



**APPLICATION FOR FINANCIAL ASSISTANCE
LIVESTOCK WATER QUALITY IMPROVEMENT PROJECT
LOWER REPUBLICAN RIVER WATERSHED**

LANDOWNER NAME _____

ADDRESS _____

CITY, STATE, ZIP CODE _____

TELEPHONE _____ SS OR FEIN _____

LEGAL DESCRIPTION OF SITE _____ COUNTY _____

14 DIGIT HYDROLOGIC UNIT CODE _____

SUMMARY OF PROJECT, INCLUDING PRACTICES TO BE IMPLEMENTED:

BUDGET

<u>ITEM</u>	<u>QUANTITY</u>	<u>TOTAL COST</u>	<u>COST SHARE AMOUNT (80%)</u>
TOTAL AMOUNT REQUESTED (MAXIMUM \$4,750) _____			

If technical or other assistance is being provided for this project, list the assisting entity here (NRCS, Conservation District, K-State Extension, Kansas Rural Center, etc.):

Approved practices must be maintained for 10 years or for the established NRCS practice life, whichever is greater.

Landowner or operator will assist with water quality education by:

- Putting up a sign describing the project
- Hosting a field day or demonstration
- Speaking about the project at a field day or workshop

LANDOWNER SIGNATURE _____ DATE _____

Supporting documentation such as photos, diagrams or designs may be attached.

Return applications to Kansas Crossroads RC&D, PO Box 501, Clay Center, KS 67432
For more information contact Tom Meek, Clay County Conservation Dist, 785-632-3550
Kansas Crossroads RC&D is an equal opportunity employer and provider.