**Riparian Planting Plan**

*All Ecology Grant Recipients are required to submit a riparian planting plan to the Ecology Project Manager whenever the project involves any planting to be reimbursed completely, or in part, with Ecology funding or when the planting costs are match for Ecology funding.*

*When planting is to occur at multiple sites as part of a single agreement, the Recipient must submit individual riparian planting plans for each site. The Recipient can submit an alternative plan in lieu of this template, as long as it contains all elements described herein. In the case of match projects, planting plans developed by collaborating entities are also acceptable.*

*All restoration activities must be consistent with current* [*NRCS Field Office Technical Guide (FOTG) Specifications*](https://efotg.sc.egov.usda.gov/#/) *or the* [*Stream Habitat Restoration Guidelines*](http://wdfw.wa.gov/publications/01374/wdfw01374.pdf)*.*

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| **AGREEMENT / RECIPIENT INFORMATION** | |
| Grant Number: | Grant Recipient: |
| Project Manager / Contact: | |
| **PROJECT INFORMATION** | |
| Property / Site Name: | Implementation Target Date: |
| Closest Water Body and Type: | |

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| **PROJECT LOCATION** |
| *Briefly describe location. Include* [*lat / long*](http://www.latlong.net/)*, Township/Range/Section, river mile, and any other landmarks or coordinates available.* |
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| **PROJECT / SITE DESCRIPTION** |
| *Discuss historic condition, site potential, plant communities, and stream condition. Also, discuss water quality problems and causes, current condition, limiting factors, etc.* |
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| **RESTORATION GOALS** |
| *What are the goals of your restoration and planting efforts? This may include water quality goals, fish/wildlife goals, and others.* |
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| **GENERAL DESCRIPTION OF PLANTING** |
| *Discuss how the site should look after planting. How will the plants be distributed across the project site? Will they be evenly distributed or planted in groups? Are you planting a diversity of trees, shrubs, forbs, and grasses, or are there limitations to what you are planting and why?* |
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| **PROJECT SIZE** |
| *What is the size of the project area (planted, treated, enhanced, and/or protected)? Please provide all of these metrics if you can:* Acres:       Square Feet:       Stream Feet: |
| *1 or both sides of stream?* One:       Both:       Other: |

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| **PLANTING SPECIES AND TYPE** |
| *List each species (common or latin name), type of planting, and number (of each species, or combination of species if unknown). We understand that this may be an estimate only and species composition may change, as your understanding of the site conditions increases. Copy and paste more lines as needed.* |
| Species:        Cuttings  Bare root  Pots Pot Size:       gallon Amount: |
| Species:        Cuttings  Bare root  Pots Pot Size:       gallon Amount: |
| Species:        Cuttings  Bare root  Pots Pot Size:       gallon Amount: |
| Species:        Cuttings  Bare root  Pots Pot Size:       gallon Amount: |
| Species:        Cuttings  Bare root  Pots Pot Size:       gallon Amount: |
| *Who will be installing the plants (list all that apply)?* |
| Our Staff  WCC Crews  Volunteers  Other: |
| *Where will you get your plant material?*  Private nursery  Organizational owned greenhouse or nursery  Live cuttings gathered within watershed  Other:  *Please describe further:* |

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| **NOXIOUS WEED MANAGEMENT** |
| *Describe the noxious weeds present on the site, which species are of most concern, which species will be treated / managed, and what pre planting and post planting treatment / management you are planning.* |
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| **PLANTING SITE PREPARATION** |
| *Describe how you will prep the site for planting. Include weed control, mulching, soil amenities, deer or livestock exclusion fencing, or any other site prep conducted before or during the planting.* |
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| **PLANTING SITE MAINTENANCE** |
| *Describe how you will maintain plants during the life of the agreement. Discuss browse protection, mortality replacement, or any other methods you will use to increase survival. Also, will plants need / receive maintenance after the project period? Why or why not? How long?* |
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| **IRRIGATION** |
| *Will your plantings be given supplemental irrigation?*  Yes  No |
| *If not, why not?* |
| *If yes, please answer the remaining questions. If you cannot answer one or more of these questions, or think you may need a temporary water right for irrigation, please contact the Project Manager or Water Resources Customer Service Line (Ecology, CRO) at 509-575-2597.* |
| *How long do you intend to irrigate the plants (months per year and number of years)?* |
| *How will you irrigate the plantings?*  With On Site Ground Water  With On Site Surface Water  Transporting It In From Another Location. *From where?*  Other (*please describe*): |
| *Will you be irrigating a total of ½ acre or less?*  Yes  No, more than ½ acre  Not Sure |
| *Is the project within the ‘place of use’ of a water right?*  Yes  No  Not Sure |
| *Do you need a temporary water right permit4?*  Yes  No  Not Sure |
| *If yes, have you already obtained one?*  Yes  No, but have applied  No, and I haven’t yet applied |

