

Application No. _____

Date Received: _____

Converse County Conservation District
911 S. Windriver Drive, Douglas, WY 82633
307-624-3164
www.conserveconverse.org

Resource Enhancement Cost-Share Application

Fill out all questions completely including proposed costs. Incomplete applications will not be processed. A sketch or plan map must accompany each application with the location of the proposed practice clearly indicated on it.

Name _____

Mailing Address _____ City/Town _____

Contact Person _____ Telephone _____

Email _____

Landowner and/or lessee name, address, email, telephone (if other than applicant) _____

PROJECT INFORMATION

Location:

Section _____ Township _____ Range _____ $\frac{1}{4}$ _____ $\frac{1}{4}$ _____

Size of Project: _____ acres

Brief Project Description _____

Project Benefits: Which natural resources will be benefited and how will they be benefited? _____

List other conservation measures that will be employed to complement the project: _____

Public Benefit: Describe how the project meets the program objectives and how it benefits the public. Public benefits include continued agricultural production to maintain open space and healthy ecosystems; enhanced opportunities for outdoor recreation; enhancements to air, land or water quality; maintenance or enhancement of wildlife habitat; preclusion of soil loss or disease; or other perceived public benefits. _____

Describe the consequences to public and private resources if this project is not funded: _____

Proposed Practices (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Streambank protection | <input type="checkbox"/> Dam/reservoir rehabilitation |
| <input type="checkbox"/> Grass/Forb Seeding | <input type="checkbox"/> Livestock watering facility |
| <input type="checkbox"/> Spring Development | <input type="checkbox"/> Pasture or rangeland restoration/improvement |
| <input type="checkbox"/> Diversion replacement/upgrade | <input type="checkbox"/> AFO/CAFO |
| <input type="checkbox"/> Interior or riparian fencing | <input type="checkbox"/> Water Development (new or replacement) |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Other |

Some projects may require professional design/planning

COST OF PROJECT (cost breakdown required per practice):

<u>Practice Description</u>	<u>Unit Amount</u>	<u>Cost per Unit</u>	<u>Total Cost</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
			Total Project Cost \$ _____

Amount Requested from District \$ _____
 (no more than 50% of total project cost allowed, with a maximum of \$50,000)

Contribution from other sources \$ _____

List other sources: _____

SIGNATURE:

I hereby declare that the information, and all statements attached to this application are true, complete, and accurate to the best of my knowledge.

Applicant signature _____ Date _____

Landowner signature (required if different than applicant) _____

Date _____

Attach extra sheets as necessary