

STATE OF OKLAHOMA CONSERVATION COST-SHARE PROGRAM APPLICATION

Conservation District	
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Name			
Address	City	State	Zip
Phone Number	Email		
Do you have an approved conservation plan? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have a district cooperater agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No			
For which conservation practice(s) are you applying?			
County where practice(s) will be installed.	Legal Description _____ ¼ _____ ¼ Section _____ Township _____ Range _____		
Do you own or rent this land? <input type="checkbox"/> Own <input type="checkbox"/> Rent			
If you are <u>not</u> the landowner, provide a properly executed consent form from the owner(s) of the land and file it with this application.			

<ul style="list-style-type: none"> I am a United States citizen or a qualified alien under federal Immigration and Naturalization Act, and I am lawfully present in the United States Completing this form does not guarantee cost-share assistance. If approved for cost-share assistance, I understand that a cash or in-kind match is required. Each application will be evaluated and ranked by the conservation district based on established criteria. Construction/installation/implementation of this practice prior to application approval will result in ineligibility of cost-share assistance. If approved for cost-share assistance, the applicant must sign a Performance and Maintenance Agreement before construction may begin. I am not an Oklahoma Conservation Commission commissioner or employee, conservation district employee or the spouse of any of these people mentioned. I own or operate 20 acres or more and sell \$1,000 or more of soil dependent products annually. <p>To the best of my knowledge, the information on this application is correct.</p> <p>Applicant Signature _____</p> <p>Date _____</p>
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Conservation District Approval or Disapproval (to be completed by conservation district board)

We have reviewed the cost-share application and make the following recommendations based on the program guidelines and the conservation district's application ranking system.

- Approve application for cost-share assistance.
- Disapprove the application for cost-share assistance.

Authorized District Representative _____

Date: _____