

**APPLICATION FORM (MONTGOMERY COUNTY, PA)
AGRICULTURE CONSERVATION ASSISTANCE PROGRAM**

Complete applications will be accepted at the following conservation district offices or designated agent: **Montgomery County Conservation District, attn: Abigail Reiter, areiter@montgomeryconservation.org or (610) 489-4506 x24**

Application Assistance is available: Please contact Abigail Reiter, contact information above

Section 1: Applicant Information

Landowner: _____ Operator: _____

Farm Name: _____

Address: _____ Address: _____

Telephone: _____ Telephone: _____

Farm Acres: _____ Cropland Acres: _____ FSA Tract No.(if applicable) _____

Type of Operation (livestock, dairy, poultry, crop, etc.): _____

Does your operation have a CURRENT AND VERIFIABLE

- Nutrient Management Plan (NMP)
- Manure Management Plan (MMP)
- NRCS 590 Plan

_____ Yes _____ No (Indicate which type of plan)

If yes, please list date of plan: _____

Does your operation have a CURRENT AND VERIFIABLE

- Ag E&S
- Conservation Plan?

_____ Yes _____ No (Indicate which type of plan)

If yes, please list date of plan: _____

Does your operation have any Animal Concentration Areas (ACAs)? _____ Yes _____ No

Animal Concentration Areas: barnyards, feedlots, loafing areas, exercise lots or other similar animal confinement areas that will not maintain a growing crop.

Is your ACA contributing to a resource concern or have direct connectivity to a water source?

____ Yes _____ No

If yes, will the proposed project address the ACAs: _____ Yes _____ No

Section 2: Financial Information

Enter the proposed funding and its sources below.

Montgomery County Conservation District will be reimbursing up to 90% of eligible project costs through the ACAP Program. If an eligible applicant hires a private sector consultant, engineering and associated planning costs for the project may be included as an eligible cost, up to an additional 10% of the estimated project cost. Prevailing wage is a requirement of this program for any projects that cost \$25,000 or more. Please factor in prevailing wage rates for all contracted labor.

Amount of ACAP Grant Funds Requested: _____

Amount of REAP Funds Anticipated: _____

Amount of AgriLink/Commercial Loan or Farmer Financed: _____

Amount of EQIP Funds: _____

Amount of producer match: _____

Amount of Other Funds (please indicate source): _____

TOTAL PROJECT COST: _____

Section 3: Attachment Checklist

- Project Description
 - Project Cost Estimate
 - Plan Verification Form (as applicable, for existing agricultural plans such as: Manure Management Plan, Agricultural Erosion and Sediment Control Plan, Conservation Plan, Nutrient Management Plan, NRCS 590 Plan)
 - Operation Maps including Aerial Imagery, Soils and project location (project locations may be hand drawn) Agricultural Plan maps can be used to fulfill this required attachment - assistance can be provided in creating and compiling required maps
 - Project Photos Before Construction
 - USDA NRCS Authorization for Release of Records, if applicable
 - (Optional) Existing Agricultural Plans (Manure Management Plan, Agricultural Erosion and Sediment Control Plan, Conservation Plan, Nutrient Management Plan, NRCS 590 Plan)
-

Section 4: Grantee Signature

I hereby request ACAP Funding assistance for the operation identified above.

Applicant: _____

Date: _____

Section 5: Conservation District Use Only

Date received: _____

Accepted by(signature): _____ Date: _____

Name (print): _____ Title: _____

Has a site visit been conducted by CD or NRCS? List date of visit _____

Eligibility Determination Date: _____

Determination of eligibility: _____ Eligible _____ Not Eligible

If not eligible, state reason: _____

If eligible, amount of funding granted: _____

District Board Approval Date: _____

Board Signature or Authorized Representative: _____

VERIFICATION FORM

Verification on Conservation Plans must be made by a NRCS certified conservation planner. Verification on Nutrient Management Plans must be made by an Act 38 certified planner/reviewer. Verification on Ag E&S and Manure Management Plans may be made by any qualified individual that has acquired enough knowledge in the respective program to certify that the plans are correct and complete.

A. Conservation and Agricultural E & S Plans

Conservation Plan Agricultural E&S Plan N/A

I affirm that I have reviewed the operational Conservation/Ag E&S Plan(s), and after due diligence and inquiry I hereby affirm the plans to be true and correct to the best of my knowledge, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

NAME OF PERSON VERIFYING THIS APPLICATION: (printed)

TITLE:

NAME OF ORGANIZATION OR BUSINESS:

PHONE NUMBER:

VERIFICATION SIGNATURE:

B. Nutrient Management Plan and Manure Management Plan

NMP MMP N/A

I affirm that I have reviewed the operational Nutrient Management Plan/Manure Management Plan, and after due diligence and inquiry I hereby affirm the plans to be true and correct to the best of my knowledge, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

NAME OF PERSON VERIFYING THIS APPLICATION: (printed)

TITLE:

NAME OF ORGANIZATION OR BUSINESS:

PHONE NUMBER:

VERIFICATION SIGNATURE:

C. BMP's Included in ACAP application are contained in one of the above stated plans?

YES NO

Customer Record Request

NRCS maintains Landowner, Operator, Producer, Cooperator, and Participant Files in a System of Records. These records are protected from disclosure by the Privacy Act of 1974, as amended (5 U.S.C. § 552a) and Section 1619 of the 2008 Farm Bill (7 USC § 8791). Customer case files are confidential and can only be accessed by the customer/program participant.

Customers/program participants are allowed to share their information directly with third parties or entities outside of USDA. Pennsylvania USDA-NRCS customers who wish to share their customer records with third parties or outside entities can use this form to request copies of records contained in their official customer file.

Release of customer/program participant information to any third party is not a condition of USDA participation, nor do customers need to complete a records request to participate in any USDA program.

To: United States Department of Agriculture (USDA), Natural Resources Conservation Service (NRCS)
From (Individual and/or Farm Name):

Mailing Address:

Farm Address:

I request copies of the records from my files, as listed:

Delivery method for records (check box):

Pick up at the NRCS field office

Mailed through the US Postal Service

Electronic mail (please provide e-mail address):

If multiple individuals make up a larger customer entity all individuals of the entity must sign. (For additional individuals please attach an additional sheet).

Name: _____ Signature: _____ Date Signed: _____
(Please Print)

Name: _____ Signature: _____ Date Signed: _____
(Please Print)

NRCS Reviewer Signature: _____ Date Delivered: _____