Cover Crop Local Cost Share Program

Program requirements:
1. The purpose of the program is to protect areas prone to soil erosion.
2. A farm serial number and an Agriculture Water Quality Plan must be in place prior to starting the project and before any funds will be awarded.
3. This is a cost share program (75% of project cost reimbursed up to $500). Participant contributions can be in the form of purchased materials and services, equipment rental, and labor.
4. Before funds are reimbursed, applicant must:
   - furnish the conservation district with receipts or other documentation to substantiate the expenses for which reimbursement is being sought.
   - receipts dated before approval letter will NOT be considered for reimbursement.
5. Projects should be completed within a year of approval.
6. Limit of one application per farm serial number per fiscal year (July 1 thru June 30).

Applications will be accepted and evaluated as they are received. Projects will not be retroactive of the approval letter date. Funds for this cost share program are made available through the Campbell County Conservation District.

Submit applications to:
Campbell County Conservation District
8350 East Main Street
Alexandria, KY 41001
Phone: 859-635-9587
E-mail: CCCD@campbellkyconservation.org
Web site: www.campbellkyconservation.org
Cover Crop Local Cost Share Program Application

Name _________________________________________________
Mailing Address__________________________________________
City___________________________________________________
State__________________   Zip Code_______________________
Phone (Home)__________________________________________         (Cell)_________________________________________________
E-mail:________________________________________________
Farm Serial Number _____________________________________

1. Do you own the land on which the project will be implemented?
   YES _____     NO   _____
If no, please explain:___________________________________________
_________________________________________________________________

2. Location of property (if different than mailing address listed above)
   Address:________________________________
   City: _____________________  State:  KY   Zip Code: __________ _

3. How many acres will be sown for cover crop? ______________acres

4. Type of seed used?  Wheat ____  Rye _____  Other ___________ _____

5. Previous crop grown? (ex. Tobacco, silage, corn, vegetable row crop, etc.)
   ___________________________________________________________
   ___________________________________________________________

6. Do you have an existing Agriculture Water Quality Plan?
   YES ____  (If yes, submit a copy with your application)
   NO ____  (If no, your application will not be considered.) Use this link to
   complete an Agriculture Water Quality Plan.)
   https://dep.gateway.ky.gov/eForms/Account/Home.aspx

7. Are you a member of the Kentucky Agriculture District Program?
   YES ____   NO    _____

8. Estimated cost of project ________________________________

Signature ____________________________________ Date ___________
Property owner signature ________________________Date ___________
(if different)

**Applications must include the property owner.

Please contact our office for assistance with your application or project.