CENTRAL PLATTE NRD COVER CROP COST SHARE PROGRAM

Revised (4/5/24)

The purpose of a cover crop is to manage soil fertility, soil quality, water, weeds, pests, diseases, biodiversity and wildlife in agroecosystems.

LANDOWNER or : OPERATOR _____ SOCIAL SECURITY NO: _____

ADDRESS: _____ PHONE: _____

_____ Cell Phone: _____

County: _____

Email: _____ Operator: _____

LOCATION: _____ 1/4, SECTION _____ TOWNSHIP _____ RANGE _____

This application will not be effective until approved by the NRD: *All applications must be approved before project can be started*. Claims for payment will not be accepted more than one year from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

Two 3ft.soil samples for nitrate analysing must be taken following NRD guidelines and submitted to the NRD. The first sample will be taken when the cover crop is seeded and the second sample will be taken just before it is removed/destroyed.

Items of cost for which reimbursement is claimed are to be supported by documentation of payments made.

Cost share is 50% of actual cost up to $2,000.00 for Seed ***ONLY***. One application per landowner or operator per year. Plantings must be planned and installed in accordance with technical specifications of the NRCS.

APPLICANT'S REQUEST		PERFORMED		
# of Acres to be Planted	Maximum Assistance	Actual Cost	50% Actual	Cost Share
	$2,000.00			

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

Landowner Date

Technican Date

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate $ _____

NRD Representative Date

Office Use Only:

Record #

Compliance

Bills Paid

LANDOWNER CERTIFICATION:

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.

I certify that I accept all responsibility for any activities associated with this cost share.

Landowner Date

COMPLETION AND CERTIFICATION:

Technician Date

NRD Representative Date

Note: Cost share payments are considered taxable income. Recipents of total payments of $600 or more in a calendar year will receive a Federal Form 1099.