

**CORRECTIVE ACTION PLAN COVERING NON-COMPLIANCE WITH
PROVISIONS OF CONTRACT**

A. **STATE:** Indiana B. **COUNTY:** _____ C. **CONTRACT NO.:** _____

D. **PARTICIPANT(S):**

E. **DETAILS OF NON-COMPLIANCE:** Involuntary Voluntary

Comments

F. **DID PARTICIPANT(S) APPLY OR COMMENCE A PRACTICE WITHIN THE FIRST
12 MONTHS AFTER CONTRACT APPROVAL?**

- Yes.
- No. State Conservationist granted waiver; however participant did not comply within extension limits provided by the waiver.
- No. State Conservationist did not provide a waiver.

G. **CONTRACT REVIEWS CONDUCTED ON:** _____

H. **NATURE AND EFFECT OF NON-COMPLIANCE WITH PROVISIONS OF
CONTRACT:**

- Does Not Warrant Termination of the Contract of Agreement. Mutually agreed-upon actions and a reasonable timeframe have been established for the participant(s) to comply with the contract provision. **Provide details in Section I.**
- Warrants Termination of the Contract or Agreement.
- Participant Requests Contract Cancellation (participants request attached.)

I. ACTIONS TO REMEDY/TIMEFRAME

Note: Contract modifications must adhere to policy, be fully documented, and indicate whether the action was due to voluntary/involuntary actions on the part of the participant.

Practice	Original Planned Date	Revised Planned Date

Comments:

J. CONSEQUENCES OF FAILURE TO REMEDY. Adverse actions/consequences include, but are not limited to: (review with Participant, check each box.)

- Contract termination
- Forfeiture of all rights to any payments under the contract
- Recovery of all previously paid financial assistance
- Assessment of liquidated damages if terminated
- Assessment of late payment interest on delinquent debts

K. NRCS TECHNICAL ASSISTANCE REQUIRED: _____

L. AVAILABILITY OF TECHNICAL SERVICE PROVIDERS DISCUSSED WITH PARTICIPANT.

- Yes No

ACCEPTANCE BY NRCS:

District Conservationist Signature

Date

ACCEPTANCE OF PARTICIPANT(S):

The undersigned agrees to consequences of failure to remedy set out in Section J. of this form.

Participant

Date

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