

CONSERVATION PRACTICE ADOPTION MOTIVATIONS SURVEY - VERSION 2

CONFINED LIVESTOCK PRACTICES

Please enter the data in this questionnaire
into CAPI as a practice interview

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Version 2



United States
Department of
Agriculture



NATIONAL
AGRICULTURAL
STATISTICS
SERVICE

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Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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1. Did you, regardless of ownership, raise any swine, poultry, milk cows, veal calves, or feeder cattle (including backgrounders) on your operation during 2021?

1101 ☒ Yes - Go to Section 1 - Land Use and Livestock, page 2 ☐ No - Continue to Item 1a, then Go to Section 13 - Conclusion, page 32

- a. What is the current status of your livestock operation?

1102

- ☐ Sold
☐ Rented out
☐ Idle for more than a year

After answering Item 1a above, Go to Section 13 - Conclusion, page 32.

Section 1 - Land Use and Livestock

Please report farm/ranch land owned, rented, or used in your operation.

INCLUDE all cropland, Conservation Reserve Program (CRP), pastureland, woodland, wasteland, farmstead, acres used for crop/livestock production facilities, and all other building sites associated with this operation, etc.

1. For 2021, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?

INCLUDE any short term leases or land used on an animal unit month (AUM) basis

c. Rent to others?

2. Calculate Item 1a + 1b - 1c. Then the total acres operated in 2021 was:

3. Of the total acres operated, how many acres are considered:

a. Cropland, including land in hay, summer fallow, cropland idle, and cropland in government programs?

i. How many acres were under an easement against development for non-agricultural uses in 2021?

b. Grazing land, including permanent pasture and rangeland, woodland pastured, and other pasture and grazing land (including rotational pasture) that could have been used for crops without additional improvements?

i. How many acres were under an easement against conversion to crop production or non-agricultural use in 2021?

c. Woodland, not pastured?

d. Other land?

4. Of the total acres operated, how many acres were under a permanent or long-term easement or enrolled in a land retirement program in 2021?

INCLUDE any other land enrolled in the Conservation Reserve Program (CRP), Wetland Reserve Program (WRP), Farmable Wetlands Program (FWP), Conservation Reserve Enhancement Program (CREP), Agricultural Conservation Easements Program (ACEP) and the Forest Stewardship Program or any other state, federal or local program

EXCLUDE land included in 3ai or 3bi

| Acres | |
|-------|-----|
| 901 | 320 |
| 132 | 0 |
| 905 | 0 |
| 900 | 320 |

| Acres | |
|-------|-----|
| 101 | 260 |
| 2600 | 0 |

| | |
|------|----|
| 102 | 0 |
| 2601 | |
| 103 | 30 |
| 104 | 30 |
| 107 | 0 |

Section 1 - Land Use and Livestock (continued)

5. Report the total number of livestock and poultry, by type, on your operation on December 31, 2021.

a. Beef cows

b. Milk cows, including any dry cows

c. Other cattle and calves

INCLUDE fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.

d. All hogs and pigs

e. All Poultry

INCLUDE layers and pullets, including table and hatching, turkeys, broilers, other chickens, ducks, etc.

2602

f. All other livestock, please specify _____

INCLUDE goats, sheep, etc.

| Number |
|--------|
| 108 |
| 109 |
| 110 |

| |
|------|
| 111 |
| 8000 |
| 112 |

| |
|------|
| 2603 |
|------|

6. During 2021, did this operation produce organic products according to USDA's National Organic Program (NOP) standards or have acres transitioning into USDA NOP Production?

EXCLUDE processing and handling

106

1 ☐ Yes

3 ☒ No

7. During 2021, did this operation participate in a sustainable sourcing contract that requires specific farming practices?

2604

1 ☐ Yes

3 ☒ No

Section 2 - General Conservation

1. Report your agreement or disagreement with the following statements about conservation practices and technology.

| | Agree | Neither Agree nor Disagree | Disagree |
|---|---------------------------------------|-------------------------------|----------------------------|
| I seek out information about conservation practices and their implementation. 2605 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I generally adopt new technologies or conservation practices before other farmers in my local area. 2606 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I experiment with new conservation practices on my farm. 2607 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I do not implement new conservation practices unless I know that they will increase my profits or reduce my workload. 2608 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I am willing to adopt conservation practices that improve environmental quality, even if they do not increase my profit or reduce my workload. 2609 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I am willing to adopt conservation practices that protect my investment in the land, even if they do not increase my profit or reduce my workload. 2610 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I am willing to adopt conservation practices that preserve my land for the next generation, even if they do not increase my profit or reduce my workload. 2611 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

2. Thinking in general about the practices in use on your farming operation, what are your objectives when deciding to use manure management or conservation? Check all that apply.

- 2612 ☒ Improving water quality (e.g., avoid polluting streams, rivers, and lakes)
- 2613 ☒ Enhancing soil health or soil quality
- 2614 ☒ Reducing erosion
- 2615 ☒ Ensuring compliance with regulations
- 2616 ☒ Reducing the cost of manure handling and management
- 2617 ☒ Facilitating (a) better use of nutrients on my farm or (b) export to other farms
- 2618 ☐ Improving animal health
- 2619 ☐ Reducing the need for repetitive maintenance
- 2620 ☐ Managing dust, odors, or other air quality issues
- 2621 ☐ Other, please specify: 2622 _____

Section 3 - Technical Assistance

1. Have you ever received technical assistance (expertise or information) for manure management or conservation practices associated with your livestock operation from any federal, state, local university, or other source?

In this survey, conservation refers to actions taken to improve and preserve natural resources such as soil, water, and wildlife habitat on your operation.

Report on technical assistance you received regardless of whether you received financial assistance to help defray the cost of installing or implementing conservation practices.

INCLUDE

- Expertise or information provided for planning or implementing a conservation practice or designing, laying out or installing conservation structures
- Expertise or information from private technical service providers (TSPs) that is reimbursed by federal, state, or local governments
- Expertise or information from your CCA, seed dealer, agronomist, co-op, nutritionist, integrator, technical service provider, or nutrient management specialist that may be free or a paid service

1201

1 ☒ Yes - Continue

3 ☐ No - Go to Item 1b

- a. Have you received technical assistance for conservation from any of these sources? Check all that apply.

