (primary irrigation) during the growing season for the parcel/Nitrogen Management Unit under this plan. If applicable, indicate any secondary irrigation systems. Secondary irrigation systems include those used for crop germination, crop cooling, or salinity management**.**

Irrigation Efficiency Practices* (5). Check all boxes that apply to indicate irrigation efficiency practices used on your parcels during the season. Indicate if, to your knowledge, the parcels have been laser leveled.

3. Harvest/Yield Information

Production Unit. This is the standard unit in which you measure your harvest for the parcels identified under **Parcel Management**. **You will need to convert this number to lbs per acre later**.

Harvested Yield. This includes all crop yield harvested for the season. For pre-season planning, fill in the Expected Yield for the season. The Expected Yield should be reported on a per-acre basis for the parcel or Nitrogen Management Unit covered by the plan. Expected Yield expectations will guide nitrogen management decisions and will inform the **TOTAL NITROGEN Recommended** to be used in the Nitrogen Management section below. Enter actual harvested Yield in the next box following harvest in lbs. per acre.

4. Nitrogen Efficiency Practices

Nitrogen Efficiency Practices. Check all boxes that apply to indicate any nitrogen efficiency practices used on your parcels during the season**.**

Nitrogen Applied and Nitrogen Sources

Recommended/Planned N (Column A): Complete the boxes in the Nitrogen Sources section in **Column A** based on the anticipated Nitrogen Sources required to obtain the Expected Yield. Use crop recommendations from CDFA, UCCE, NRCS, commodity organizations or site-specific knowledge to appropriately estimate the amount of nitrogen (N) necessary. Use Recommended/Planned N totals for each source of N and schedule applications for the crop year. Use additional tools/spreadsheets to plan timing

for each application. Proper scheduling of N applications and irrigations is essential for efficient nitrogen management.

Recommended / Planned TOTAL NITROGEN: All Nitrogen Sources in this section should be the total for **Recommended / Planned TOTAL NITROGEN (14A).**

5. Recommended / Planned TOTAL NITROGEN: Sum all values from Column A.

Complete the following sections based on the nitrogen source:

Soil – Available N in Root Zone. Represents nitrogen in the soil root zone that is available to the crop during the growing season. Enter the amount of residual soil nitrogen based on soil samples or other available data.

N in Irrigation Water. Enter the amount of nitrogen applied via irrigation water over the course of the crop year in pounds per acre. For planning, this value is calculated based on the **Anticipated Crop Irrigation** and the **Irrigation Water N Concentration**. For the Actual N column, this value is calculated based on the *actual* crop irrigation and irrigation water N concentration. To calculate N in irrigation water, use the following formula:

N concentration (ppm or mg/L) x inches of irrigation applied x 0.226

Nitrate as nitrogen is also referred to as Nitrate as N, nitrate-nitrogen, or NO_3-N.

Organic Amendments. Organic Amendments include any nutrient applications from sources that do not have a guaranteed nutrient content, such as compost and manure applications. Applied organic amendments should be reported as the amount of nitrogen available to the plant during the crop year, in pounds per acre.

Dry/Liquid Fertilizer N. The Dry/Liquid Fertilizers include any nitrogen- containing product with a guaranteed nutrient content. This number should be reported as the amount of nitrogen applied as pounds per acre; this may be different than the amount of fertilizer applied which may include other nutrients.

Foliar Fertilizer N. Foliar nitrogen applications include any nitrogen-containing product applied to the crop canopy or above ground plant parts, and should be reported in pounds per acre.

Actual N (Column B): Fill in the **Actual N (Column B)** based on actual applied nitrogen amounts. This should be completed after the crop is harvested for each of the nitrogen sources outlined above. Use the Recommended/Planned N schedule to guide nitrogen applications throughout the growing season. Actual application amounts and timing can be adjusted based upon changing conditions (weather, pest damage, expected yield, tissue samples, etc.). The information in this column should reflect the actual application during the Crop Year. Refer to the Nitrogen Source section above for additional instructions and definitions.

Actual TOTAL NITROGEN: Actual applied Nitrogen Sources. Actual TOTAL NITROGEN: Sum of all values from Column B.

Nitrogen Removed

Harvested Yield. This includes all crop yield harvested for the season in lbs/acre.

Harvest Yield x Crop Removal Coefficient (C_N).** Use this box to multiply the harvested yield by the crop removal coefficient. Nitrogen Removed includes nitrogen removal via harvest and nitrogen sequestered in permanent wood of perennial crops. This is incorporated into the Crop Removal Coefficient which calculates the nitrogen removed in one season per pound per acre of winegrapes harvested. The North Coast Water Board will provide you a C_N.

Nitrogen Applied and Removed Totals

Enter your total Nitrogen Applied (from 6) and Nitrogen Removed (from 7) in lbs./acre.

6. INMP Certification

INMPs must be certified for the following conditions: (1) for parcels in a **High Vulnerability Area** (HVA) to groundwater must be certified. Please contact the North Coast Water Board for more information regarding the vulnerability to groundwater of your parcels, and (2) If the Enrollee was identified as a statistical outlier by the North Coast Water Board in the previous year. The person certifying the plan must complete the **INMP Certification** section including signature, date, and method of certification. Any plan certifier should also initial the INMP Worksheet page in the box in the bottom right corner.

Any INMP requiring certification must be certified by an Irrigation and Nitrogen Management Specialist, such as:

Crop Advisers certified by the American Society of Agronomy (CCA). Any Certified Crop Adviser who certifies an INMP must also have completed the nitrogen management training program offered by the University of California Agriculture and Natural Resources (UCANR) and the California Department of Food and Agriculture (CDFA).

Certified Professional Soil Scientists (CPSS)

Certified Professional Agronomists (CPAg)

Technical Service Providers (TSP) certified in nutrient management in California by the Natural Resources Conservation Service (NRCS)

Certified Agricultural Irrigation Management Specialists (CAIS) certified by The Irrigation Association.

Additionally, plans may be self-certified by the Enrollee if:

The certifying Enrollee has attended the California Department of Food and Agriculture (CDFA) or other approved training program for INMP certification. The Member must retain written documentation of their attendance in the training program.

The certifying Enrollee adheres to a site-specific recommendation from the Natural Resources Conservation Service (NRCS Nutrient Management Plan) or the University of California Cooperative Extension (UCCE). The Member must retain written documentation of the recommendation.

If you do not apply nitrogen fertilizer:

You must state that you do not apply nitrogen fertilizer to the vineyard on your INMP Worksheet