



# Chesapeake Bay Program Stream Exclusion Application

**Sign up period: July 10<sup>th</sup> 2017 – September 1<sup>st</sup>, 2017**  
**Practice MUST be completed by May 31st, 2018**

Name \_\_\_\_\_

Farm Number/Name \_\_\_\_\_

Address \_\_\_\_\_

Tract # \_\_\_\_\_

Field # \_\_\_\_\_

Good Day Time Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

## Best Management Practice (BMP) applied for:

BMP	Limits	Cost-Share Rate	Amount applied for
Stream Exclusion (Fencing, Watering Systems, Stream Crossing, Riparian Buffer)	<b>Must have livestock in the stream at this time.</b> O & M by landowner 10 yr Agreement Minimum 10 feet from stream bank	Based upon EQIP C/S rates (not to exceed \$8,000 per person)	_____ feet fence _____ feet water line _____ crossings _____ watering facilities

A. **Definition:** The permanent exclusion of animals from a stream.

### B. Purpose:

1. Restrict or control access to an area.
2. Maintain or improve the quantity and quality of natural resources.
3. Minimize liability and human health concerns.

### C. Policies for this practice are:

1. Livestock must be present in stream to qualify.
2. The AEP committee will visit the site and then sites will be ranked by priority for funding.
3. Cost-sharing is authorized for purchase of fence, watering systems, material for stream crossing and riparian buffers.
4. Payment rates will be based on USDA-NRCS EQIP rates. Fence and pipeline reimbursement on linear footage only.
5. NRCS standards and specifications/designs must be followed.
6. The stream must flow continually and not be an intermittent stream.
7. Applicant must be an PVCD cooperator
8. Approvals will be final on first Wednesday of September 2017 .
9. Invoices must be submitted by **May 31, 2018**.

### D. Maximum cost-share:

1. The maximum cost-share for this practice shall be \$8,000 for stream protection.
2. The payment will be made after paid invoices are received, cooperator completes a W-9 form and the AEP committee has made a site visit.
3. Applicant must provide one of the following documents: Written lease for current time period, Tract and Field map of proposed location, Current Farm Service Agency Farm Data Report or WVCA Operator Form.
4. Life span of this practice is 10 years.

By signing this agreement you acknowledge that you have read, understood, and agreed to the terms and conditions stated in this document about the Stream Exclusion Purposes, Policies and Cost-Share rates.

Farm Name (if applicable): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY:	
Date Received:	
Time Received:	
Ranking Score:	
If Approved:	
District Bd Date :	
Verification #:	



# FY 18 Agricultural Enhancement Program Exclusion Fence/Watering Systems Ranking Form

## Applicant Information

<b>Name:</b>	<b>Farm #:</b>	<b>Tract #:</b>
<b>County:</b>	<b>Field #:</b>	

## Application Eligibility

<b>Did application meet all of the required questions on the FY 18 Application Eligibility Form?</b> If Yes, please proceed to questions below. If no, Stop.	Yes	No
---	-----	----

## General Ranking Questions

(To be completed by staff based on application and supplemental information)			
	Yes	No	Points
1. Does a current conservation plan and/or nutrient management plan completed by a certified planner or trained technician exist for the land/practice being requested?			Y=5 N=0
2. Does a forest stewardship plan exist for the land/practice being requested? (within last 10 years) If yes, was the plan completed by a registered forester?			Y=3 N=0
3. Is the land enrolled in the USDA Farm and Ranch Lands Protection Program?			Y=2 N=0
4. Is there an NRCS comprehensive nutrient management plan completed by a certified planner?			Y=5 N=0
5. Is the field and/or practice in the USDA-NRCS Focused Conservation Approach Area?			Y=0 N=10
6. Is cooperator a first time or previous non-funded applicant of the Ag Enhancement Program?			Y=20 N=0
7. If a non-first time applicant, did the cooperator successfully complete all AgEP contracts within the past <b>24 months?</b>			Y=10 N=0
<b>Total General Ranking Score:</b>			

## Exclusion Fence/Watering Systems Ranking Questions

(To be completed by staff based on the provided Evaluation Tool)

	Yes	No	Points	Evaluation Tool
1. Is quantity and quality of livestock water sufficient and feasible in all planned fields?			Y=0 N=15	NRCS Watering Facility Engineering Design Guide/Observation
2. Are there other suitable livestock water sources (trough) available within 800 ft. horizontally or 200 ft. vertically of planned location of new trough?			Y=0 N=15	Cooperator input/Observation
3. Is there a livestock water source already developed? (just need pipe, troughs)			Y=10 N=0	Cooperator input/Observation
4. Will this proposed watering system being used to facilitate rotational grazing?			Y=20 N=0	Cooperator input/Observation
5. Will the livestock water quality be improved by developing a water source?			Y=10 N=0	Cooperator input
6. Will installation of new watering system/components provide for a winter grazing or winter feeding system which better protects and/or utilizes grassland?			Y=15 N=0	Cooperator input/Observation
7. Will this system be available to livestock year-round if needed?			Y=15 N=0	Cooperator input/Observation
8. Is there a livestock feeding area with unfiltered flow (bare ground) directly into waterbodies?			Y=20 N=0	Map
9. Will installing this practice protect both sides of the stream?			Y=20 N=0	Map/Observation
10. Will installing this practice exclude the portion of the stream under the cooperator's control?			Y=20 N=0	Map/Observation
11. Will fence improve water quality by reducing sediment, nutrients in an impaired water body?			Y=10 N=0	Watershed DEP 303(d) list/map
12. Is the area being fenced out in a high-quality streams watershed?			Y=15 N=0	eFOTG High Quality Streams List
13. Is the setback 36 feet or greater?			Y=15 N=0	Map/Observation
14. Will fence be excluding livestock from a pond and/or springs?			Y=10 N=0	Map/Observation

**Total Exclusion Fence/Watering Systems Ranking Score:**

**Total General Ranking Score + Total Exclusion Fence/Watering Systems Ranking Score:**



## Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	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; check only <b>one</b> of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (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 Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
	-  -
or	
Employer identification number	
	-

### Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 on page 3.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶

### General Instructions

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

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

### 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-INT (interest earned or paid)
- 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? on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.