Chariton County SWCD-Request For Cost Share (FY17)

Name: _____

Address: _____

City: _____State: _____Zip:_____

Phone Number: Home _____Cell/Work _____

Practice(s) interested in: _____

Farm No: _____ Tract No: _____Field No:_____

Photo Attached: _____ Yes _____ No

Crop History Taken: _____ Yes _____ No

TIN _____

Vendor Form on file dated after **October 1, 2014-** if not, given to Landowner to be completed or date & initial

_____ Yes _____ No

♦ All practices will be evaluated and ranked according to soil loss and needs.

♦ Letters will be mailed notifying all landowners of site eligibility.

♦ The Landowner is responsible for notifying the office when crops are harvested and field is ready for layout.

♦ Ground is NOT to be worked prior to practice layout.

♦ A preconstruction conference must be held with the Landowner and Contractor on all practices.

♦ Construction will NOT begin until contract has been approved by the board.

♦ Flags shall NOT be destroyed or removed prior to construction. If needed, re-staking will be completed at the technician's opportunity, following additional layout requests.

♦ The practice must be maintained for the required life span. Failure to do so may result in repayment of cost-share funding.

_____ _____

Landowner/Operator Signature Date