

**Scott County Soil and Water Conservation District (SWCD)
Cost-Share Application for Muscatatuck Watershed Incentive Payments**

Landowner/operator Information

Name		Address		City	
State	Zip	Phone	E-Mail		Acreage
Social Security or Tax ID Number:					

Farm	Tract	Description of Conservation Treatment	Acres	Payment Per Acre	Total Payment Allocated

Landowner Agreement

1. The landowner/operator agrees to implement the practices described above, and in the attached conservation plan if applicable.
2. The landowner/operator certifies that he/she has control of the above tracts.
3. The landowner/operator releases the SWCD or sponsor from any and all liability.
4. The landowner/operator accepts any liability, financial or otherwise, in installing the practices described above.
5. The landowner/operator will provide proof of completion through receipts, photos, etc.
6. The landowner/operator will allow a person from the SWCD or a partner to confirm completion of the project by entering the property if requested.

I, _____, a landowner/operator in Scott County, Indiana, hereby make application to the Soil and Water Conservation District for assistance to install/apply the conservation practice(s) listed above.

Landowner's Signature

Signature: _____ Date: _____

SWCD Approval

Signature: _____ Date: _____
SWCD Chairman or designee

SWCD Use Only

Approval for payment in the amount of: \$ _____

Certification of Completion

I certify that the practices described above were completed.

Name	Date
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