



West Virginia
Conservation Agency

Guyana Conservation District Agricultural Enhancement Program Invasive Species Management Application

Applicant Information
Name:
Mailing Address:
Telephone:
Email Address:
Application Date:

Farm Information
Conservation District:
County :
Farm Name:
Farm # :
Tract # :
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
Invasive Species Management	Not to exceed: 5 Brush Acres	Flat Rate: 100.00/Brush Acre Not to exceed \$500.00	_____ Brush Acre(s)	

Program Eligibility

A. Definition

Cost share incentive to assist with management of invasive species on pasture hay-land and woodland in West Virginia.

B. Purpose

Reduce the negative impact invasive species have on West Virginia lands and agriculture operations.

C. 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. Methods of seeding stands may be established either by conventional or no till.
7. Approvals will be final on _____.
8. Application approvals will be made based upon availability of funds and based on the ranking form.
9. After approval applicant must follow job sheets provided at the time of signing the contract.
10. Receipts must be submitted with invoice.
11. Invoices must be submitted by _____.

D. Payment rates & limits:

1. The maximum cost-share for this practice shall be \$500 per cooperator.
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. No duplication of federal or state cost-share shall be allowed.

E. Practice Specifications

1. Please refer to job sheets 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: _____ **Date:** _____

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