

Enhancement Request Worksheet

State: _____

State Technical Point of Contact(s), include name, email, phone:

State Program Point of Contact(s), include name, email, phone:

Type of Request:

- New Revision to existing enhancement Re-activation of archived enhancement

Last year enhancement was active: _____

Enhancement Name (maximum of 40 characters):

Applicable Land Use(s):

- Crop (Annual & Mixed) Crop (Perennial) Pasture
 Range Forest Associated Ag Land
 Farmstead

Name of Technical Discipline Specialists Consulted (list all that apply):

State: _____

Regional: _____

National: _____

Associated NRCS Conservation Practice Standard (CPS) Code and Name (i.e. base practice):

Additional CPS Criteria or Consideration addressed by enhancement:

Supplemental information states will need to develop or supply for the enhancement:

Identify potential incompatible enhancements:

Identify any new cost component(s), not currently available in PSA. Provide detailed description and other supporting documentation such as photos, websites, catalog part number, etc.:

Additional comments or supporting documentation: