Dickinson County Conservation District State Cost-Share Financial Assistance Request

Funding for state cost-share programs is provided by the Division of Conservation, Kansas Department of Agriculture through appropriation from the Kansas Water Plan Fund.

Date Received
Eligible Practice
C-S Program
Contract #

Landowner's Name/Trust (as appearing on deed):

Multiple lar	ndowners or operato	or? (If yes,	please add additional information or	n page 2.)	
SSN/FEIN:			Telephone Number(s):		
Address:					
City:			State:	ZIP:	
When will t	When will the practice(s) be installed/completed?				
What is the	What is the current land use?				
Legal Desci	ription:	of	-	-	
Farm:	Tract:	Field #:	Hydrologic Unit Code:		
Landowner's signature: Date:					
Office Use Only—Received by:				Date:	

Practice	Estimated Units Required
Diversion	
Fencing	
Filter Strip	
Forage and Biomass Planting	
Grassed Waterway or Outlet	
Grassed Waterway Restoration	
Mulching	
Onsite Wastewater System(NPS)	
Other (please specify	

Practice	Estimated Units Required
Pipeline	
Pond	
Range Planting	
Terrace	
Underground Outlet	
Watering Facility	
Windbreak/Shelterbreak	
Well decommissioning (AWP)	
Other (please specify)	

- Completing this form does **not** guarantee cost-share financial assistance.
- Construction/installation/implementation of this practice(s) started prior to contract approval will result in ineligibility for cost-share financial assistance.
- Each proposed project will be evaluated and ranked based on established criteria.
- An on-site evaluation of proposed projects may be conducted by the conservation district/NRCS staff to determine eligibility of the project.
- If approved for cost-share financial assistance, the landowner(s) must sign a contract agreeing to the terms set forth in the contract. Certain projects have additional requirements.
 - If you receive more than \$600 in cost-share funds, you will receive a 1099 form from the State of Kansas.
- You will be notified of the status of your request for cost-share financial assistance by a letter from the Dickinson County Conservation District that will be mailed after July 1, 2017.

Multiple Landowner's/Operator:

Landowner's Name (as appearing on deed):		
SSN/FEIN:		
Mailing Address:		
Telephone Number(s):		
Percent Share:		
Landowner's Name (as appearing on deed):		
SSN/FEIN:		
Mailing Address:		
Telephone Number(s):		
Percent Share:		
Operator's Information: Name:		
Mailing Address:		
Telephone Number(s):		
Additional Information		

GRAZING MANAGEMENT PLAN INFORMATION: Grazing Period:

Cow, dry #:	Cow, w/calf #:	Cattle, yr. old #:	Cattle, 2 yr. old #:
Bull, mature #:	Bison, w/calf #:	Bison, mature #:	Horses, mature #:
Sheep, mature #:	Lamb, 1 yr. old #:	Goat, mature #:	Kid, 1 yr. old #:

Additional questions: (answer if known)

- Distance to intermittent or perennial stream:
- Distance to public water supply:
- Distance to domestic well:
- Has soil been certified highly erodible:

Office Use Only:			
W9 Form (all)	Onsite Wastewater Eligibility Worksheet		
Well Plugging Worksheet	Water Well Plugging Record WWC-5P		

The Dickinson County Conservation District prohibits discrimination in all its programs and activities on the basis of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status.