

Forest Practices Compliance Monitoring Form Eastern Washington Type Ns Streams

FPA # _____ Date: _____ Segment ID: _____ WRIA: _____

NOTE: Questions have been worded such that YES = Compliant; NO = Not compliant

Code	RULE	COMPLIANT? (if no, record deviation rating & category)		DEVIATION RATING (L/M/H)		COMMENTS (Additional comments may be added in the space provided at the end of this document)	
		FPA	Rule	FPA	Rule		
6-01.AB02	(1) Stream not under-typed (222-16-031(5))						
6-02.CB07_CC05	(2) If greater than 10% disturbance to ELZ, was there mitigation? (222-30-022(2)(a))					% exposed/no mitigation	

If not compliant, describe the contributing factors in the appropriate category in the table below.

Administrative	
Layout	
Operational	

Additional Comments or Dissenting Opinions

Signatures:

DNR Lead _____ **Date** _____

ECY _____ **Date** _____

Tribe _____ **Date** _____

_____ **Date** _____

_____ **Date** _____

_____ **Date** _____