1202

☒ Federal agencies (typically free)

1203

☒ State or local agencies (typically free)

1204

☐ Private sources (free or paid)

- b. Report your agreement or disagreement with the following statements about technical assistance on your cropland from a government, university, or other source.

| | NA | Agree | Neither Agree nor Disagree | Disagree |
|--|----------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Technical assistance is available to me. 1205 | | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| I am comfortable using free technical assistance from federal government sources. 1215 | | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| I am comfortable using free technical assistance from non-federal government sources. 1213 | | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| I have never sought any form of technical assistance. 1208 | | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input checked="" type="checkbox"/> |
| I tried to get free technical assistance from the federal government but could not. 2623 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input checked="" type="checkbox"/> |
| I tried to get free technical assistance from a non-federal government source but could not. 2624 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| I have received technical assistance at some time. 1207 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| I received technical assistance and it was beneficial. 1210 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| I received technical assistance but it took too long. 2625 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> | 4 <input type="checkbox"/> |
| I received technical assistance but it did not meet my needs. 2626 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> | 4 <input type="checkbox"/> |

Section 4 - Waste (Manure) Storage Facilities

1. Are the following waste (manure) storage facilities currently in use on your livestock operation?
EXCLUDE facilities designed to treat manure (e.g., water treatment lagoons and vegetated treatment areas)

Complete the table below and follow the instructions at the bottom of the table below.

| | Are any of these waste storage facilities in use on your operation? | Of facilities in use, how many were taken over from another operation? | Of facilities in use, how many were installed by you? | Number of facilities in use (Col 5 = Col 3 + Col 4) |
|---|---|--|---|--|
| 1 | 2 | 3 | 4 | 5 |
| Buildings for solid waste | 1301 ¹ <input type="checkbox"/> Yes ³ <input checked="" type="checkbox"/> No | 1303 | 1304 | 1302 |
| Impoundments, compacted soil lining | 1305 ¹ <input checked="" type="checkbox"/> Yes ³ <input type="checkbox"/> No | 1307 | 1308 | 1306 |
| Impoundments, concrete lining | 1309 ¹ <input checked="" type="checkbox"/> Yes ³ <input type="checkbox"/> No | 1311 | 1312 | 1310 |
| Impoundments, geomembrane or geosynthetic clay lining | 1313 ¹ <input type="checkbox"/> Yes ³ <input checked="" type="checkbox"/> No | 1315 | 1316 | 1314 |
| Tank, steel lined | 1317 ¹ <input type="checkbox"/> Yes ³ <input checked="" type="checkbox"/> No | 1319 | 1320 | 1318 |

If you answered "No" to all facility types in Item 1, Column 2 above, continue. If you answered "Yes" for any facility type in Item 1, Column 2 above, Go to Item 3, page 7.

2. Please report your agreement or disagreement with the following statements regarding waste storage facilities.
Complete the table and Item 2a below, then go to Section 5 - Animal Mortality Facilities, page 9.

I chose not to install waste storage facilities, at least in part, because:

| | Agree | Neither Agree nor Disagree | Disagree |
|--|---------------------------------------|---------------------------------------|---------------------------------------|
| 1321 They are not needed on my operation. | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |
| 1322 Anticipated costs greater than benefits. | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |
| 1323 It would take too much time or effort. | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |
| 1324 I tried to get but did not receive technical assistance. | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |
| 1325 I applied for but did not receive financial assistance. | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |
| 1326 Financial assistance would not cover enough of the cost. | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |
| 1327 Cost of meeting government standards for financial assistance is too high | ¹ <input type="checkbox"/> | ² <input type="checkbox"/> | ³ <input type="checkbox"/> |

Bb

- a. Please specify any additional reason why you have not installed waste storage facilities.

Other reason, specify: ¹³²⁸ _____

After completing Item 2 and 2a above, Go to Section 5 - Animal Mortality Facilities, page 9.

Section 4 - Waste (Manure) Storage Facilities (continued)

3. Are the waste storage facilities on your operation required by regulation?

INCLUDE regulation from Federal, State or local governments

1329

1 ☒ Yes

3 ☐ No

4. At any point during the calendar year are your waste storage facilities completely full?

1330

1 ☐ Yes - Complete Item 4a, 4ai and 4aii below, then go to Item 5

3 ☒ No - Go to Item 4b

- a. What do you do with the manure that cannot be stored on your operation?

i. Do you sell or give away excess manure to other operations? 1331 1 ☐ Yes 3 ☐ No

ii. Do you spread excess manure on your own fields? 1332 1 ☐ Yes 3 ☐ No

After completing Item 4a, 4ai and 4aii above, Go to Item 5

b. Are you required, by regulation, to maintain more storage than needed? 1333 1 ☒ Yes 3 ☐ No

c. Did you build more storage than you need to meet requirements for receiving financial assistance? 1334 1 ☐ Yes 3 ☒ No

d. Other reasons? 2627 1 ☐ Yes 3 ☒ No

5. Have changes in weather affected your management of waste storage?

1335

1 ☐ Yes - Continue

3 ☒ No - Go to Item 6

- a. Have any of the following changes affected your management of waste storage?

i. Increased precipitation 1336 1 ☐ Yes 3 ☒ No

ii. Decreased precipitation 1337 1 ☐ Yes 3 ☒ No

iii. Seasonal change in precipitation 1338 1 ☐ Yes 3 ☒ No

6. Did you install any of the waste storage facilities on your operation (as opposed to taking them over from another operation by purchase or lease)?

1339

1 ☒ Yes - Continue

3 ☐ No - Go to Section 5 - Animal Mortality Facilities, page 9

- a. Were the waste storage facilities you installed:

i. New (no prior facility on the same location)? 1340 1 ☒ Yes 3 ☐ No

ii. Renovation of existing facilities? 1341 1 ☐ Yes 3 ☒ No

b. Did the facilities you installed result in an overall increase in waste storage capacity? 1342 1 ☒ Yes 3 ☐ No

Section 4 - Waste (Manure) Storage Facilities (continued)

c. Did you receive technical assistance or financial assistance?

| | Did you receive technical assistance? | Did you receive financial assistance? | What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0 |
|--|---|---|--|
| Buildings for solid waste | 1343 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1344 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1345 |
| Impoundment, compacted soil lining | 1348 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1349 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1350 |
| Impoundment, concrete lining | 1353 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1354 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1355 |
| Impoundment, geomembrane or geosynthetic clay lining | 1358 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1359 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1360 |
| Tank, concrete or steel lined | 1363 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1364 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1365 |

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received.)

