MISSOURI DEPARTMENT OF NATURAL RESOURCES
SOIL AND WATER CONSERVATION PROGRAM

LANDOWNER AUTHORIZATION FOR STATE COST-SHARE

LEGAL LANDOWNER NAME AS LISTED ON PROPERTY DEED	TELEPHONE NUMBER WITH AREA CODE

LEGAL LANDOWNER MAILING ADDRESS

PROPERTY DESCRIPTION

PRIMARY OWNER(S)

Name	Does the individual have signature authority on behalf of the legal entity for state cost share?	
	☐ Yes	☐ No
	☐ Yes	☐ No
	☐ Yes	☐ No
	☐ Yes	☐ No
	☐ Yes	☐ No

OTHER INDIVIDUALS WITH SIGNATURE AUTHORITY FOR STATE COST-SHARE

LEGAL LANDOWNER SIGNATURE

I certify as a primary owner or legal representative (POA for primary owner, trustee of trust) of the above mentioned entity that all information contained on this form is true and correct. This Landowner Authorization for State Cost-Share will remain in effect unless the Soil and Water Conservation Board of Supervisors is notified in writing to cancel authorization.

SIGNATURE	DATE
PRINTED NAME	DATE

Mail completed copy to your local Soil and Water Conservation District office.
A map with links to addresses for Soil and Water Conservation District offices is located on the Web at www.swcd.mo.gov.