



St. Joseph River Watershed Cost Share Program

Producer Application

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Where would you like to implement these Practice(s)? Add pages as needed.

County: \_\_\_\_\_ Township: \_\_\_\_\_

Section: \_\_\_\_\_ Field Name: \_\_\_\_\_

Total Number of Acres: \_\_\_\_\_

\*Please provide a copy of your FSA field map(s).

Which Practice (s) would you like to implement?

Conservation Practices Selected

| initials | Code | Conservation Practice                                 | \$/acre | # acres |
|----------|------|---|---------|---------|
|          | 329  | No-Till/Reduced Till                                  | 16.42   |         |
|          | 340  | Cover crop  | 52.17   |         |
|          | 393  | Filter strip with 5-year maintenance                  | 128.29  |         |
|          | 590  | Nutrient Management (590) and incorporated fertilizer | 26.43   |         |

Signature of Operator: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Landowner (if renting): \_\_\_\_\_ Date: \_\_\_\_\_

Return application to: Sarah Fronczak, (froncza3@msu.edu) MSU Extension Hillsdale, 20 Care Dr. Suite B, Hillsdale, MI 49242



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