1368 **0** %

d. I decided to install waste storage facilities, at least in part, because:

| | Agree | Neither Agree Nor Disagree | Disagree |
|---|----------------------------|---------------------------------------|---------------------------------------|
| More storage was required to expand my operation. 1369 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| Changing weather required a change in storage. 1370 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| An upgrade was required to be eligible for financial assistance for other facilities. 1371 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I received technical assistance. 1372 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. 1373 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| Anticipated off-farm environmental benefits. 1374 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |

e. Did you select the type of storage based on? Check all that apply.

1375 ☒ Cost

1376 ☐ Management time or effort

1377 ☐ Other criteria, specify: 1378

f. Please specify any additional reason why you have installed waste storage facilities.

Other reason, specify: 1380 **Built a brand new confinement hog facility**

Section 5 - Animal Mortality Facilities

1. Do you have animal mortality facilities on your operation?

Complete the table below and follow the instructions at the bottom of the table below.

| | Are animal mortality facilities in use on your operation? | Of facilities in use, how many were taken over from another operation? | Of facilities in use, how many were installed by you? | Number of facilities in use (Col 5 = Col 3 + Col 4) |
|---|---|--|---|---|
| 1 | 2 | 3 | 4 | 5 |
| Animal mortality facilities INCLUDE structures for the treatment or disposal of carcasses from day-to-day operations EXCLUDE emergency mortality events | 1409 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1411 0 | 1412 2 | 1410 2 |

If you answered "Yes" in Column 2 above, Go to Item 3, page 10. If you answered "No" in Column 2 above, continue.

2. Please report your agreement or disagreement with the following statements regarding animal mortality facilities.

Complete the table and Item 2a below, then go to Section 6 - Waste (manure) Separation Facilities, page 12.

I chose not to install animal mortality facilities because:

| | Agree | Neither Agree nor Disagree | Disagree |
|--|----------------------------|----------------------------|----------------------------|
| 1417 They are not needed on my operation. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1418 I anticipated costs greater than benefits. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1419 It would take too much time or effort. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1420 I tried to get but did not receive technical assistance. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1421 I applied for but did not receive financial assistance. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1422 Financial assistance would not cover enough of the cost. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1423 Cost of meeting government standards for financial assistance is too high. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

a. Please specify any additional reason why you have not installed animal mortality facilities.

Other reason, specify: ¹⁴²⁴ _____

After completing Items 2 and 2a above, Go to Section 6 - Waste (Manure) Separation Facilities, page 12.

Section 5 - Animal Mortality Facilities (continued)

3. Are the animal mortality facilities on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments.

1425

1 ☒ Yes

3 ☐ No

4. What type of day-to-day animal mortality management do you implement on your operation? Check all that apply.

1441

☐ Rendering

1442

☐ Composting

1443

☐ Burial

1444

☐ Freezer

1445

☒ Incineration

1446

☐ Gasification

5. Did you install the animal mortality facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1451

1 ☒ Yes - Continue

3 ☐ No - Go to Section 6 - Waste (Manure) Separation Facilities, page 12

- a. Were the animal mortality facilities you installed:

i. New (no prior facility on the same location)?

1452

1 ☒ Yes

3 ☐ No

ii. Renovation of existing facilities?

1453

1 ☐ Yes

3 ☒ No

- b. Did the facilities you installed result in an overall increase in capacity?

1454

1 ☒ Yes

3 ☐ No

- c. Did you receive technical assistance or financial assistance?

| | Did you receive technical assistance? | Did you receive financial assistance? | What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0 |
|---------------------------------|---|---|--|
| Animal mortality facility | 1465 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1466 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1467 0 |

- i. What portion of financial assistance to begin this practice was from federal sources?

Enter 0 if no financial assistance was received.

1470 0 %

Section 5 - Animal Mortality Facilities (continued)

d. I decided to install animal mortality facilities, at least in part, because:

| | | Agree | Neither Agree Nor Disagree | Disagree |
|--|------|---------------------------------------|---------------------------------------|---------------------------------------|
| An upgrade was required to be eligible for financial assistance for other facilities. | 1473 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I anticipated benefits greater than cost. | 1474 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated saving time or effort. | 1475 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I received technical assistance. | 1476 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. | 1477 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I anticipated off-farm environmental benefits. | 1478 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |

e. Please specify any additional reason why you have installed animal mortality facilities.

Other reason, specify: ¹⁴⁷⁹

Was required by the state when I built the facilities

Section 6 - Waste (Manure) Separation Facilities

1. Do you have waste (manure) separation facilities on your operation?

INCLUDE

- filters or screens
- settling tanks
- settling basins
- settling channels used to separate manure solids from liquids

Complete the table below and follow the instructions at the end of the table.

| | Are waste separation facilities in use on your operation? | Of facilities in use, how many were taken over from another operation? | Of facilities in use, how many were installed by you? | Number of facilities in use (Col 5 = Col 3 + Col 4) |
|--|---|--|---|--|
| 1 | 2 | 3 | 4 | 5 |
| Waste (Manure) Separation Facilities | 1501 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1503 0 | 1504 2 | 1502 2 |

If you answered "Yes" in Column 2 above, Go to Item 3, page 13. If you answered "No" in Column 2 above, continue.

2. Please report your agreement or disagreement with the following statements regarding waste separation facilities.

Complete the table and 2a below, then go to Section 7 - Comprehensive Nutrient Management, page 15.

I chose not to install waste (manure) separation facilities because:

| | Agree | Neither Agree nor Disagree | Disagree |
|--|----------------------------|----------------------------|----------------------------|
| They are not needed on my operation. 1509 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated costs greater than benefits. 1510 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It would take too much time or effort. 1550 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I tried to get but did not receive technical assistance. 1512 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I applied for but did not receive financial assistance. 1513 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Financial assistance would not cover enough of the cost. 1514 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Cost of meeting government standards for financial assistance is too high. 1515 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

a. Please specify any additional reason why you have not installed waste separation facilities.

Other reason, specify: ¹⁵¹⁶ _____

After completing Items 2 and 2a above, Go to Section 7 - Comprehensive Nutrient Management, page 15.

Section 6 - Waste (Manure) Separation Facilities (continued)

3. What types of waste separators have you implemented? Check all that apply.

1431

☐ Inclined screen

1432

☐ Screw press

1433

☐ Roller press

1434

☐ Belt press

1435

☒ Settling basin

1436

☐ Weeping wall

1437

☐ Vibratory screen

1438

☐ Rotating screen

1439

☐ Centrifuge

1440

☐ Geotextile container

4. Have changes in weather affected your management of waste separation facilities?

1447

1 ☐ Yes - Continue

3 ☒ No - Go to Item 5, page 14

a. Have any of the following changes affected your management of waste separation facilities?

i. Increased precipitation

1448

1 ☐ Yes

3 ☒ No

ii. Decreased precipitation

1449

1 ☐ Yes

3 ☒ No

iii. Seasonal change in precipitation

1450

1 ☐ Yes

3 ☒ No

Section 6 - Waste (Manure) Separation Facilities (continued)

5. Did you install any of the waste separation facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1520 1 ☒ Yes - Continue

3 ☐ No - Go to Section 7 - Comprehensive Nutrient Management, page 15

- a. Were the waste separation facilities you installed:

- i. New (no prior facility on the same location)? 1521 1 ☒ Yes 3 ☐ No
- ii. Renovation of existing facilities? 1522 1 ☐ Yes 3 ☒ No

- b. Did the facilities you installed result in an overall increase in waste separation capacity? 1523 1 ☒ Yes 3 ☐ No

- c. Did you receive technical assistance or financial assistance?

| | Did you receive technical assistance? | Did you receive financial assistance? | What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0. |
|---------------------------------|---|---|---|
| Waste separation facility | 1524 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1525 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1526 0 |

- i. What portion of financial assistance to begin this practice was from federal sources?

Enter 0 if no financial assistance was received.

1534 0 %

- d. I decided to install waste separation facilities, at least in part, because:

| | Agree | Neither Agree Nor Disagree | Disagree |
|---|---------------------------------------|---------------------------------------|---------------------------------------|
| They addressed a waste management or storage problem. 1535 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| They facilitate better use of nutrients or export to other farms. 1536 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| An upgrade was required to be eligible for financial assistance for other facilities. 1537 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I anticipated benefits greater than cost. 1538 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated saving time or effort. 1539 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I received technical assistance. 1540 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. 1541 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I anticipated off-farm environmental benefits. 1542 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |

- e. Please specify any additional reason why you have installed waste separation facilities.

Other reason, specify: 1543

Was required by the state

Section 7 - Comprehensive Nutrient Management

A Comprehensive Nutrient Management Plan (CNMP) is a management plan to utilize nutrients and to manage the collection, handling, storage, application, and utilization of animal waste (manure).

1. Do you have a written comprehensive nutrient management plan (CNMP), developed with assistance from a government agency, private consultant, or other technical expert, to manage manure and other nutrients?

1601 ☒ Yes - Go to Item 2

3 ☐ No - Complete Items 1a and 1b below, then go to Section 8 - Waste Utilization, page 18

- a. Please report your agreement or disagreement with the following statements regarding a written comprehensive nutrient management plan.

I chose not to develop and implement a written comprehensive nutrient management plan, at least in part, because:

| | Agree | Neither Agree nor Disagree | Disagree |
|--|----------------------------|-------------------------------|----------------------------|
| It would require changing crops. 1602 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It would require export of waste to other farms. 1603 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated costs greater than benefits. 2628 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It would take too much time or effort. 1604 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I need more information to make a good decision about whether to use a CNMP. 2629 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I tried to get but did not receive technical assistance. 1605 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I applied for but did not receive financial assistance. 1606 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Financial assistance would not cover enough of the cost. 1607 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

- b. Please specify any additional reason why you have not implemented a written comprehensive nutrient management plan.

Other reason, specify: 1608 _____

After completing Items 1a and 1b above, Go to Section 8 - Waste Utilization, page 18.

2. Have you had to modify your CNMP? 1609 1 ☐ Yes 3 ☒ No
3. Is a CNMP for your operation required by regulation? 1610 1 ☒ Yes 3 ☐ No

Section 7 - Comprehensive Nutrient Management (continued)

4. Is spreading of waste on frozen ground limited or prohibited by your CNMP? 1611 1 ☒ Yes 3 ☐ No
5. Have changes in weather affected your CNMP or how you implement it?
1612 1 ☐ Yes - Continue 3 ☒ No - Go to Item 6
- a. Have any of the following changes affected your CNMP or how you implement it?
- i. Increased precipitation 1613 1 ☐ Yes 3 ☐ No
- ii. Decreased precipitation 1614 1 ☐ Yes 3 ☐ No
- iii. Seasonal change in precipitation 1615 1 ☐ Yes 3 ☐ No
6. Did you manage in accordance with your comprehensive nutrient management plan in 2021? 1645 1 ☒ Yes 3 ☐ No
7. What year did you first manage in accordance with your comprehensive nutrient management plan? year 1616 **2017**

- a. Did you receive technical assistance or financial assistance?

| | Did you receive technical assistance? | Did you receive financial assistance? | What percentage of the cost was covered by financial assistance? |
|---|---|---|--|
| Developing or writing a Comprehensive Nutrient Management Plan (CNMP) | 1617 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1618 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1619 % |
| Implementing CNMP | 1620 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1621 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1622 % |

- i. What portion of financial assistance to begin this practice was from federal sources? (Enter 0 if no financial assistance was received.) 1623 **0** %

Section 7 - Comprehensive Nutrient Management (continued)

b. I chose to develop and implement a written CNMP, at least in part, because:

| | | Agree | Neither Agree Nor Disagree | Disagree |
|---|------|---------------------------------------|---------------------------------------|---------------------------------------|
| It was required to be eligible for financial assistance on other facilities. | 1624 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| It facilitates better use of livestock waste nutrients in crop production. | 1625 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated benefits greater than costs. | 1626 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated saving time or effort. | 1627 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I received technical assistance. | 1628 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. | 1629 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I anticipated off-farm environmental benefits. | 1630 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |

c. Please specify any additional reason why you have implemented a CNMP.

