



**Central Assiniboine  
Watershed District**

205 Elizabeth Avenue East  
P.O. Box 160  
Baldur, MB R0K 0B0

**APPLICATION FOR ROTATIONAL GRAZING**

Name of Applicant: \_\_\_\_\_ Landowner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Municipality: \_\_\_\_\_

Do you have an Environmental Farm Plan? Yes  No

**\*PLEASE ENSURE THAT THE APPLICATION HAS BEEN SIGNED BEFORE SUBMITTING IT\***

**PROJECT INFORMATION**

**Eligible Activities:** Watering Systems, Cross Fencing, Riparian Fencing, Temporary Fencing, Pipeline, Wells

Rotational grazing projects are 5 or 10 year agreements under the GROW program. Please state how long of an agreement you would like to sign up for. \*The length of the agreement does not determine the funding levels for this program\*. \_\_\_\_\_

**ROTATIONAL GRAZING**

Quarter Sections: \_\_\_\_\_

Livestock Species: \_\_\_\_\_

Number of Head: \_\_\_\_\_

**CHECK ALL THAT YOU WISH TO APPLY FOR**

Fence  Watering System  Well  Pipeline

***If Applicable***

Length of Fence (KM): \_\_\_\_\_

Type of Fence (Barbed, Electric): \_\_\_\_\_

Length of Pipeline (Km): \_\_\_\_\_

Type of Watering System: \_\_\_\_\_





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**MAP:**

*(Please draw or provide a detailed map of the project with this application, aerial maps are preferred if possible)*

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Landowner/Applicant Signature

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Date

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CAWD Authority