

Accomplishments Worksheets

Project Name _____

Project Number _____ County _____

Date Prepared ____/____/____ (month/day/year)

Project Type *(check all that apply)*

Organization of a Watershed Group *(fill out Sheet A*)*

Watershed Assessments and Development of Restoration and/or Protection Plan
(check all that apply and fill out sheet B)*

AML/AMD

Non-Point Source

Assessment

Development of Restoration Plan

Development of Protection Plan

Implementation of Watershed Restoration and/or Protection Project
(check all that apply and fill out Sheets C, D, E, F, and G)*

AML/AMD

Oil and Gas

Non-Point Source

Restoration

Protection

Demonstration *(fill out Sheet H*)*

Education/Outreach *(fill out Sheet I*)*

*Please fill out all the appropriate information on the sheets corresponding to your project type. Leave blank any sheets or information on the sheets that do not apply to your specific project. If you have any questions call Headwaters RC&D Sinnemahoning Stakeholders Committee at 814-486-9354.

Organization of a Watershed Group

Name of Group _____

Watershed Area _____ Acres

Membership _____ Number

Meetings Held _____ Number Held
_____ Attendance

Mission Defined Yes No

Incorporation Yes _____ Date
 Applied _____ Date
 No

Non-Profit Status Yes _____ Date
 Applied _____ Date
 No

Officers Elected Yes No

Strategic Plan Developed Yes No _____ Date

Newsletter _____ Number Printed

Brochures _____ Number Printed

Webpage _____ Web Address

Other Outreach Describe in Narrative

Describe Activities to date for your organization:

Receiving Stream _____ name/location

Receiving Stream Benefits

<u>Upstream Quality</u>		<u>Downstream Quality</u>	
Before	After	Before	After
Iron _____	_____ mg/L	Iron _____	_____ mg/L
pH _____	_____ S.U.	pH _____	_____ S.U.
Acid _____	_____ mg/L as CaCO ₃	Acid _____	_____ mg/L as CaCO ₃
Alk _____	_____ mg/L as CaCO ₃	Alk _____	_____ mg/L as CaCO ₃
Al _____	_____ mg/L	Al _____	_____ mg/L
Mn _____	_____ mg/L	Mn _____	_____ Mg/L

Sheet C

AMD Treatment	AML	Oil and Gas
<input type="checkbox"/> Anoxic Limestone Drain _____ tons Limestone(LS) <input type="checkbox"/> Successive Alkalinity Producing System (SAP) _____ tons (LS) _____ tons organic matter <input type="checkbox"/> Wetlands _____ aerobic acres _____ anaerobic acres <input type="checkbox"/> Diversion Wells _____ # _____ total LS capacity <input type="checkbox"/> Settling Ponds _____ # _____ capacity (gpm) <input type="checkbox"/> Limestone Channel _____ ft. OLC _____ ft. MOLC <input type="checkbox"/> Limestone Dosing/Dumping _____ tons LS <input type="checkbox"/> Reverse Alkalinity Producing Systems _____ # <input type="checkbox"/> Bactericide Remediation _____ lbs/acre <input type="checkbox"/> Beneficial Use of Dredged Material _____ tons <input type="checkbox"/> Manganese Oxidizing Bacteria Systems _____ # <p style="text-align: center;">Total Treated Flow Rate</p> _____ gpm average _____ gpm high Predicted lifespan of system _____ years Sludge Capacity _____ years Contaminants removed/Contained by system (average) Iron _____ ppd Al _____ ppd Mn _____ ppd Acid _____ ppd Excess Alkalinity added _____ ppd pH change _____ influent _____ effluent	<input type="checkbox"/> Openings Closed _____ # <input type="checkbox"/> High Walls Removed _____ Feet <input type="checkbox"/> Land Remined _____ Acres <input type="checkbox"/> Wildlife Habitat Improved _____ Acres <input type="checkbox"/> Trees Planted _____ # <input type="checkbox"/> Sealing Mine Portals _____ # _____ wet or dry seal <input type="checkbox"/> Revegetation _____ acres <input type="checkbox"/> Grout Injection _____ tons <input type="checkbox"/> Mine Capping _____ acres	Wells Plugged _____ # Total Flow Before _____ gpm Total Flow After _____ gpm <p style="text-align: center;">Contaminants Removed/Prevented</p> Iron _____ (ppd) pounds per day Acidity _____ (ppd) Alkalinity _____ (ppd) Wildlife Habitat Created _____ acres
<p>Describe Activities to Date:</p>		

Name of Project: _____

Non-Point Agricultural

Farmstead/Barnyard

Upland

Streams/Wetlands

Manure Storages:

	Number	Cubic Feet	AEUs
Dairy	_____	_____	_____
Beef	_____	_____	_____
Swine	_____	_____	_____
Poultry	_____	_____	_____
Latitude	_____	Longitude	_____

Barnyard runoff controls:

Built with manure storage _____ number

Built without manure storage _____ number

Curbing _____ feet

Roof Gutters _____ feet

Buffer Strips _____ feet

Other (Describe)

Soil Conservation Plans Developed

On conventional cropland _____ acres

On hayland _____ acres

On pasture _____ acres

Grazing land _____ acres protected

No till _____ acres protected

Cover crops planted _____ acres planted

Nutrient management plans _____ acres

Waterways _____ feet

Diversions/Terraces _____ feet

Pesticide management _____ acres

Wildlife land improved _____ acres

Woodland improved _____ acres

Stream Fencing _____ feet

Stabilized Crossings _____ #

Latitude _____ Longitude _____

Measures on
Separate pages

Sheet D

Describe your implementation activities to date:

