



Soil and Water Conservation District Conservation Assistance Program Agreement Spencer, Warrick and Dubois Counties



Funding for this program is provided by Clean Water Indiana and individual SWCD funds.

Landowner/Operator Information

Name or corporation		Mailing address	
Home Phone		City, State	Zip
Cell Phone	Email	Best way to contact you?	

To what name or entity should a check be written if your application is selected for funding? _____

What practices are you interested in applying to your land? Please check all that apply.

- | | |
|--|--------------------------|
| Pasture Interseeding | <input type="checkbox"/> |
| Heavy Use Area Protection (HUAP) | <input type="checkbox"/> |
| Watering facilities (including livestock pipeline) | <input type="checkbox"/> |
| Internal Fencing | <input type="checkbox"/> |
| Cover Crops | <input type="checkbox"/> |

Demographic Information:

How long have you been farming? _____

Have you ever worked with the SWCD before? Yes / No

Do you want to fence out a body of water? Yes / No

Sex: M / F Ethnicity: _____

Current Crop	Field #	Tract number, Farm Number	Number of acres
Livestock Type	Number of Head	Acres of pasture	

Including your tract and farm numbers is essential for ranking your application according to the grant guidelines.

Total Acres

Please include tract map(s) from Farm Service Agency, if possible

Continued

Landowner Agreement

1. The landowner/operator agrees to implement practices according to the NRCS Specifications attached to this form. **** Any seeding outside of these windows will not be able to be paid ****
 2. The landowner/operator certifies that he/she has control of the above tracts, can provide Farm Data Report if necessary.
 3. The landowner/operator releases the SWCD or sponsor from any and all liability.
 4. The landowner/operator accepts any liability, financial or otherwise, in installing the practices above.
 5. The landowner/operator will complete the practices in the time frame allowed by grant standards.
 6. The landowner must allow SWCD personnel to check practices.
 7. The landowner/operator will provide proof of completion through receipts, photos, seed tags and field visit(s).
 8. **Applications will be accepted on a rolling basis** and will be ranked and approved by the SWCD by April 15th, July 15th, and September 15th
 9. **Cost share varies with the practice.**
 10. If application is approved, the owner/operator will be notified and, payment will be made after receipts are received. Receipts must be submitted by November 15th.
 11. A W-9 form must be submitted
 12. Cover crops can be aerial applied, broadcast or drilled but landowner/operator must use seed mix prescribed by the SWCD and the NRCS District Conservationist
- All practices must be completed in accordance to NRCS Standards and Specifications to be eligible for payment

I, _____ a landowner/operator in Warrick County, Indiana hereby make the application to the Soil and Water Conservation District for assistance to install/apply the conservation practice(s) listed above.

listed above.

Landowner's Signature

Signature: _____ Date: _____

Office Use Only

Date submitted: _____

Approved: Yes:_____ No:_____

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