

Agricultural Practices Form

PFM prioritizes businesses that use regenerative and sustainable practices. We require all farmers to provide detailed information regarding their agricultural practices. The purpose of this form is to provide transparency to consumers and for you to tell us more about your business. PFM will have paper copies of each farm's agricultural practices available at the Information Booth.



If farming on multiple properties, you are required to upload a form for each location with your application on Farmspread.

Vendor Name _____ Date _____

1. Farm address: _____

2. Total number of acres actively farmed at this location: _____

3. What **soil conservation** practices do you use? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Crop rotations | <input type="checkbox"/> Avoid working saturated soils |
| <input type="checkbox"/> Cover crops | <input type="checkbox"/> Avoid steep/highly erodible land |
| <input type="checkbox"/> Low/No till | <input type="checkbox"/> Interplanting |
| <input type="checkbox"/> Rotational grazing | <input type="checkbox"/> Organic approved soil amendments |
| <input type="checkbox"/> Pasture sacrifice area (such as dry lot or barnyard) | <input type="checkbox"/> Other (please specify) _____ |
| <input type="checkbox"/> Fallow periods | |
| <input type="checkbox"/> Conservation/Riparian buffers | |

Is there anything else you'd like us to know about your soil conservation practices?

4. What practices do you use to maintain or improve **water conservation**? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Drip irrigation | <input type="checkbox"/> Encourage infiltration in fields/pastures, etc |
| <input type="checkbox"/> Dry farm crops | <input type="checkbox"/> Other (please specify) _____ |
| <input type="checkbox"/> Plant regionally appropriate crops | |
| <input type="checkbox"/> Plant drought tolerant natives | |

Is there anything else you'd like us to know about your water conservation practices?

5. What is the source of your farm's irrigation water? (Check all that apply)
- Groundwater (well or spring)
 - Surface water (lakes/rivers/reservoir)
 - Treated wastewater
 - Other (please specify) _____
6. What actions do you take to **provide habitat** for pollinators, insect predators, birds, and other wildlife? (Check all that apply)
- Bird/bat boxes
 - Hedgerows
 - Timing of field activities
 - Fallow periods
 - Intercropping
 - Pollinator habitat
 - Plant pest/disease resistant crops
 - Other (please specify) _____

Is there anything else you'd like us to know about these practices?

7. What weed, disease, and pest control methods do you use? (Check all that apply)
- Crop rotations
 - Low/No till
 - Rotational grazing
 - Fallow periods
 - Flame weeding
 - Pest/disease resistant crops
 - Hand weed and pest removal
 - Organic herbicides
 - Synthetic herbicides
 - Mulch
 - Timing of planting
 - Plant spacing
 - Field sanitation
 - Insect repellents
 - Integrated pest management (IPM)
 - Organic pesticides
 - Synthetic pesticides
 - Other (please specify) _____

Is there anything else you'd like us to know about your weed, disease and pest control methods?

8. What are your farm waste management practices?

- On-farm recycling
- Composting
- On-farm gleaning
- Refillable containers or bulk refill at market
- Food donations
- Water reuse
- Minimal or no plastic
- Carbon farming
- Other (please specify) _____

Is there anything else you'd like us to know about your farm waste management practices and/or waste reduction efforts?

9. What are your farms' energy sources? (Check all that apply)

- Diesel
- Bio-diesel
- Gasoline
- Electricity from the grid
- Wind
- Solar
- None
- Other (please specify) _____

Is there anything else you'd like us to know about your farm's energy sources and/or energy reduction efforts?

10. What are your livestock management practices? (Check all that apply)

- Pasture
- Self-raised hay
- Purchased hay
- Grains
- Veterinarian-Client-Patient-Relationship (VCPR)
- Antibiotic screening protocol
- Non - GMO feed
- On-farm slaughter
- Other (specify below) _____
- Not applicable

Is there anything else you'd like us to know about your livestock management and/or animal care practices?

11. Add additional information or stories about your farm or farming/pasture management practices:
