

## Farm Agronomic Practices (FAP) Rotational Grazing Claim Form

Please summarize your grazing records in this form at the end of the season to request Farm Agronomic Practice payment.

This form should only list fields eligible for FAP rotational grazing payment according to program standards listed at [agriculture.vermont.gov/FAP](http://agriculture.vermont.gov/FAP). Please ensure Field ID/name listed matches the grazing maps submitted with your application.

Farm Name: \_\_\_\_\_ Calendar Year: \_\_\_\_\_

Livestock Type: \_\_\_\_\_ Livestock #: \_\_\_\_\_

First day of grazing: \_\_\_\_\_ Last day of grazing: \_\_\_\_\_

Field ID/name as used in maps. List each field only ONCE	Total field area (acres)	Number of paddocks (#) OR typical paddock size (acres)	Residual Height (inches)	Frequency of moves (in days)	Length of rest periods over season (approximate range, in days)
<i>Example #1: Big Pasture</i>	<i>20.2</i>	<i>10 paddocks</i>	<i>4-6"</i>	<i>3 days</i>	<i>25-45 days</i>
<i>Example #2: Field 10</i>	<i>40.0</i>	<i>1 acre</i>	<i>3"</i>	<i>0.5 days</i>	<i>3 weeks (May) - 2 months (Sept/Oct)</i>

**Total FAP-Eligible Acres Claimed:**  Note: acres mapped by AAFM may differ up to 5%

By signing/typing my name below, I certify that the fields listed above meet FAP requirements for practice payment.

Grantee Signature: \_\_\_\_\_ Date: \_\_\_\_\_