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| **PLANTING SITE MONITORING5** |
| *What is your planting goal at the end of the project period?* |
| % survival       Density Other: |
| *How was your plant goal determined? Please describe.* |
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| *How will you measure this goal? Please describe. Make sure the monitoring method is suitable to determine whether you achieved your planting goal.* |
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| *What is your timeline for monitoring or project tracking? How frequently will you visit and for how long?* |
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| *What other monitoring, short and long term, will you do to determine whether you have achieved your planting goals? Please describe.* |
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| **ENVIRONMENTAL MONITORING** |
| *Are you doing any water quality (ground or surface) or other environmental data collection?* |
| Yes6  No *If yes, please describe:* |
| If yes, are you developing a QAPP for this data collection?  Yes  No  N/A |
| If yes, what is the status?  Approved by Ecology  In development  Not yet initiated |

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| **PLANTING SITE RIPARIAN BUFFER** |
| *What will be the minimum width of the buffer?* |
| 35 ft.  50 ft.  75 ft.  100 ft.  Other: |
| *How has the Ordinary High Water Mark (OHWM)7 been determined for this site?* |
|  |
| *If any or all of the project site will not meet the minimum required buffer size8, please describe why:* |
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| **LIVESTOCK** |
| *Are livestock present or near?*   Yes  No *If yes, what type?* |
| *Will there be a livestock exclusion fence installed?*  Yes  No |
| *If yes, describe the fencing1 and who will install and maintain it:* |
| *If no, why?*  No livestock present Livestock cannot access plants  Fence already in place |
| Other: |

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| **CULTURAL RESOURCES REVIEW & CONSIDERATIONS** |
| *Have you initiated a 05-05 / 106 cultural resources review9?*  Yes  No |
| *If no, please state when you expect it to be initiated:* |
| *If yes, please describe where it is at in the process:* |
| *Have you developed an Inadvertent Discovery Plan (IDP)?*  Yes  No |
| *Which tribes have an interest in your project area?10* |
| *Have you directly contacted interested tribes or tribal staff about your project?*  No  Yes  *If so, which tribes, who, and when?* |
| *Have you considered how your project can increase cultural value to tribes that use the land that your project is on or near?*  No  Yes  No, but would like to  *If yes, how? (Examples include selecting cultural valuable plant species, not using chemical spray, identifying and protecting rare, native, and/or culturally valuable species already on the site, etc.)* |

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| **CLIMATE CHANGE** |
| *Please discuss how climate change could affect the site (hydrology, temperature, precipitation) and how you have incorporated climate risk into your site selection and planting plan.* |
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| **OTHER** |
| *Provide any additional and important information not covered above.* |
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| **RIPARIAN PLANTING PLAN APPROVAL PAGE** |
| **GRANT NUMBER:** |
| **RECIPIENT NAME:** |
| **PROJECT SITE NAME:** |
| *Once approved by the recipient and the Ecology Project Manager, this document must be signed by both parties before any implementation can begin. Failure to do so could result in the rejection of any related reimbursement request(s).* |

**Approval Signatures**

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Recipient Organization Manager Date

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Recipient Project Manager Date

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Ecology Project Manager Date

**Appendix A. Project Site Map**

*Attach a full-page aerial photo or detailed drawing of the site and adjacent water body. Indicate within map: 1) project boundary, 2) locations of plants and plant species or types, 3) location of exclusion fencing (existing and/or new), 4) existing plant communities, and 5) other BMPs within boundary. Map should include T/R/S lines and numbers and needs to be clear and detailed.*

**Appendix B. Project Site Photos**

*Please attached “before” photos of the project that are representative of the site conditions, problems, and cause of problems, particularly in relation to the vegetation and planting effort.*

**Appendix C. Resources**

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5NRCS paper on creating planting goals and monitoring the results (resource only, not required): <https://www.nrcs.usda.gov/Internet/FSE_DOCUMENTS/stelprdb1044175.pdf>

6Multiple Indicator Monitoring (MIM) of Stream Channels and Streamside vegetation (resource only, not required): <https://www.fs.usda.gov/Internet/FSE_DOCUMENTS/fseprd558332.pdf>.

6May require the development of a QAPP. Discuss with Ecology Project Manager. <https://ecology.wa.gov/About-us/How-we-operate/Scientific-services/Quality-assurance/Quality-assurance-for-NEP-grantees>.

7For information on determining OHWM, see: <https://fortress.wa.gov/ecy/publications/documents/0806001.pdf>.

8Refer to the appropriate Funding Guidelines for buffer size requirements, ask Ecology Program Manager if unsure. <https://ecology.wa.gov/About-us/How-we-operate/Grants-loans/Find-a-grant-or-loan/Water-Quality-Combined-Funding-Program/WQC-funding-cycle>.

9For Ecology cultural resources documents go to <http://www.ecy.wa.gov/programs/wq/funding/Res/EnvRev/EnvRevMain.html>.

10If unknown, contact Liz Ellis, WA Dept. of Ecology, 360-407-6429, [liz.ellis@ecy.wa.gov](mailto:liz.ellis@ecy.wa.gov).