

This form is available electronically.

**FSA-850**  
(02-07-17)

**U.S. DEPARTMENT OF AGRICULTURE**  
Farm Service Agency

**ENVIRONMENTAL SCREENING WORKSHEET**

**1. GENERAL INFORMATION**

1A. Producer or Applicant Name

1B. State & County Code

1C. Location of Proposed Action

**2A. BACKGROUND**

(1) FSA's proposed action is: *(Describe Action Below)*

(2) Describe the site and its present use:

(3) Describe the surrounding land uses; indicate the directions and approximate distances involved. The extent of the surrounding land to be considered depends on the extent of the potential impacts of the project and its related activities:

(4) Will the action involve ground disturbance below the previous level of disturbance or change in land use?

(5) Has another Federal Agency already completed an environmental evaluation for this specific action?

**2B. LISTED CATEX's**

(1) Do any of the "L" CATEX's fully cover the proposed action?

**YES**

**NO**



If "YES", record the assigned code for the applicable "L" Categorical Exclusion:

(2) Are there extraordinary circumstances, as listed in 1-EQ Paragraph 25, triggered?



**IF ITEM 2B1 IS ANSWERED 'YES', AND ITEM 2B2 IS ANSWERED "NO", PROCEED TO ITEM 16.**

**2C. SUPPORTED CATEX's**

Do any of the "S" CATEX's fully cover the proposed action?  
*(If operation is a medium or large CAFOs see Instructions)*

**YES**

**NO**



If "YES", record the assigned code for the applicable "S" Categorical Exclusion:

| <b>3. REQUIRED REVIEW</b>  |   |   |
|--|---|---|
| 3A. Date of Site Visit:  |   |   |
| For the below listed land uses or environmental resources, check the box as appropriate in Column (1) to the right to indicate the resources that are present on the site(s) of the proposed action or within the action's area of environmental impact, such as the areas adjacent to the proposed site(s). Check the box as appropriate in Column (2) to the right to indicate land uses and environmental resources which may potentially be adversely impacted.  | (1)<br>Check if the resource is located within the area of potential effect | (2)<br>Is there potential to adversely impact the resource? |
| 3B. Listed Endangered and Threatened Species or critical habitat.<br><br><b>Attach IPaC map to this form.</b><br><br>If any box is checked, then consult with the U.S. Fish and Wildlife and/or National Marine Fisheries Service, as applicable, to ensure that the proposed action is not likely to adversely affect a listed species or destroy or modify its "critical habitat" in accordance with the Endangered Species Act.   | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3C. Cultural Resources (Section 106 Compliance) Is the action one that may impact a Cultural Resource per 1-EQ Subparagraph 43 A?<br><br>YES <input type="checkbox"/> NO <input type="checkbox"/><br><br>If "YES", complete the check boxes in Column (1) & (2) to the right and attach the following:<br><br>(1) Consultation with known cultural resources (check National Register, State archaeological site files, and owner discussions)<br><br>(2) Consultation with SHPO, THPO and/or Indian Tribes, as appropriate, to determine if further consultation required (needed identification surveys) | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3D. Coastal Barrier in Coastal Barrier Resources System  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3E. Approved Coastal Zone Management Area  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3F. Wilderness   | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3G. Wild and Scenic River, or listed on the National Rivers Inventory  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3H. National Natural Landmark  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3I. Sole Source Aquifer Recharge Area (Designated by Environmental Protection Agency)  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3J. Floodplains – Flood Map Panel # _____<br><br>For actions with disturbances or activities to occur within a floodplain, attach applicable floodplain development permit, elevation surveys, and maps, if available.   | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
| 3K. Wetlands<br><br>(1) Does the proposed action involve ground disturbance, livestock or nutrient waste, or have other potential to adversely impact a wetland?<br><br>If "YES", proceed to Item 3K(2) below. If "NO" proceed to Item 3L.<br><br>(2) Is there a NRCS CPA-026e, United States Army Corps of Engineers, and/or State wetland determination on file or available based on the current AD-1026?<br><br>If "YES", attach determination (including any USACE or State permits).<br><br>If "NO", and a determination is not available, attach completed FSA-858.                                 | <b>YES</b>  | <b>NO</b>   |
|  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |
|  | <input type="checkbox"/>  | <input type="checkbox"/>                                    |

| <b>3. REQUIRED REVIEW CONT.</b>  | <b>YES</b>               | <b>NO</b>                |
|--|--------------------------|--------------------------|
| <p><b>3L. SOILS (&amp; HEL)</b></p> <p>(1) Is there Highly Erodible Land present on the farm property?</p> <p>If "YES", attach Producer Farm Data Report, Producer Subsidiary Screen print and/or NRCS CPA-026e.</p> <p>(2) Is there potential to adversely impact previously undisturbed soil? [Ground disturbance below the "plow zone" or previously disturbed area(s)]</p> <p>If "YES", see Items required under Item 4A and 4B.</p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>4. WATER QUALITY</b></p> <p>A. Does the action have the potential to adversely affect surface or ground water quality?</p> <p>If "YES", attach as Exhibit 4 a discussion of impacts on water quality and include copies of:</p> <ul style="list-style-type: none"> <li>• Storm Water Pollution Prevention Plan and/or permit required for construction projects</li> <li>• National Pollutant Discharge Elimination System permits and/or nutrient or animal waste plans required for livestock operations</li> <li>• Clean Water Act, USACE, or State water quality permits required</li> <li>• State or County well or water use permits</li> </ul> <p>B. Will the proposed action impact the quality of surface or ground water?</p> <p>If "YES", attach a discussion of any impacts to surface or ground water and supporting documentation.</p> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>5. AIR QUALITY</b></p> <p>Will the proposed action produce air emissions or odors that are regulated by any Federal, State, or local laws or standards?</p> <p>If "YES", attach a discussion of any impacts to air quality and copies of any permits required.</p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>6. NOISE</b></p> <p>Will the proposed action result in permanent increases in noise?</p> <p>If "YES", attach a discussion of any noise impacts.</p>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>7. IMPORTANT LAND RESOURCES</b></p> <p>A. Will the proposed action result in the conversion of prime and or unique farmland, prime forest land, or prime rangeland to a nonagricultural use?</p> <p>B. Is the action consistent with local and state zoning requirements?</p> <p>If "YES", list the zoning:</p>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>8. SOCIOECONOMIC IMPACTS AND ENVIRONMENTAL JUSTICE</b></p> <p>A. Will the proposed action cause any adverse human health or environmental effects to minority or low income communities as defined in the Executive Order 12898, "Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations"?</p> <p>B. Will the proposed action have any negative impacts on the local social and economic conditions?</p> <p>If "YES", attach a discussion of any adverse effects.</p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>9. STATE ENVIRONMENTAL POLICY ACT</b></p> <p>Is the proposed action subject to a State SEPA?</p> <p>If "YES", attach a discussion of the results of compliance with these requirements.</p>  | <input type="checkbox"/> | <input type="checkbox"/> |

|   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| <p><b>10. PUBLIC REACTION</b></p> <p>Have there been any negative reactions from the public related to the proposed action or similarly situated actions?</p> <p>If "YES", attach a discussion of any associated comments and related correspondence.</p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>11. CUMULATIVE IMPACTS</b></p> <p>Are there any cumulative impacts resulting from the proposed action?</p> <p>If "YES", attach a discussion of the cumulative impacts of this action and the related activities. Give particular attention to land use changes and air and water quality impacts.</p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>12. ALTERNATIVE AND MITIGATION</b></p> <p>A. Did the plan, as submitted, include alternatives and/or mitigation?</p> <p>B. Will alternative or other mitigation measures have to be considered?</p> <p>If "YES", to either question, attach a discussion of the feasibility of alternatives and or any measures which will be required to avoid or mitigate the action and their environmental impacts.</p> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p><b>13. COMMENTS – Attached additional pages as needed.</b></p>   |                          |                          |

| <b>14. CHECKLIST</b>   |                          |                          |  |                          |                          |
|--|--------------------------|--------------------------|--|--------------------------|--------------------------|
| <b>A. Permits &amp; Consultations</b>  |                          |                          | <b>B. Forms and Notices</b>  |                          |                          |
|  | Required                 | Not Required             |  | Required                 | Not Required             |
| Army Corps of Engineers Sec. 404 and/or 401 Wetland Permit                                 | <input type="checkbox"/> | <input type="checkbox"/> | Form FSA-851, Environmental Risk Survey (only complete for real estate security) | <input type="checkbox"/> | <input type="checkbox"/> |
| National Pollutant Discharge Elimination System (NPDES) Permit                             | <input type="checkbox"/> | <input type="checkbox"/> | Form NRCS CPA-026e, HEL and WC Determination                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| Floodplain Development Permit  | <input type="checkbox"/> | <input type="checkbox"/> | Form FSA-858, Determining If A Wetland May Be Present                            | <input type="checkbox"/> | <input type="checkbox"/> |
| Concentrated Animal Feeding Operation (CAFO) Permit  | <input type="checkbox"/> | <input type="checkbox"/> | Public Notice for Floodplains as required by section 2(a)(4) of EO 11988         | <input type="checkbox"/> | <input type="checkbox"/> |
| Storm Water Pollution Prevention Plan (SWPPP) Permit                                       | <input type="checkbox"/> | <input type="checkbox"/> | Public Notice for Wetlands as required by EO 11990                               | <input type="checkbox"/> | <input type="checkbox"/> |
| USFWS and/or NMFS consultation for Endangered and Threatened, Species or critical habitats | <input type="checkbox"/> | <input type="checkbox"/> | <b>C. Maps, Photos and Surveys</b>   |                          |                          |
|  |                          |                          | Location and Aerial Maps   | <input type="checkbox"/> | <input type="checkbox"/> |
|  |                          |                          | Topo Maps  | <input type="checkbox"/> | <input type="checkbox"/> |
| State Historic Preservation Officer consultation   | <input type="checkbox"/> | <input type="checkbox"/> | Site Photos  | <input type="checkbox"/> | <input type="checkbox"/> |
|  |                          |                          | Soil Survey  | <input type="checkbox"/> | <input type="checkbox"/> |
| Tribal Historic Preservation Officer(s) consultation                                       | <input type="checkbox"/> | <input type="checkbox"/> | Applicable Protected Resources Maps  | <input type="checkbox"/> | <input type="checkbox"/> |

**NOTE:** Other permits, forms, maps, surveys and letters may be required and should be attached, as applicable. All permits, forms, maps, surveys and letters should be attached as exhibits corresponding to their appropriate section of this form.

**15. FINDING**

I have reviewed and considered the types and degrees of adverse environmental impacts identified by this evaluation. I have also analyzed the proposal for its consistency with FSA environmental policies implementing the requirements of the National Environmental Policy Act and have considered the potential benefits of the proposal. Based upon this consideration and balancing of these factors, I recommend one of the following:

- A. This proposed action triggers no extraordinary circumstances. There will be no adverse impacts to the human environment as a result of this proposed action or any adverse effects, either individually or cumulatively. The action can be considered as categorically excluded per 7 CFR Part 799.30. Neither an Environmental Assessment or Environmental Impact Statement will be required. The project is recommended for approval.
- B. An Environmental Assessment should be completed to provide further and more complete analysis of any adverse impacts and approval of the action must be delayed pending the outcome of the assessment.
- C. An Environmental Impact Statement should be completed to provide further and more complete analysis of any adverse impacts and approval of the action must be delayed pending the outcome of the assessment.

**16. REQUIRED SIGNATURES:**

|  |   |
|--|---|
| <b>A. NAME OF PREPARER</b>               | <b>B. TITLE OF PREPARER</b>                       |
| <b>C. SIGNATURE OF PREPARER</b>          | <b>D. DATE DOCUMENT WAS PREPARED (MM-DD-YYYY)</b> |
| <b>E. NAME OF APPROVAL OFFICIAL</b>      | <b>F. TITLE OF APPROVAL OFFICIAL</b>              |
| <b>G. SIGNATURE OF APPROVAL OFFICIAL</b> | <b>H. DATE OF APPROVAL SIGNATURE (MM-DD-YYYY)</b> |

*In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.*

*Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.*

*To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.*