

Jefferson County Cost-Share Grant Application For State and County Programs

GENERAL INFORMATION	
APPLICANT NAME, ADDRESS, AND PHONE:	PRACTICE AND PURPOSE OF PRACTICE:
CHECK THAT WHICH APPLIES: LANDOWNER <input type="checkbox"/> GRANT RECIPIENT <input type="checkbox"/>	ESTIMATED TOTAL COST:
Have you received or applied for cost-sharing from other sources for this practice (including nutrient management plans from previous years)? Circle One: YES NO If Yes, what program?	

REQUEST FOR COST SHARE GRANT	
I wish to apply for a cost-share grant from the Jefferson County Land and Conservation Department. I understand that the purpose of this grant is to improve water and soil quality through implementation of accepted conservation practices. I also understand that this determination does not obligate me to participate in the program nor does it obligate the Jefferson County Land and Water Conservation Department to provide cost sharing to me.	
APPLICANT SIGNATURE (landowner):	DATE:
APPLICANT SIGNATURE (grant recipient, if applicable):	DATE:

DETERMINATION OF ELIGIBILITY (OFFICE USE ONLY)		
DATE APPLICATION RECEIVED BY COUNTY:		
This applicant is: <input type="checkbox"/> Eligible until _____, _____. <input type="checkbox"/> Ineligible to receive a cost share grant.		
SIGNATURE OF COUNTY REPRESENTATIVE:	TITLE:	DATE: