

Guyan Conservation District Shade Cloth Pilot Program FY 21 Application



Applicant Information	Farm Information
Name:	Conservation District: Guyan Conservation District
Mailing Address:	County:
Telephone:	Farm Name:
Email	Farm #:
Address:	Tract #:
Application Date:	Field # or #'s:

Best Management Practice

Please complete the following information for the Best Management Practice you would like to apply for:

BMP	Limits	Cost-Share Rate	Amount applied for	Other
<u>Shade Cloth</u> <u>Pilot</u>	4 Shade cloths	50% of shade cloth cost 26' x 96' \$244 26' x 72' \$185 26' x 48" \$127 Other sizes available.	Size of high tunnel: _____ _____ _____ _____	

Program Eligibility

A. Definition

Cost share incentive to assist with the purchase of a high tunnel shade cloth for district cooperators.

B. Purpose

Provide increased plant and soil health in high tunnels during summer months by seasonally implementing a shade cloth.

C. Policies for Practice

1. Applicant must be a District Cooperator.
2. Must have a completed NRCS high tunnel.
3. Application approvals will be based upon availability of funds.
4. At the time of application the applicant is required to provide payment for (50% of the total cost of) the shade cloth to ensure enrollment.
5. Cooperator must pay using a check or cashier's check (payable to Guyan Conservation District)
6. The application and fee must be submitted in person or via mail. An appointment can be arranged to sign up in person.
7. The Guyan Conservation Board will be ordering the shade cloth (47% black woven material) and will be available to pick up from the district once obtained.
8. Enrollment for the Shade Cloth Program will occur from January 4, 2021 and end March 15, 2021
9. A W-9 will be required with application for District tax purposes.
10. Cost share is available to owner of high tunnel structure.
11. This is a pilot project and once all allocated funds have been used no further application will accepted.

D. Payment rates & limits:

1. The cost share for the practice is 50% of the cost of a shade cloth.
2. The cooperator must provide payment at time of sign up.
3. Maximum of 4 shade cloths per cooperator.

By signing this I have read, understand, and agree to the terms and conditions stated in this document.

Farm Name (if applicable): _____

Applicant Signature: _____ Date: _____

Guyan Conservation District
2631 5th street road
Huntington, WV 25701

Phone: 304-549-1739

OFFICE USE ONLY:	
Date Received:	
Time Received:	
If Approved:	
BD Date Approved:	
Contract Expiration Date:	
Application #:	
Verification #:	

Cooperator Interest
(Check all that apply)

- Grassland Mgmt.
- Forestry Mgmt.
- Wildlife Mgmt.
- Conservation Planning
- Cost-Share Programs
- Equipment Rental
- Urban Conservation
- Other (specify) _____

Conservation Agreement

Cooperator Number _____

Hydrologic Unit _____

Acres _____

Between the Buyan Conservation District, and _____

_____, a landowner in _____, County, WV.

★ Location: _____ Previous Owner: _____

Mailing Address:

(Street or Route) (City) (State & Zip) (phone)

I am interested in conserving the natural resources of my property. I desire assistance in developing a conservation plan, which will be based on proper management of my natural resources and the needs of my enterprise. I will cooperate in establishing the conservation practices called for in my conservation plan, which are acceptable and feasible for me to install.

The Conservation District will make available the technical assistance required to develop the plan and to implement the resource management systems as described in the plan.

It is understood that neither the District representative nor landowner will be liable for any damages to the other's property or personal injury resulting from carrying out the conservation plan in accordance with all applicable federal, state, and local permitting requirements.

This agreement will remain in effect until terminated in writing by either party.

★ _____ Date
Signature of Owner/Operator

Approved by _____ Conservation District on _____
Date

Approved CD Supervisor Date

White – District Copy

Yellow – Cooperator Copy

Pink – NRCS Copy

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Other (see instructions) ▶ _____

C Corporation

S Corporation

Partnership

Trust/estate

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

6 City, state, and ZIP code

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table>				
OR				
Employer identification number				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table>				

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.