

Full Application: Forestry in the Ohio River Basin Water Quality Trading Project

Prior to completing the full application, we **strongly** suggest utilizing the **Rapid Project Pre-screen**, which can provide feedback on the likelihood of project funding.

Read the full Funding Notice prior to submitting a funding application to ensure eligibility.

DEADLINES:

- Applications will be accepted on a rolling basis beginning September 1st, 2016 until funds are expended.
- It will take 30 days for to review applications; applications should be submitted at least 30 days before landowners need to place tree orders.
- Projects must be fully installed and verified by the state agency by November 15, 2017 July 15 2018.

Project Master Reference Code (EPRI will provide if a Rapid Project Prescreen of Otherwise, leave blank):	was completed.
County:	
State/SWCD Staff Lead Name:	
State/SWCD Staff Lead e-mail:	
Check appropriate title of Applicant (check all that apply): Owner	Operator
Name:	
Street Address:	
City, State, Zip:	
Telephone number:	
Email:	
Does this practice involve a partnership or joint venture with others? Tes	No
Is the applicant also the landowner?	
If not, is there written documentation of permission to install the practice/praccost share if the tenant no longer rents/leases the land?	tices binding the landowner to the



KENTUCKY LANDOWNERS ONLY:
The Kentucky Agriculture Water Quality Act, KRS 223.71-100 through 224.71-140 constitutes the eligibility baseline for individual producers. The applicant has demonstrated compliance with the AWQA as follows:
 Confirm with the relevant Soil and Water Conservation District (SWCD) that there are no outstanding Notices of Violation (NOVs) citing the landowner for AWQA violations; A copy of the landowner's Nutrient Management Plan (NMP) has been filed with the relevant SWCD; At least one soil test has been conducted within the last five-year period in accordance with the AWQA Statewide Plan specifications. This includes following guidance and procedures from the University of Kentucky regarding soil testing: Applicants should use the Mehlich III solution to extract phosphorus (P), potassium (K), calcium (Ca), magnesium (Mg), and zinc (Zn). Soil pH should be determined in a solution of 1 M KCl and then converted to soil-water pH for soil test reports. Buffer pH should be determined with the Sikora buffer. These methods are described in Bulletin 190 of the Southern Cooperative Series, Procedures Used by the State Soil Testing Laboratories in the Southern Region of the United States. In addition, in accordance with NRCS Practice Code 590 for Kentucky, all test should be performed by laboratories successfully meeting the requirements and performance standards of the North American Proficiency Testing Program-Performance Assessment Program (NAPT-PAP).
Type of operation (check all that apply): Cropland Livestock Other
Describe the current operation, including:
• Crop types:
Livestock density (heads per acre):
• Fertilizer amounts (N, P) applied:
Timing of fertilizer application:
Location of proposed new practice(s): include aerial photo or map that shows project location and nearest waterbody.
Address: Same as above
Latitude: Longitude:



The following question refer to EQIP-eligibility
Has the applicant exceeded their EQIP Payment Limitation? Yes No
Has the applicant exceeded the Adjusted Gross Income provision? Yes No
Is the applicant in compliance with the Highly Erodible Land (HEL) and Wetland Conservation provision? Yes No
Is applicant willing and able to demonstrate 3 years of farm practice history? Yes No
Project Description:
Describe the proposed practice(s) to be implemented. Include on-site photographs showing current
conditions. Include size of project, species of trees anticipated, current land use and installation time-
frame.



Project Cost:

What is the total cost of the project being proposed? Include details such as tree purchase, installation cost, materials, labor, etc.



Funding Request:

How much funding is being requested?

Total cost-share funding request: \$ Percent cost-share of total project cost (sho	
Have any of the proposed practices been implemen	ted on the same acres previously? Yes No
Are the proposed practice(s) being implemented a resettlement, or other legal action? Yes No	result of a regulatory action, as part of an existing
What is the status of technical assistance provided for the status of th	Design
Has the applicant previously received cost-share for ☐Yes ☐No	this same project on the same acres?
f yes, please explain:	
Potential Ancillary Benefits or Priority Concerns ad	dressed (check all that apply):
☐ Carbon Sequestration	Fertilizer Use Reduction
☐ Water Quantity	Rare Species
Habitat Enhancement	Pollinators
Excessive Run-off	☐ Water retention
Soil Health	Agricultural Viability
Erosion control	Animal health
Sediment Reduction	Other (please list)
s the applicant willing to participate in a media eve agricultural publications?	nt or field day highlighting his/her involvement in
s the applicant aware that his/her Application and a disclosure by way of a Freedom of Information Act i	
Briefly describe conservation practices already bein	g implemented by the Applicant in their operations



SIGNATURES

I certify that I am willing and able to demonstrate my farm practices for the last 3 years (e.g., through records, photographs, or other documentary materials) for the farm specified in the funding application and that I will provide a complete demonstration, upon request, to my local SWCD, State department, and/or the Electric Power Research Institute.

Further, I certify that the proposed project will comply with all local, state, and federal regulations; that the proposed practices are not otherwise required to meet a local, state or federal obligations; and that all statements contained herein are true and accurate.

Applicant Signature.		
Print Name: _		_
Date:		_
SWCD/State Staff		
this funding notice and	essional knowledge, this project meets eligibility requirements as If the applicant will not apply the requested cost-share towards a state and federal regulations.	
SWCD/State Staff Sign	ature:	
	ature:	_