

## STATE OF OKLAHOMA CONSERVATION COST-SHARE PROGRAM APPLICATION

Conservation District	
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Name			
Address	City	State	Zip
Phone Number	Email		
Do you have an approved conservation plan? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have a district cooperater agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No			
For which conservation practice(s) are you applying?			
County where practice(s) will be installed.		Legal Description _____ 1/4 _____ 1/4 Section _____ Township _____ Range	
Do you own or rent this land? <input type="checkbox"/> Own <input type="checkbox"/> Rent			
If you are <u>not</u> the landowner, provide a properly executed consent form from the owner(s) of the land and file it with this application.			

<ul style="list-style-type: none"> <li>I am a United States citizen or a qualified alien under federal Immigration and Naturalization Act, and I am lawfully present in the United States</li> <li>Completing this form <b>does not</b> guarantee cost-share assistance.</li> <li>If approved for cost-share assistance, I understand that a cash or in-kind match is required.</li> <li>Each application will be evaluated and ranked by the conservation district based on established criteria.</li> <li>Construction/installation/implementation of this practice <b>prior to application approval</b> will result in ineligibility of cost-share assistance.</li> <li>If approved for cost-share assistance, the applicant must sign a Performance and Maintenance Agreement <b>before construction may begin</b>.</li> <li>I am <b>not</b> an Oklahoma Conservation Commission commissioner or employee, conservation district employee or the spouse of any of these people mentioned.</li> </ul> <p style="margin-top: 20px;">To the best of my knowledge, the information on this application is correct.</p> <p style="margin-top: 20px;">Applicant Signature _____</p> <p style="margin-top: 10px;">Date _____</p>
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**Conservation District Approval or Disapproval** (to be completed by conservation district board)

We have reviewed the cost-share application and make the following recommendations based on the program guidelines and the conservation district's application ranking system.

- Approve application for cost-share assistance.
- Disapprove the application for cost-share assistance.

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

Date: \_\_\_\_\_