

Elkhart River Watershed
 319 Agriculture Cost-share Program Application
 Elkhart River Restoration Association and Elkhart River Alliance

SECTION A				
Applicant Name		Applicant Address		
		Phone #		
Landowner Name		Landowner Address		
Location Information				
Farm #		Tract #		14-digit Watershed HUC
Section #	Township:	Range:	Civil Township:	USGS Quadname:
Latitude & Longitude or Universal Transverse Mercatur (UTM)				

SECTION B					
Best management practice(s) needed to improve or maintain water quality					
Field number	Practice Title	Quantity or Unit	Distance from waterbody	Slope (if applicable)	Approx. Install Date

SECTION C			
Check those that apply to your operation.			
<input type="checkbox"/>	Conservation Plan	<input type="checkbox"/>	Animal Feeding Operation
<input type="checkbox"/>	Nutrient Management Plan	<input type="checkbox"/>	Confined Feeding Operation
<input type="checkbox"/>	Pest Management Plan	<input type="checkbox"/>	Current Soil Tests
<input type="checkbox"/>	Manure Management Plan	<input type="checkbox"/>	Current Manure Tests
<input type="checkbox"/>	Comprehensive Nutrient Management Plan (CNMP)		Map (field boundaries, field numbers, acres, etc.)

Applicant Signature	Date
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SECTION D: office use only

Date Received	
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Ranking	
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Committee Approval	
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