

STATE OF OKLAHOMA
EMERGENCY DROUGHT COST-SHARE PROGRAM
SELF-CERTIFICATION OF
CONSERVATION PRACTICE IMPLEMENTATION

I hereby certify that between June 11, 2022 and June 30, 2024 I implemented the conservation practice(s) indicated by the block(s) checked below (check all that apply) and that the practice(s) are located on the property/properties as described in the legal description(s) provided next to each implemented practice below:

| PRACTICES | LEGAL DESCRIPTION (lat/long preferred) |
|--|---|
| <input type="checkbox"/> Cover Crop (for erosion control only) | _____ |
| <input type="checkbox"/> Heavy Use Protection Area | _____ |
| <input type="checkbox"/> Pasture & Hay Planting (excludes Bermuda grass) | _____ |
| <input type="checkbox"/> Pasture Tap | _____ |
| <input type="checkbox"/> Pipeline | _____ |
| <input type="checkbox"/> Pond Cleanout | _____ |
| <input type="checkbox"/> Pumping Plant | _____ |
| <input type="checkbox"/> Watering Facility | _____ |
| <input type="checkbox"/> Water Well | _____ |

DOCUMENTATION OF IMPLEMENTATION

I have submitted to the Conservation District evidence of all goods and/or services used in the implementation of conservation practice(s) selected above. This includes a true and accurate photo or photos of the implemented practice(s) that will be maintained in the file and utilized as needed.

PROGRAM COMPLIANCE

Furthermore, I understand that the conservation district and/or the Conservation Commission will investigate any allegations or suspicions of fraud or abuses in this program and take any actions that are necessary including the filing of criminal charges. In addition, I understand that the conservation district and/or the Conservation Commission may conduct a field audit of the conservation practice(s) implemented under this program at any time.

PARTICIPANT:

Print Name

SSN

Signature

Date