

Central Assiniboine Watershed District

205 Elizabeth Avenue East P.O. Box 160 Baldur, MB ROK 0B0

Name of Applicant: _	Landowner Name:		
	iling Address: Phone:		
Email Address:	Municipality:		
•	onmental Farm Plan? Yes No No AT THE APPLICATION HAS BEEN SIGNED BEFORE SUBMITTING IT*		
PROJECT INFORMAT	ION		
Check Applicable Category	Uplands Activities (5-10 Year Agreements)		
	Rotational Grazing (Cross Fencing, Watering system, Well, Pipeline)		
	Land Conversion (Seeding perennial cover down on annual cropland)		
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ROTATIONAL GRA			
Quarter Sections:	AZING		
Quarter Sections: Livestock Species:	AZING		
Quarter Sections: Livestock Species: Number of Head:	AZING		
Quarter Sections: Livestock Species: Number of Head: Check All that Apply	AZING		
Quarter Sections: Livestock Species: Number of Head: Check All that Apply	AZING atering System Well Pipeline		
Quarter Sections: Livestock Species: Number of Head: Check All that Apply Cross Fence Ward If Applicable Length of Fen	AZING atering System Well Pipeline		
Quarter Sections: Livestock Species: Number of Head: Check All that Apply Cross Fence Wa If Applicable Length of Fence Type of Fence	AZING atering System Well Pipeline ce (KM):		

Ph. (204) 535-2139 Toll Free: 1-877-535-2139 Fax. (204) 535-2215



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LAND CONVERSION		
Quarter Sections:		
# of acres to be seeded:		
Perennial Seed Type:		
MAP:		
(Please draw or provide a detailed map of the proj	ect with this application)	
Landowner/Applicant Signature	Date	CAWD Authority