

# Agricultural Enhancement Program Nutrient Management Application Deadline Jan. 15, 2021

| Farm Information           |
|----------------------------|
|                            |
| Conservation District: ELK |
| County :                   |
| Farm Name:                 |
| Farm # :                   |
| Tract # :                  |
| Field # or #'s:            |
|                            |

## **Best Management Practice**

| BMP                      | Limits                 | Cost-Share Rate   | Amount applied for | Other |
|--------------------------|------------------------|---|--------------------|-------|
| Commercial<br>Fertilizer | Not to exceed 50 acres | 50% cost-share rate, on P205<br>and K20 only, based on<br>current soil test<br>Max. Reimb. \$2,000.00 | acres              |       |

## **Program Eligibility**

A. <u>Purpose:</u> Increase vegetative growth to reduce soil erosion, and increase soil nutrient.

#### B. Policies for Practice

- 1. Applicant must be a District Cooperator.
- 2. A W-9 tax form will be required with application for District tax purposes.
- 3. Cost share is available to owner or lessee.
- 4. Applicant must provide map identifying tract and field along with proposed acreage.
- 5. NRCS standards and specs must be followed.
- 6. Approvals will be final on **February 23, 2021.**
- 7. Application approvals will be made based upon availability of funds and based on the ranking form.
- 8. Invoices must be submitted by **June 1, 2021.**

# C. Payment rates & limits:

- 1. The maximum cost-share for this practice shall be at a 50% rate on P205, and K20 only based on current soil test. No nitrogen will be cost shared on.
- 2. Maximum of 50 acres per farm.
- 3. The payment will be made after paid invoices are received, cooperator completes a W-9 form and a district representative has made a site visit.
- 4. No duplication of federal or state cost-share shall be allowed.

# D. Practice Specifications

1. Please refer to guidelines provided at the time of approval and signing of contract.

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

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

Applicant Signature: \_\_\_\_\_

| <b>OFFICE USE ONLY:</b>    |  |  |  |
|----------------------------|--|--|--|
| Date Received:             |  |  |  |
| Time Received:             |  |  |  |
| <b>Ranking Score:</b>      |  |  |  |
| If Approved:               |  |  |  |
| <b>BD Date Approved:</b>   |  |  |  |
| <b>Contract Expiration</b> |  |  |  |
| Date:                      |  |  |  |
| Application #:             |  |  |  |
| Transaction #:             |  |  |  |

Date: \_\_\_\_\_