

**STATE OF OKLAHOMA**  
**CONSERVATION COST-SHARE PROGRAM**  
**CERTIFICATE OF COMPLETION AND ACCEPTANCE**

Conservation District	
Participant Name	
Agreement Number	
Effective Date of Agreement (last date of signature)	

	Conservation Practice Name / Number	Latitude / Longitude
Practice 1		
Practice 2		
Practice 3		
Practice 4		
Practice 5		

I CERTIFY: That the participant has submitted evidence that all labor, materials, and other charges have been paid in accordance with the terms of the Performance and Maintenance Agreement; and that all records and documents required by the Conservation District have been submitted. Based upon this information, the Performance and Maintenance Agreement is hereby accepted as completed.

\_\_\_\_\_  
 Authorized District Representative Signature

\_\_\_\_\_  
 Date

I CERTIFY: That the conservation practice(s) has been satisfactorily completed in accordance with the applicable NRCS conservation practice(s) standards and specifications as described in the Performance and Maintenance Agreement.

\_\_\_\_\_  
 Designated Technical Representative Signature

\_\_\_\_\_  
 Date