Other reason, specify: ¹⁶³¹ _____

8. Have you stopped managing in accordance with your CNMP?

²⁶³⁰

1 ☐ Yes - Continue

3 ☒ No - Go to Section 8 - Waste Utilization, page 18

a. What year did you last manage in accordance with your CNMP? year

1632

b. If you did not manage in accordance with your CNMP in 2021, do you plan to do so again within 3 years?

¹⁶³³

1 ☐ Yes - Go to Section 8 - Waste Utilization, page 18

3 ☐ No - Continue

c. I decided to stop managing in accordance with my CNMP, at least in part, because:

| | | Agree | Neither Agree Nor Disagree | Disagree |
|---|------|----------------------------|-------------------------------|----------------------------|
| It required changing crops. | 1634 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It required export of waste to other farms. | 1635 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Costs were greater than benefits. | 1636 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It took too much time or effort. | 1637 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Technical assistance ended. | 1638 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Financial assistance ended. | 1639 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Financial assistance did not cover enough of the cost. | 1640 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

Section 8 - Waste Utilization

1. Does your livestock operation produce liquid waste?

2631

1 ☒ Yes - Continue3 ☐ No - Go to Item 6, page 20

a. What type of equipment do you use for in-field application of liquid manure? Check all that apply. If you use a contractor to apply manure, please note the types of equipment used by the contractor.

2632

☐ Tractor-pulled spreader with tank (places manure on surface)

2633

1 ☒ Tractor-pulled injector with tank (places manure under the surface)

2634

☐ Tractor-pulled injector with hose (places manure under the surface)

2635

☐ Truck-mounted spreader with tank (places manure on surface)

2636

☐ Irrigation equipment

2637

b. Do you use a contractor to apply liquid manure?

1 ☐ Yes3 ☒ No

c. How is liquid manure incorporated into the soil?

2638

1 ☒ Manure spreading and incorporation are done in a single field operation2 ☐ Tillage within 24 hours of manure application3 ☐ Tillage, but not necessarily within 24 hours

2639

d. Do you export liquid manure to other farms?

1 ☒ Yes3 ☐ No

2. Do you use pipelines, pumping plants, or irrigation equipment to facilitate land application of manure?

Complete the table below and follow the instructions at the end of the table.

| | Are any of these waste utilization facilities in use on your operation? | Of facilities in use, how many were taken over from another operation? | Of facilities in use, how many were installed by you? | Number of facilities in use (Col 5 = Col 3 + Col 4) |
|--|---|--|---|---|
| 1 | 2 | 3 | 4 | 5 |
| Pipeline A pipeline (and other parts necessary for a functioning pipeline) installed to convey liquid manure for land application. | 1701 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1703 | 1704 | 1702 |
| Pumping plant A pump used to apply waste to the field. INCLUDE pump(s), power unit(s), and all other parts necessary to the pumping plant that conveys liquid manure for land application | 1705 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1707 | 1708 | 1706 |
| Sprinkler Irrigation A distribution system that applies liquid waste through nozzles under pressure. | 1709 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1711 | 1712 | 1710 |

If you answered "No" to all facility types in Column 2 above, Go to Item 3, page 19. If you answered "Yes" for any facility type in Column 2 above, Go to Item 4, page 19.

Section 8 - Waste Utilization (continued)

3. Please report your agreement or disagreement with the following statements regarding waste utilization facilities. Complete the table below, then go to Item 7, page 21.

I chose not to install waste utilization facilities, at least in part, because:

| | | Agree | Neither Agree nor Disagree | Disagree |
|---|------|----------------------------|-------------------------------|----------------------------|
| They are not needed on my operation. | 1713 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated costs greater than benefits. | 1714 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It would take too much time or effort. | 1715 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I tried to get but did not receive technical assistance. | 1716 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I applied for but did not receive financial assistance. | 1717 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Financial assistance would not cover enough of the cost. | 1718 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Cost of meeting government standards for financial assistance is too high. | 1719 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

- a. Please specify any additional reason why you have not installed waste utilization facilities.

Other reason, specify: ¹⁷²⁰ _____

After completing Item 3 and 3a above, Go to Item 7, page 21.

4. Are the waste utilization facilities on your operation required by regulation?
INCLUDE regulation from Federal, State, or local governments

¹⁷²¹ 1 ☒ Yes 3 ☐ No

5. Have changes in weather affected your waste utilization?

¹⁷²² 1 ☐ Yes - Continue 3 ☒ No - Go to Item 6, page 20

- a. Have any of the following changes affected your waste utilization?

| | | | |
|---|-----------------|--------------------------------|-------------------------------|
| i. Increased precipitation | ¹⁷²³ | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| ii. Decreased precipitation | ¹⁷²⁴ | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| iii. Seasonal change in precipitation | ¹⁷²⁵ | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |

Section 8 - Waste Utilization (continued)

6. Did you install any of the waste utilization facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1726

1 ☐ Yes - Continue3 ☒ No - Go to Item 7, page 21

- a. Did you receive technical assistance or financial assistance?

| | Did you receive technical assistance? | Did you receive financial assistance? | What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0 |
|----------------------------|--|--|---|
| Pipeline | 1727 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1728 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1729 |
| Pumping plant | 1732 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1733 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1734 |
| Sprinkler Irrigation | 1737 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1738 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1739 |

- i. What portion of financial assistance to begin this practice was from federal sources?
Enter 0 if no financial assistance was received.

1760

%

- b. I chose to develop and implement waste utilization facilities, at least in part, because:

| | Agree | Neither Agree Nor Disagree | Disagree |
|--|----------------------------|----------------------------|----------------------------|
| It addressed a waste management problem. 1742 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It facilitated better use of manure nutrients. 1743 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| An upgrade was required to be eligible for financial assistance on other facilities. 1744 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated benefits greater than cost. 1745 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated saving time or effort. 1746 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I received technical assistance. 1747 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. 1748 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated off-farm environmental benefits. 1749 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

- c. Please specify any additional reason why you have installed waste utilization facilities.

