

PAPIO-MISSOURI RIVER NATURAL RESOURCES DISTRICT **CONSERVATION ASSISTANCE APPLICATION**

Applicant:		Pro	gram:				
Address:				Section:			
Phone:	Par	nge:	County:				
SSN:				m:			
E-Mail:	Арг						
APPLICATION CERTIFICATION: I certify that I ar Conservation Assistance Program of the Papio-M construction of the practices until receipt of the Dispractice (10 years), I destroy or allow the practice by the District for such practices. I further certify the of the same.	issouri River Natur strict's written author to be destroyed or	ral Resources Discorization. If, before rendered ineffect	trict for the practices list the expiration of the Di live, I agree to refund the	ed on this application. I agree to not begin strict-specified useful lifespan of any listed e District on demand of all cost-share paid	Permission to be	ON AUTHORIZATI egin construction is s River Natural Resou	granted by the
I agree to complete the requested practices by June 1 September 1				r 15 December 31	Date		
				Approved by:			
Applicant Signature				e	EXPIRATION DATE: Practices must be completed by:		
PPLICANT'S REQUEST Cost-Share Percent:			COMPLETED PROJECT		Cost-Share Percent:		
Conservation Practice	Unit Estimate	Cost-Share Rate	Cost-Share Estimate	Conservation Practice	Unit Amount	Cost-Share Rate	Total Cost-Share
Cost-Share Estimate				Total Cost-Share Payment			
				PERFORMANCE STATEMENT: The practices shown above have been performed to the extent shown above and meet Papio NRD and USDA specifications.			

The Papio-Missouri River Natural Resources District, its directors, employees and contractors are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by Papio NRD and/or the U.S. government.