

# NEVADA CONSERVATION CREDIT SYSTEM

## PRE-FIELD SUBMISSION QUALITY ASSURANCE FORM

This form is intended for use by the SETT to ensure that pre-field submissions for proposed credit and debit projects undergo a consistent Quality Assurance (QA) process. This pre-field QA process is intended to ensure project footprints, map units, and transects provided by certified verifiers are assessed by the SETT following the same process prior to the commitment of significant resources to complete field work.

### SIGNATURE

The pre-field QA process has been completed and the information provided in this form is accurate to the best of my knowledge.

\_\_\_\_\_  
Credit System Administrator Name

\_\_\_\_\_  
Credit System Project Lead

\_\_\_\_\_  
Date of Completion

### QA SUBMISSION STATUS

Please mark the applicable QA submission status below.

\_\_\_\_\_ **Acceptable**  
\_\_\_\_\_ **Requires revisions (describe)**

### PROJECT INFORMATION

Project Name \_\_\_\_\_

County \_\_\_\_\_ State \_\_\_\_\_

WAFWA Zone: \_\_\_\_\_ Biologically Significant Unit: \_\_\_\_\_ Population Management Unit: \_\_\_\_\_

### PROJECT PROPONENT INFORMATION

Project Proponent Name \_\_\_\_\_

### VERIFIER INFORMATION

Verifier Name \_\_\_\_\_

**STOP!** Have they submitted a completed Credit Site Validation Checklist (for Credit Projects only) and been given the green light to become a Credit Project? If not, ensure the Project meets all criteria to be a desired credit project.

### QUALITY ASSURANCE CHECKLIST

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1. For credit projects, confirm that all lands within map units appear to be private lands in the control of the credit producer for private lands credit projects or vice versa. Assess whether the project footprint and map units are the same as previously received information, if applicable. If changes have been made, please note why.

Confirm with the [Secretary of State](#) that the Project Proponent has signatory authority, and if not, require proof they do.

INITIAL WHEN COMPLETE:

Completion status:	_____
Date completed:	_____
Notes:	_____
Action items:	Description: _____
	Status: _____

2. For debit projects, confirm that the direct and indirect disturbance areas are delineated as expected and that map units make up all sage grouse management category habitat in these areas. Assess whether the project footprint and map units are the same as previously received information, if applicable. If changes have been made, please note why.

INITIAL WHEN COMPLETE:

Completion status:	_____
Date completed:	_____
Notes:	_____
Action items:	Description: _____
	Status: _____

3. Confirm that all potential meadows, including stringer meadows, springs and seeps, are characterized as meadow and delineated as accurately as possible within the project area. Further assessment in the field will assess the accuracy of the meadow characterization and the delineation, prior to sampling.

INITIAL WHEN COMPLETE:

Completion status:	_____
Date completed:	_____
Notes:	_____
Action items:	Description: _____
	Status: _____

4. Confirm the presence or absence of any existing debit or credit projects in the analysis area of the project. Make note and work with the corresponding SETT Lead on any impacts due to presence.

INITIAL WHEN COMPLETE:

Completion status: \_\_\_\_\_  
 Date completed: \_\_\_\_\_  
 Notes: \_\_\_\_\_  
 Action items: \_\_\_\_\_  
                           Description: \_\_\_\_\_  
                           Status: \_\_\_\_\_

5. Assess the aerial imagery, ESDs, DRGs, previous fires, slopes, aspects, and other terrain characteristics to understand map unit delineations and decisions to split or lump specific areas. Are heterogeneous meadow map units split? How are areas planned for treatments delineated? Are areas with significantly more sagebrush cover lumped with cheat grass dominated areas? Please make descriptive notes on delineations and any issues from your perspective. Confirm all map units are divided by WAFWA zone at minimum. No map unit should exist in two different WAFWA zones.

INITIAL WHEN COMPLETE:

Completion status: \_\_\_\_\_  
 Date completed: \_\_\_\_\_  
 Notes: \_\_\_\_\_  
 Action items: \_\_\_\_\_  
                           Description: \_\_\_\_\_  
                           Status: \_\_\_\_\_

6. Review the map units dissolved attribute table to ensure everything looks as it should. Provide comments as appropriate.

INITIAL WHEN COMPLETE:

Completion status: \_\_\_\_\_  
 Date completed: \_\_\_\_\_  
 Notes: \_\_\_\_\_  
 Action items: \_\_\_\_\_  
                           Description: \_\_\_\_\_  
                           Status: \_\_\_\_\_

7. Confirm that the number of transects planned to be sampled follows the guidelines in the User's Guide. **Provide the verifier with generated and finalized transects.**

*Sufficient sampling should be commensurate with acreage and diversity within each map unit size category.*

INITIAL WHEN COMPLETE:

Completion status: \_\_\_\_\_

Date completed: \_\_\_\_\_

Notes: \_\_\_\_\_

Action items: \_\_\_\_\_

Description: \_\_\_\_\_

Status: \_\_\_\_\_

8. For credit projects, confirm that the following forms have been received prior to allowing field work to move forward.

INITIAL WHEN COMPLETE:

Pre-Field Work Submittal Cover Page: \_\_\_\_\_

Verifier Conflict of Interest Form: \_\_\_\_\_

Credit Site Validation Checklist with Signed Waiver and Other Requested Information Attached: \_\_\_\_\_

A geodatabase with GIS shapefiles identified by the appropriate naming conventions for the applicable project area, analysis area boundaries, habitat categories, map units, proposed PFC reaches, and final transect numbers: \_\_\_\_\_

9. For debit projects, confirm that the following forms have been received prior to allowing field work to move forward.

INITIAL WHEN COMPLETE:

Pre-Field Work Submittal Cover Page: \_\_\_\_\_

Verifier Conflict of Interest Form: \_\_\_\_\_

Debit Project Review Form with Signed Waiver and Other Requested Information Attached: \_\_\_\_\_

A geodatabase with GIS shapefiles identified by the appropriate naming conventions for the applicable project area, analysis area boundaries, habitat categories, map units, and final transect numbers: \_\_\_\_\_

**ISSUE TRACKING AND COMMENTS**

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List and describe any comments, issues or problems encountered during the Quality Assurance process and changes made from the original submission to ensure a complete and acceptable pre-field submission.

ISSUE DESCRIPTION	ISSUE STATUS/RESOLUTION