Other reason, specify: 1750

Section 8 - Waste Utilization (continued)

7. Does your livestock operation produce solid waste?

2640

1 ☐ Yes - Continue

3 ☒ No - Go to Section 9 - Diversion of Runoff, page 22

a. What type of equipment do you use to handle solid waste? Check all that apply.

If you use a contractor to apply manure, please note the types of equipment used by the contractor(s).

2641

☐ Tractor equipped with manure loader

2642

☐ High loader

2643

☐ Tractor-pulled litter housekeeper

2644

☐ Low profile loader

2645

☐ Other equipment for collecting manure

2646

☐ Tractor-pulled manure or litter spreader

2647

☐ Truck-mounted manure or litter spreader

2648

b. Do you use a contractor to apply solid manure?

1 ☐ Yes

3 ☐ No

c. How is solid manure incorporated into the soil?

2649

1 ☐ Manure spreading and incorporation are done in a single field operation

2 ☐ Tillage within 24 hours of manure application

3 ☐ Tillage, but not necessarily within 24 hours

2650

d. Do you export solid manure to other farms?

1 ☐ Yes

3 ☐ No

Section 9 - Diversion of Runoff

1. What type of runoff control and diversion structures (designed to "keep the clean water clean") are currently in use on your livestock operation?

Complete the table below and follow the instructions at the end of the table.

| | Are any of these diversion facilities in use on your operation? | Of facilities in use, how many were taken over from another operation? | Of facilities in use, how many were installed by you? | Number of facilities in use (Col 5 = Col 3 + Col 4) |
|---|---|--|---|--|
| 1 | 2 | 3 | 4 | 5 |
| Roofs and covers INCLUDE roofs or covers over waste storage facilities, lagoons, animal mortality facilities or waste separation facilities | 1801 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1803 0 | 1804 2 | 1802 2 |
| Roof runoff structure INCLUDE gutters, downspout pipes and drains that collect, control or transport rainfall from roofs and covers | 1805 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1807 0 | 1808 10 | 1806 10 |
| Diversion INCLUDE channels constructed on a slope to divert water away from agricultural waste systems | 1809 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1811 0 | 1812 2 | 1810 2 |

If you answered "No" to all practices in Column 2 above, Go to Item 2, page 23. If you answered "Yes" for any practice in Column 2 above, Go to Item 3, page 23.

Section 9 - Diversion of Runoff (continued)

2. Please report your agreement or disagreement with the following statements regarding runoff control and diversion structures. Complete the table below, then go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26.

I chose not to install runoff control and diversion structures, at least in part, because:

| | Agree | Neither Agree nor Disagree | Disagree |
|--|----------------------------|-------------------------------|----------------------------|
| They are not needed on my operation. 1817 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated costs greater than benefits. 1818 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| It would take too much time or effort. 1819 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I tried to get but did not receive technical assistance. 1820 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I applied for but did not receive financial assistance. 1821 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Financial assistance would not cover enough of the cost. 1822 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| Cost of meeting government standards for financial assistance is too high. 1823 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

After completing Item 2 above, Go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26.

3. Are the runoff control and diversion structures on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

1825 1 ☒ Yes 3 ☐ No

4. Have changes in weather affected your use of runoff control and diversion structures?

This would include more than just diversions, which is only one structure listed.

1826 1 ☐ Yes - Continue 3 ☒ No - Go to Item 5, page 24

- a. Have any of the following changes affected your use of runoff control and diversion structures?

| | | | |
|---|------|--------------------------------|--|
| i. Increased precipitation | 1827 | 1 <input type="checkbox"/> Yes | 3 <input checked="" type="checkbox"/> No |
| ii. Decreased precipitation | 1828 | 1 <input type="checkbox"/> Yes | 3 <input checked="" type="checkbox"/> No |
| iii. Seasonal change in precipitation | 1829 | 1 <input type="checkbox"/> Yes | 3 <input checked="" type="checkbox"/> No |

Section 9 - Diversion of Runoff (continued)

5. Did you install any of the runoff control and diversion facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1830

1 ☒ Yes - Continue 3 ☐ No - Go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26

- a. Did the runoff diversion facilities you installed:

- i. Replace existing runoff management structures? 1831 1 ☐ Yes 3 ☒ No
- ii. Expand existing runoff diversion capacity? 1832 1 ☒ Yes 3 ☐ No
- iii. Divert runoff to waste storage facilities? 1833 1 ☐ Yes 3 ☒ No
- iv. Divert runoff away from your waste storage facilities? 1834 1 ☒ Yes 3 ☐ No

- b. Did you receive technical assistance or financial assistance?

| | Did you receive technical assistance? | Did you receive financial assistance? | What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0 |
|------------------------------|--|--|---|
| Roofs and covers | 1835 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1836 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1837 0 |
| Roof runoff structures | 1840 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1841 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1842 0 |
| Diversion | 1845 1 <input checked="" type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1846 1 <input type="checkbox"/> Yes 3 <input checked="" type="checkbox"/> No | 1847 0 |

- i. What portion of financial assistance to begin this practice was from federal sources?
Enter 0 if no financial assistance was received.

1855 **0** %

Section 9 - Diversion of Runoff (continued)

c. I chose to implement runoff control and diversion practices, at least in part, because:

| | Agree | Neither Agree Nor Disagree | Disagree |
|---|---------------------------------------|---------------------------------------|---------------------------------------|
| I anticipated benefits greater than cost. 1856 | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated saving time or effort. 1857 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| An upgrade was required to be eligible for financial assistance for other facilities. 1858 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I received technical assistance. 1859 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. 1860 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| I anticipated off-farm environmental benefits. 1861 | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |

d. Please specify any additional reason why you have installed runoff control and diversion structures.

Other reason, specify: ¹⁸⁶² _____



Section 10 - Stabilization or Protection of Heavily Used Areas

1. Do you have vegetative cover, surfacing, or structures to stabilize or protect areas that are frequently and intensively used by people, animals or vehicles?

1901

☐ Yes - Complete Items 1a, 1b, and 1c below, then go to Item 3, page 27

☒ No - Go to Item 2

a. Number taken over from another operation

1902

b. Number installed by you

1903

c. Total number in use (Item 1c = Item 1a + 1b)

2651

After completing Item 1a, 1b, and 1c above, Go to Item 3, page 27.

2. Please report your agreement or disagreement with the following statements about vegetative cover, surfacing or structures to stabilize or protect areas that are frequently and intensively used. Complete the table below and Item 2a, then go to Section 11 - Demographics, page 28.

I chose not to install vegetative cover, surfacing or structures to protect heavily used areas, at least in part, because:

| | Agree | Neither Agree Nor Disagree | Disagree |
|--|---------------------------------------|---------------------------------------|---------------------------------------|
| 1904 They are not needed on my operation. | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1905 I anticipated costs greater than benefits. | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1906 It takes too much time or effort. | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| 1907 I tried to get but did not receive technical assistance. | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| 1908 I applied for but did not receive financial assistance. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input checked="" type="checkbox"/> |
| 1909 Financial assistance would not cover enough of the cost. | 1 <input type="checkbox"/> | 2 <input checked="" type="checkbox"/> | 3 <input type="checkbox"/> |
| 1910 Cost of meeting government standards for financial assistance is too high. | 1 <input checked="" type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

- a. Please specify any additional reason why you have not installed vegetative cover, surfacing or structures to protect heavy use areas.

1911

Other reason, specify: _____

After completing Item 2 and 2a above, Go to Section 11 - Demographics, page 28.

Section 10 - Stabilization or Protection of Heavily Used Areas (continued)

3. Are the heavy use protection areas on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

1912

1 ☐ Yes3 ☐ No

4. For areas of heavy use that were stabilized on your operation, did your operation do the stabilization for at least some of these areas?

1913

1 ☐ Yes - Continue3 ☐ No - Go to Section 11 - Demographics, page 28

- a. Did you receive technical assistance or financial assistance?

| | | |
|----------------------------|--|---|
| | | What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0 |
| Technical assistance | 1914 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | |
| Financial assistance | 1915 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No | 1916 |

- i. What portion of financial assistance to begin this practice was from federal sources?

Enter 0 if no financial assistance was received.

1919

%

- b. I chose to install vegetative cover, surfacing or structures to protect heavily used areas, at least in part, because:

| | Agree | Neither Agree nor Disagree | Disagree |
|---|----------------------------|----------------------------|----------------------------|
| They reduce animal health problems. 1920 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| They reduce repetitive maintenance activities. 1921 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| They make waste collection easier. 1922 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| An upgrade was required to be eligible for financial assistance for other facilities. 1923 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated benefits greater than costs. 1924 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated saving time or effort. 1925 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I received technical assistance. 1926 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I received financial assistance. 1927 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| I anticipated off-farm environmental benefits. 1928 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

- c. Please specify any additional reason why you decided to stabilize heavy use areas.

Other reason, specify: 1929

Section 11 - Demographics

1. Please answer the following for the operator:

a. What is the operator's sex?

910

1 ☒ Male

2 ☐ Female

b. What was the operator's age on January 1, 2022?

911

48

912

c. Is the operator of Hispanic, Latino or Spanish origin?

1 ☐ Yes

3 ☒ No

d. What is the operator's race? Check all that apply.

913

☒ White

914

☐ Black or African American

915

☐ American Indian or Alaska Native

916

☐ Asian

917

☒ Native Hawaiian or Other Pacific Islander

e. Has the operator ever served on active duty in the U.S. Armed Forces, Reserves or National Guard?

918

1 ☒ Never served in the military

2 ☐ Only on active duty for training in the Reserves or National Guard

3 ☐ Now on active duty

4 ☐ On active duty in the past, but not now

2. How many years have you been continuously managing a forest, farm or ranch operation? years

919

12

3. At which occupation did the operator spend the majority (50 percent or more) of his/her time in 2021?

920

1 ☒ Forestry, farm or ranch work

2 ☐ Work other than forestry, farming or ranching

1212

4. Is the operator retired from forestry, farming or ranching?

1 ☐ Yes

3 ☒ No

Section 11 - Demographics (continued)

5. What is the highest level of formal education the operator has achieved?

922

- 1 ☐ Less than high school diploma
- 2 ☐ High school
- 3 ☒ Some college (include associates degree)
- 4 ☐ Four-year college graduate and beyond

6. In 2021, what was this operation's legal status for tax purposes? Check one answer only.

923

| | | | |
|---|--|--------------------------------|--|
| 1 | <input type="checkbox"/> Family or individual operation - EXCLUDE partnerships and corporations | | |
| 2 | <input checked="" type="checkbox"/> Partnership operation - INCLUDE family partnerships - If option 2 is selected: | | |
| | Is this partnership registered under state law? | 924 | |
| | | 1 <input type="checkbox"/> Yes | 3 <input checked="" type="checkbox"/> No |
| 3 | <input type="checkbox"/> Incorporated under state law - If option 3 is selected: | | |
| | Is this a family held corporation? | 925 | |
| | | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| | Are there more than 10 stockholders? | 926 | |
| | | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| 4 | <input type="checkbox"/> Other - If option 4 is selected: | | |
| | Estate or trust | 927 | |
| | | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| | Grazing association, government facility or American Indian reservation | 928 | |
| | | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| | Other, specify 929 | 930 | |
| | type: _____ | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |

Section 12 - Value of Sales**Farm Producer Value Codes**

| Dollar Range | Code | Dollar Range | Code | Dollar Range | Code |
|---------------------------|------|-----------------------------|------|--------------------------------|------|
| 0 - \$999 | 1 | \$30,000 - \$39,999 | 8 | \$180,000 - \$249,999 | 15 |
| \$1,000 - \$2,499 | 2 | \$40,000 - \$49,999 | 9 | \$250,000 - \$499,999 | 16 |
| \$2,500 - \$4,999 | 3 | \$50,000 - \$59,999 | 10 | \$500,000 - \$999,999 | 17 |
| \$5,000 - \$9,999 | 4 | \$60,000 - \$69,999 | 11 | \$1,000,000 - \$4,999,999 | 18 |
| \$10,000 - \$14,999 | 5 | \$70,000 - \$79,999 | 12 | \$5,000,000 and over | 19 |
| \$15,000 - \$19,999 | 6 | \$80,000 - \$99,999 | 13 | | |
| \$20,000 - \$29,999 | 7 | \$100,000 - \$179,999 | 14 | | |

