

I hereby request assistance from the soil and water conservation district in planning, applying, and maintaining soil conservation and water management practices on my land. I hereby grant to the members of the soil and water conservation district or their designated representatives the right of ingress and egress to my land for the purpose of conducting surveys, planning or inspecting conservation works of improvement during the period this agreement is in force. This agreement will remain in effect until mutually terminated or by either party giving thirty (30) days written notice

Landowner _____ Telephone No. _____

Address _____ Social Security No./ Federal I.D.No. _____

City, State, Zip _____

Legal Description Qtr., _____ Sec., _____ Township _____ Range _____ County Allamakee Tract # _____

REQUEST

I hereby request financial assistance through the IDALS-DSC cost share program to partially defray the cost associated with applying the soil conservation practice named below on _____ acres (total acres to be treated) in accordance with Chapter 161A, Code of Iowa, and Division of Soil Conservation rules of Section 27, Iowa Administrative Code. I have reviewed the Form IP-1 Addendum and understand the conditions which apply to my application concerning the required Maintenance/Performance Agreement and other conditions which must be met prior to receipt of payment. NONE (None,Part,All) of the area (sketch attached) where this practice is to be applied has been in conservation cover as defined on the Form IP-1 Addendum.

Applicant is: Owner Operator Agent Contract Buyer Other _____ Administrative Order No. _____
Power of Attorney is on file: Yes No (Required if another person signs for the owner)

Signature of Landowner _____ Date _____

CERTIFICATION

Practice Name _____ Quantity _____ Unit _____ Field No. _____ Estimated Cost \$ _____

I have viewed the site (sketch attached) where the above-named practice(s) is to be applied and find it to be appropriate. The estimated quantity and cost of the practice are reasonable and proper.

(D.C. or District Forester) _____ Date _____

APPLICATION APPROVAL

This application has been approved for _____ by the Allamakee County Soil and Water Conservation District Commissioners.
PERMANENT PRACTICES WILL NOT BE STARTED UNTIL FUNDS ARE OBLIGATED BELOW.

Signature of SWCD Chairperson _____ Date _____

FUND OBLIGATION

\$ _____ dollars from the Waterloo Creek Project program funds
(see Section 27, Iowa Administrative Code) have been obligated to the applicant.

Signature of DSC Employee _____ State Secretary _____ Date _____

Permanent practice construction must be started as soon as possible and completed by _____