

## **DSP-31 BUFFER SINKHOLE IMPROVEMENT**

- A Vendor Input/ACH-EFT Application must be completed before a contract may be created. This form allows a 1099-G to be submitted to you at the end of the year. It also allows for your reimbursement to be sent to your account electronically once your project is completed.
- Purpose of practice is to prevent or reduce erosion and prevent or reduce pollution of the land or water from agricultural nonpoint sources.
- Applies to specific problem areas on farms where runoff to sinkholes causes gully erosion and carries substantial amounts of sediment or runoff containing pesticides or nutrients, which constitute a significant pollution hazard.
- Cost share is authorized for crevice-type sinkholes and active gullies with an annual erosion rate of 10 tons or more.
- Components that cost share may be authorized are: earthwork, drain fill, pipe, concrete, risers, seed, fertilizer, and lime.
- Cost share is not authorized for sinkholes used as garbage dumps or sites that receive runoff contaminated by animal waste from lots or buildings.
- Cost share is not authorized for vertical drains that would cause a change in water delivery, such as blocking a sinkhole and delivering runoff to a second sinkhole.
- The maintenance life of the practice is 10 years.
- I certify that I have not started the practice. I understand that if I begin the practice before I receive official notification of approval from the district board I am not eligible to receive cost-share assistance for completing the practice.
- I understand that the district board of supervisors must approve any modification in the design of the practice. Failure on my part to request changes and obtain board approval of the changes may jeopardize my cost-share payment for the practice.
- I understand that I am not eligible to receive payment for installing the practice until it meets NRCS Standards and Specifications within Commission policy.
- Once claim has been signed and approved it will take approximately 4-6 weeks before the reimbursement is issued to your account.

***I have read the above cost share policies and procedures and understand them. I assume full responsibility for all expenses incurred if I fail to follow these policies and procedure.***

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**Landowner / Operator**

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**Date**