Name of Project: _____

Non-Point Other

Stormwater

Other BMP

Streams/Wetlands

Latitude _____

Longitude _____

Measures on separate pages

Extended dry detention basin	_____ number	_____ drainage area
Wet detention pond	_____ number	_____ drainage area
Conversion of dry retention to wet	_____ number	_____ drainage area
Pond-wetland system	_____ number	_____ drainage area
Stormwater wetland	_____ number	_____ drainage area
Sand Filter	_____ number	_____ drainage area
Infiltration Swale	_____ number	_____ drainage area
Porous Pavement	_____ number	_____ drainage area
Roof Water Management	_____ number	_____ drainage area

Sediment Ponds	_____ number
Septic Pumping	_____ number
Home Septic	_____
Denitrification installed	_____ number
Septic systems connected to WWTP POTW	_____ number
Nutrient Management	_____ acres
Dirt/Gravel Road Maintenance	_____ feet
Road Bank Stabilized	_____ ft ²

Operation & Maintenance (describe below)

Other (describe below)

Describe your implementation activities to date: (Advise if your improvements are new construction, replacements, or changes to existing systems)

Sheet E

Streams

Name of Project: _____ **303D Listed** Yes No

Chapter 93 Designation		
<input type="checkbox"/> WWF	<input type="checkbox"/> CWF	<input type="checkbox"/> TSF
<input type="checkbox"/> HQ	<input type="checkbox"/> EV	

Riparian buffers installed _____ length (ft) _____
 avg width (ft) _____ type (trees, shrubs, grasses)
(Report both sides of stream if appropriate)

Latitude _____ Longitude _____

Prior land use where established _____ type

Filter Strips installed _____ length (ft) _____ avg width (ft)

Land use where established _____ type

Stream bank protection with fencing _____ length (ft) _____ avg. width (FT)

Stream bank protection without fencing _____ length (ft) _____ avg. width (FT)

Barerooted plantings _____ type/species (trees, shrubs, grasses)

Container grown plants _____ type/species (trees, shrubs, grasses)

Protected root stock _____ type/species (trees, shrubs, grasses)

Weed control _____ type/species (trees, shrubs, grasses)

Invasive species removed _____ type/species (trees, shrubs, grasses)

Dams removed _____ number _____ length (ft) _____ height (ft)

Fluvial Geomorphology (FGM) _____ (ft)

Stream channel restoration _____ length (ft)

Fish structures _____ number _____ type

Rootwads _____ length

J-hook vanes _____ number

Trash removed _____ tons _____ number of sites

Protection Measures Implemented (describe below)

Please describe activities to date: (include sources of technical assistance)

Sheet F

Wetlands

Existing Site Conditions

Are wetlands present on the site? Yes No

Are any water course(s) affected by the project? Yes No

If present, what are the types and acreages:

Type:	Size:
<input type="checkbox"/> PEM (palustrine emergent)	_____
<input type="checkbox"/> PSS (palustrine scrub/shrub)	_____
<input type="checkbox"/> PFO (palustrine forested)	_____
<input type="checkbox"/> POW (palustrine open water)	_____
Total Size:	_____

If affected, what are the Ch. 93 Classification(s):

WWF (Warm Water Fishery)
 CWF (Cold Water Fishery)
 TSF (Trout Stocks)
 HQ (High Quality)
 EV (Exceptional Value)

What is the contributing drainage area to the wetland project (in acres)?
 _____ acres

What is the predominant land use in the contributing drainage area?

Are prior Converted Wetlands Areas Present? Yes No

Sheet G

Wetland Protection/Restoration/Creation Projects

Hydrogeomorphic Classification of Wetland
 (stream areas are considered riverine):

Existing Wetland Acreage Impacted (0.0):		Acreage Restored or created (0.0):	
Type	Size	Type	Size
<input type="checkbox"/> PEM	_____	<input type="checkbox"/> PEM	_____
<input type="checkbox"/> PSS	_____	<input type="checkbox"/> PSS	_____
<input type="checkbox"/> PFO	_____	<input type="checkbox"/> PFO	_____
<input type="checkbox"/> POW	_____	<input type="checkbox"/> POW	_____

Latitude _____ Longitude _____ Latitude _____ Longitude _____

Enhancement/Functional Gain Projects

Hydrogeomorphic Classification of Wetland
 (stream areas are considered riverine):

Enhancement Activity Type	Size of area affected (0.0)
<input type="checkbox"/> Streambank Fencing	_____
<input type="checkbox"/> Wetland Fencing	_____
<input type="checkbox"/> Exotic/Invasive Sp. Cont	_____
<input type="checkbox"/> Hydrologic Manipulation	_____
<input type="checkbox"/> Other	_____
Other Desc.: _____	

Latitude _____ Longitude _____

Please describe activities to date:

Demonstration Project

Name of project: _____

Type of project _____

Mining Related Yes No

Non-point Related Yes No

Demonstrations Held _____ Number

_____ Attendance

Publicity _____ Number

Newspapers _____ Number

Radio Spots _____ Number

TV Spots _____ Number

Internet _____ Number

Magazine Articles _____ Number

Other _____ Number

Describe activities and technologies developed to date for your demonstration project:

Education Project/Outreach

Schools reached	_____	number
Children reached	_____	number
Adults reached	_____	number
Brochures distributed	_____	number
Newspaper articles	_____	number
Radio/TV spots	_____	number
Magazines	_____	number
Web site hits	_____	number
Training sessions held	_____	number
	_____	attendance
Workshops held	_____	number
	_____	attendance

Describe your efforts to date: