

FERTILIZER RECOMMENDATIONS

NAME (FARMER/OPERATOR): _______ PLAN YEAR: ______

ADDRESS:					COLUMN				DATE PLAN PREPARED: PHONE:					
CITY:		ZIF	':		COUNTY:			PF	HUNE:					
Tract #/Farm Name	Field #	•	Area (acres)	Yield Goal (write the units)	Plant Nutrients Needed N-P ₂ O ₅ -K ₂ O (lb/A)	Nitrogen Credits (lb/A)			Fertilizer to be applied					Lime
						Legume	Manure	Biosolids	s Method	N	P ₂ O ₅	K ₂ O	Mg	(T/A)
									Total					
									Total					
								-						
									Total					

Agricultural Nutrient Management Program