

LAND USE

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| Acres requested: | Number of pastures requested: |
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Special fencing requested:

Date fencing will be needed (if not the start date):

Forage requirements for trial:

Special species, herbicides, rates and target dates (should have 3-5 day window to cover weather changes):

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| Fertilization Type: | Rate per: |
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Target dates to be applied (should use same window as above):

Type of equipment to apply fertilizer:

How many applications of fertilizer, herbicides etc. will be applied:

What intervals:

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| Tillage requirements: | Target dates: |
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Has this project been approved by IACUC?

NATURE OF TRIAL

How animals will be disposed of after trial (if applies):

Infectious agent used:

Biohazardous substances used:

FACILITIES USE

Type of facilities:

Dates needed:

Special equipment needed:

Special personnel needed:

SIGNATURES:

| | |
|---|--|
| PI Signature and Date | Department Head Signature and Date |
| PI Signature and Date | Department Head Signature and Date |
| Facility Coordinator, Signature and Date | Associate Director, MAFES Operations Signature and Date |