1. Which value code represents this operation in terms of the gross value of sales and government agricultural payments?
- | | 2020 | 2021 |
|------|-----------|----------------|
| 2497 | 18 | 2498 18 |

INCLUDE

- Sales of all the crops, livestock, poultry, and livestock products (milk, eggs, etc.)
- The value of hay, silage, and other crops harvested, but not sold
- The value of all crops, livestock and poultry produced under contract
- Landlord's share of government payments and crops sold

EXCLUDE

- Dollars received on land rented to others

2. Which value code represents the net operating income for this operation?
- | | 2020 | 2021 |
|------|-----------|----------------|
| 2499 | 14 | 2500 14 |
- (Cash income from all farm sourced sources minus production costs and depreciation; if negative, please indicate with a negative sign before the value code.)

3. Which value code represents your total off-farm income?
- | | 2020 | 2021 |
|------|-----------|----------------|
| 2501 | 10 | 2502 10 |
- (wages, salaries, tips, interest, dividends, other public sources, etc., before taxes, income from operating another farm, income from operating any other business; if negative, please indicate with a negative sign before the value code.)

4. How many people lived in your household?
- | | 2020 | 2021 |
|------|----------|---------------|
| 2503 | 4 | 2504 3 |

Section 12 - Value of Sales (continued)

5. Of the farm or ranch income reported, which of these categories represents the largest portion of the gross income from the operation?

Code

- | | |
|---|---------------------------------------|
| 1 – Grains, Oilseeds, Dry Beans, and Dry Peas (corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice, small grains, sorghum, soybeans, sunflowers, straw, etc.) | 1 <input type="checkbox"/> |
| 2 – Tobacco | 2 <input type="checkbox"/> |
| 3 – Cotton and Cottonseed | 3 <input type="checkbox"/> |
| 4 – Vegetables, Melons, Potatoes and Sweet Potatoes (beets, cabbage, cantaloupes, pumpkins, sweet corn, tomatoes, watermelons, vegetable seeds, etc.) | 4 <input type="checkbox"/> |
| 5 – Fruit, Tree Nuts and Berries (almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit, oranges, pears, pecans, strawberries, walnuts, etc.) | 5 <input type="checkbox"/> |
| 6 – Nursery, Greenhouse, Floriculture and Sod (bedding plants, bulbs, cut flowers, flower seeds, foliage plants, mushrooms, nursery potted plants, shrubbery, sod, etc.) | 6 <input type="checkbox"/> |
| 7 – Cut Christmas Trees and Short Rotation Woody Crops | 7 <input type="checkbox"/> |
| 8 – Other Crops and Hay, CRP and Pasture (grass seed, hay and grass silage, hops, maple syrup, mint, peanuts, sugarcane, sugarbeets, CRP, etc.) | 8 <input type="checkbox"/> |
| 9 – Hogs and Pigs | 9 <input checked="" type="checkbox"/> |
| 10 – Milk and Other Dairy Products from Cows | 10 <input type="checkbox"/> |
| 11 – Cattle and Calves (beef and dairy cattle for breeding stock, fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.) | 11 <input type="checkbox"/> |
| 12 – Sheep, Goats, and their Products (wool, mohair, milk and cheese) | 12 <input type="checkbox"/> |
| 13 – Horses, Ponies, and Mules (burros and donkeys) | 13 <input type="checkbox"/> |
| 14 – Poultry and Eggs (broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings, ostriches, pigeons, pheasants, quail, poultry products, etc.) | 14 <input type="checkbox"/> |
| 15 – Aquaculture (catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.) | 15 <input type="checkbox"/> |
| 16 – Other Animals and Other Animal Products (honey bees, honey, rabbits, fur-bearing animals, semen, manure, other animal specialties, etc.) | 16 <input type="checkbox"/> |

Farm Type
Code

862

9

Section 13 - Conclusion

1. Has this operation (name on label) been sold, or turned over to someone else?

¹ ☐ Yes - Identify the new operator(s) below ³ ☐ No - Go to Item 2

| | | |
|-----------------------|--------------|--|
| Operation Name: _____ | | |
| Operator Name: _____ | | |
| Address: _____ | | |
| City: _____ | State: _____ | Zip: _____ |
| Phone: (____) _____ | | <input type="checkbox"/> Check if cell phone |

a. Did this person operate land individually on June 1, 2021? ¹ ☐ Yes ☐ No

1511

2. Comments related to the information you reported:

Contact Information:

| | | | |
|------------------|--|---|--|
| Operation Email: | | Operation Phone: | |
| 9937 | | 9936 | |
| () - _____ | | check if cell phone <input type="checkbox"/> | |

| | | | | | |
|------------------|--|--|--|---|------------------------|
| Respondent Name: | | Respondent Phone (if different from above) | | | |
| 9912 | | 9911 | | check if cell phone <input type="checkbox"/> | 9910 MM DD YY |
| () - _____ | | Date: ____ | | ____ | |

This completes the survey. Thank you for your help.

| OFFICE USE ONLY | | | | | | | | | | | | | | |
|---|------|---|------|--|------|-------|-------|---------|--------|------------------------------|--|--|--|--|
| Response | | Respondent | | Mode | | Enum. | Eval. | R. Unit | Change | Office Use for POID | | | | |
| 1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est | 9901 | 1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other | 9902 | 1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other | 9903 | 9998 | 9900 | 9921 | 9985 | 9989 | | | | |
| | | | | | | | | | | _____ - _____ - _____ | | | | |
| | | | | | | | | | | Optional Use | | | | |
| | | | | | | | | | | 9907 9908 9906 9916 | | | | |
| S/E Name | | | | | | | | | | | | | | |