Warren County Conservation District
Backyard Conservation Program

Participant Report & Certification

Individuals must complete all relevant questions, provide photos, and include required documentation on this report **before** receiving cost-share reimbursement funds.

Participant Information

1-3 should match the information provided on your approved application.

1. **Name:** _____
2. **Phone:** _____
3. **Mailing Address:** _____
4. **Ever received cost-share funds?** YES NO
5. **Did you complete the project within 90 days?** YES NO
6. **Would this investment have happened without WCCD funding?**
   a. __ Yes
   b. __ No

Was this approved prior to purchases? YES NO

Approved Investment(s): _____

☛ ***Submit this form with required documentation: photos, receipts, verifying documentation, etc.*** ☚
Cost-share reimbursement shall not occur without submission of this report & documents.

On the following pages, complete only the sections related to the incentive area(s) for which cost-share reimbursement is being requested and on the last page clarify item, cost, and where from (i.e. rain barrel, $100, Lowes).

Best Management Practice

Mark each best management (BMP) for which cost-share reimbursement is being requested and complete the information requested for that section.

___ **BACKYARD HABITAT (1)**

1. **Describe cost-share reimbursement practice(s) –** *ex. Wildlife habitat, polinator*
   _____
2. **List what native plants were used:** _____
   _____
   _____
   _____
3. **List other purchases:** _____
   _____
4. **Where did you purchase plants/materials:** _____
   _____

5. **How did you plant and are they in correct growing requirements?**

   _____

6. **Did you receive consultation? From who?** _____
7. **What minimum requirements did you meet from the NWF checklist?**

   _____

   _____

   _____

   _____

8. **Total Project Cost for this BMP:** _____

___ **BAT HOUSES (2)**

1. **Did you follow the placement guidelines?** YES NO
   A. How close is a freshwater source? _____
   B. How far is the house from trees? _____
   C. What compartment size is it? _____
   D. How big is the roosting chamber? _____
   E. Do you have pole guards? _____
   F. Where is it mounted? _____
2. **Where did you purchase the house?** _____
3. **Will you preform necessary maintenance?** YES NO
4. **List purchased items:** _____

   _____

5. **Total Project Cost for this BMP:** _____

___ **BEGINNING BEEKEEPING (3)**

1. **Provide KSU Beginning Beekeeper program verification.**
2. **Provide verification of Warren County Beekeepers.**
3. **When did you complete 6 Beekeeping CEUs?** _____
4. **Where did you purchase nucs/hives from local beekeepers?** _____
5. **Did you purchase queens with varroa mite-resistance genetics?** YES NO
6. **Did you review and understand the beekeeping publication?** YES NO
7. **List all purchases:** _____

   _____

   _____

8. **Total Project Cost for this BMP:** _____

___ **COMPOSTING (4)**

1. **Where did you purchase your bin?** _____
2. **Did you review the composting publication?** YES NO
3. **Total Project Cost for this BMP:** _____

___ **INVASIVE SPECIES REMOVAL (5)**

1. **What invasive species did you remove?** _____
2. **What method did you use? (If chemical, list what you used.)** _____

   _____

3. **How big was the area?** _____
4. **How long did the removal take?** _____
5. **If you used professional services, what company did you hire?** _____
6. **Was a field visit performed?** YES NO

A. When? _____

7. **Did you submit invasive ID and photo(s)?** YES NO
8. **Did you submit measurement of area?** YES NO
9. **Were all invasives sucessfully eradicated?** YES NO
10. **Will you preform as needed maintenance?** YES NO
11. **Total Project Cost for this BMP:** _____

___ **NATIVE TREE PLANTING (6)**

1. **What native trees did you plant?**
   _____
   _____
   _____
2. **Where did you purchase?** _____
3. **Total Project Cost for this BMP:** _____

___ **PRUPLE MARTIN HOUSE (7)**

6. **Did you follow the placement guidelines?** YES NO
   A. How far is the house from human residences? _____
   B. How far is the house from trees? _____
   C. What compartment size is it? _____
   D. How big are the entrance holes? _____
   E. Do you have pole guards? _____
   F. Do you have predator guards? _____

A. **Where did you purchase the house?** _____

B. **Will you preform necessary maintenance?** YES NO

C. **Total Project Cost for this BMP:** _____

___ **RAIN BARREL (8)**

1. **Where did you purchase your barrel?** _____
2. **Did you review the rain barrel publications?** YES NO
3. **Total Project Cost for this BMP:** _____

___ **RAISED GARDEN BED (9)**

1. **Where did you purchase the prefab beds?** _____
2. **If you built them:**
   A. What materials did you use: _____
   B. What's the deminensions: _____
3. **Did you review publications?** YES NO
4. **Total Project Cost for this BMP:** _____

___ **OTHER (10)**

1. **Describe cost-share reimbursement practice(s):** _____
   _____
2. **Total Project Cost for this BMP:** _____

Itemized Expenditures

PC*	ITEM/QUANTITY	COST	RETAILER
4	Compost bin, 2	$115.26	Home Depot
6	Flowering Dogwood, 2	$207.76	Mammoth Cave Transplants

**PC-Project Code (i.e. 1) You find this in the incentive area information.*
For plant purchases, list all plant species purchased.

Participant Certification

I hereby certify that I have read all of the requirements for the WCCD BYCP cost-share for which reimbursement is being requested and confirm I followed the guidelines established. I understand that I am required to provide all of the above information prior to receiving cost-share.

Signature:	
Name Printed:	Date: