US DEPARTMENT OF AGRICULTURE
NATURAL RESOURCES CONSERVATION SERVICE

OMB 0578-0013
NRCS-CPA-1200
Expires 5/31/2012

CONSERVATION PROGRAM APPLICATION

Name:	**Application Number:** AGENCY USE
Address:	**Application Date:**
	County and State:
Telephone:	**Watershed:** AGENCY USE
	Subaccount: AGENCY USE
Location (Legal Description, or Farm and Tract Number:	

(Please note that not all questions apply to all Programs)

1. This is an application to participate in the:

☐ **Agricultural Management Assistance (AMA)**	☐ **Environmental Quality Incentives Program (EQIP)**
☐ **Conservation Security Program (CSP)**	☐ **Wildlife Habitat Incentives Program (WHIP)**
☐ **Grassland Reserve Program (GRP)**	☐ **Healthy Forest Reserve Program (HFRP)**
☐ **Wetland Reserve Program (WRP)**	

2. ☐ **Yes** ☐ **No** **Do you have farm records established with the appropriate USDA Service Center Agency?**

If no, you must establish them with the appropriate USDA Service Center Agency prior to submitting this application.

3. Are you applying to participate in a conservation program as an (check one of the following):

☐ **Individual**

a) Please enter your legal name and tax identification number:

Name: _____ **Tax Number:** _____

☐ **Entity** (Corporation, Limited Partnership, Trust, Estate, etc.)

a) Please enter entity legal name and tax identification number:

Name: _____ **Tax Number:** _____

b) ☐ **Yes** ☐ **No** Do you have appropriate documents including proof to sign for the entity?

☐ **Joint Operation** (General Partnership, Joint Venture)

a) Please enter joint operation legal name and tax identification number:

Name: _____ **Tax Number:** _____

b) ☐ **Yes** ☐ **No** Do you have appropriate documents including proof to sign for the joint operation?

4. **A Dun & Bradstreet Data Universal Numbering System (DUNS) number is necessary for federal grants or contracts equal to or more than $25,000.** *If you do not have a number information is available at* http://fedgov.dnb.com/webform/displayHomePage.do

DUNS Number:

5. **Is the land being offered for enrollment used for crop or livestock production?**

   ☐ **Crop Production** **Crop Type:**

   ☐ **Livestock Production** **Livestock Type:**

6. **The land offered under this application is (check all that apply):**

   ☐ **Private Land**

   ☐ **Public Land (Federal, State, or Local Government)**

   ☐ **Tribal, Allotted, Ceded, or Indian Land**

7. **Certification of control of the land offered under the application:**

   ☐ **Deed or other evidence of land ownership**

   ☐ **Written lease agreement**

   Years of control are through

   ☐ **Other agreement or legal conveyance (describe):**

   Years of control are through

8. ☐ **Yes** ☐ **No** **Is the land offered under this application enrolled in any other conservation program?**

   Program, Year, Tracts, Fields:

9. **Are you either a Limited Resource Farmer or Rancher or a Beginning Farmer or Rancher?**

   ☐ **Limited Resource Farmer**

   ☐ **Beginning Farmer or Rancher**

   If you wish to apply in either of these categories, you must complete certification requirements. For more information please go to this website: http://www.lrftool.sc.egov.usda.gov/.

All participants that certify eligibility as a Limited Resource Farmer or Rancher or Beginning Farmer will provide all records necessary to justify their claim as requested by a Natural Resources Conservation Service (NRCS), representative. It is the responsibility of the participant to provide accurate data to support all items addressed in this application at the request of NRCS. False certifications are subject to criminal and civil fraud statutes.

10. ☐ **Yes** ☐ **No** **If applying for the EQIP and if the application includes irrigation practices, has the land been irrigated at least 2 of the last 5 years?**

11. ☐ **Yes** ☐ **No** **If applying for the EQIP, are you engaged in livestock or agricultural production, and have you produced at least $1000 of agricultural products in a year?** *(Forest agricultural producers may select yes as they are exempt from the $1,000 requirement)*

On the farm(s) identified above, the Applicant agrees to participate in the identified program if the offer is accepted by the NRCS. The undersigned person shall hereafter be referred to as the "Participant." The participant understands that starting a practice prior to contract approval causes the practice to be ineligible for program financial assistance. The participant will obtain the landowner's signature on the contract or provide written authorization to install structural practices.

The Participant agrees not to start any financially assisted practice or activity or engage the reimbursable services of a certified Technical Service Provider before a Contract is executed by Commodity Credit Corporation (CCC). The Participant may request, in writing, a waiver of this requirement for financially assisted practices by the NRCS State Conservationist.

All participants that certify eligibility as a Limited Resource Farmer or Rancher or Beginning Farmer will provide all records necessary to justify their claim as requested by a NRCS representative. It is the responsibility of the participant to provide accurate data to support all items addressed in this application at the request of NRCS. False certifications are subject to criminal and civil fraud statutes.

The Participant acknowledges that highly erodible land conservation/wetland conservation, adjusted gross income certifications, and member information for entities and joint operations are on file with the appropriate USDA Service Center Agency.

12. ☐ Yes ☐ No I have received a copy of the program appendix where appendix is applicable.

Applicant Signature	**Date**

Public Burden Statement

In accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0578-0013. The time required to complete this information collection is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

NONDISCRIMINATION STATEMENT

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PRIVACY ACT STATEMENT

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a). This information is used to track contract or agreement progress. The authority for requesting the following information is 7 CFR 630 (Long Term Contracting); 7 CFR 1410 (CRP); 7 CFR 631 and 702 (IEQIP); 7 CFR 636 (WHIP); 7 CFR 622 (WPFPP); 7 CFR 1465 (AMA); 7 CFR 1469 (CSP); 7 CFR 625 (HFR); 7 CFR 1494 (FRPP); and 7 CFR 1467 (WRP). Furnishing information is voluntary and will be confidential; however, it is necessary in order to receive assistance.