## TRI-BASIN NATURAL RESOURCES DISTRICT

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force and to obtain such new owner's acceptance of the responsibilities

Signature of Landowner

herein.

Signature of Landowner

App#	
Termination:	

	SO	IL MOIS	TURE SE	INSOR PROC	я̀RAМ		Terminat	ion:	
Landow	ner:					Date:			
Addr	ess:			Phone:					
				Social Security#:					
				OR Federal ID #:					
Check Appro	_	ox: le Proprietor		Partnersh	nip (	- Corporation		Trust	
<ol> <li>I (we) the undersigned do hereby request cost-share assistance to help defray the cost of installing the soil and water conservation practices as listed below. It is understood and agreed that:</li> <li>Before receiving any cost-share funds, it will be necessary for the landowner(s) to sign the agreement below relating to the maintenance of practices installed.</li> <li>Practices must be planned and installed in accordance with technical specifications of the Natural Resources Conservation Service.</li> <li>The responsible technician must make prior determination that the practices are feasible on the site where they are to be installed, that they are properly planned and installed and that estimates of quantities are proper and reasonable.</li> <li>Items of cost for which reimbursement is later claimed are to be supported by documentation of payments made or due to contractors or other workers.</li> <li>This application will not be effective until approved by Tri-Basin Natural Resources District. Claims for payment will not be accepted more than six (6) months from the date this application is approved unless an extension is granted by Tri-Basin Natural Resources District. Applications will be cancelled if not completed by June 30th each year.</li> <li>Maximum reimbursement will be limited to 60% of the actual cost to the landowner, the percentage of average costs specified below, or the amount obligated by Tri-Basin Natural Resources District, whichever is least.</li> <li>I will report to the NRD such irrigation related information, as the NRD may require, on forms provided by the NRD.</li> </ol>									
Legal	Locatio	n: ½	4; Section	; Townsł	nip: Ran	nge;	;	_ County	
	APP	LICANT'S R	EQUEST		PRACTICE UNITS PERFORMED				
Practice & Description	Type of Unit	Quantity	Ave. Cost/Unit	Max. Assist. At 60%	Units Performed	60% of Average Cost	60% of Actual Cost	Units x lesser of Ave./Actual	
					Total: \$ Less Other Cost-Share Assistance: \$ Total Amount of Claim: \$				
			Total:	\$					
Circle all that apply: SMS Purchase SMS Rental					Circle all that apply: SMS Purchase SMS Rental				
REQUEST FOR COST-SHARE - LANDOWNER SIGNATURE:				Practice/Quantities requested are needed, practical and will be planned in accordance with NRD technical specifications.					
Landowner Signature Date					Signature of Technician Date				
LANDOWERS CERTIFICATION AND AGREEMENT I certify that the items for which payment is claimed were furnished under authority of the law and that the charges are reasonable, proper, and correct and no part of the claim has been paid. I further certify that I am the owner of the above described property and agree that if any or all of the				APPLICATION APPROVAL: The Tri-Basin NRD Board of Directors approved the Applicant's Request and hereby obligates: \$					
above installed lessen their effe	ectiveness w	vithout consen	t of Tri-Basin	NRD Representative Signature Date					
District for a period of ten years after the date of receiving payment, that portion of the claimed amount shall be refunded to Tri-Basin Natural Resources District. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in					СО	MPLETION A	ND CERTIFI	CATION:	

Signature of Technician

Signature of NRD Mgr.

Date

Date