

Pre-Plant Assessment of Crop Production Areas

Date:

Farm Name: _____

| DATE | GAP FIELD NUMBER | ASSESSMENT/ CONDITION | ACTION TAKEN |
|------|---------------------|-----------------------|--------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Reviewed by:

Title:

Date: