



APPLICATION WORKSHEET FOR COST SHARING ASSISTANCE

Fill out and submit this worksheet and any supplemental items to Cascadia Conservation District, located at 14 N. Mission St, Wenatchee, WA 98801.

SECTION 1. APPLICANT INFORMATION

Applicant Name _____

Mailing Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Farm Name _____

Farm Address _____ City _____ State _____ Zip _____

Farm Description (size, crop, animals, etc) _____

Legal Description _____

Parcel # _____ Is this parcel adjacent to a waterbody? YES NO

SECTION 2. BACKGROUND

- A. Are you a current district employee, or an associate supervisor? Yes No
- B. Do you have a written plan for your current operation that includes implementation of the proposed Best Management Practices (BMPs)? (please include a copy with your worksheet) Yes No
- D. Has your plan been approved by the district or other authorized signatory (such as the DNR or NRCS on a forest stewardship plan)? Yes No
- F. Have you completed conservation practices prior to this project? Yes No
- G. If cost-sharing assistance is approved for your operation, will you contribute labor, equipment, or materials during installation of the practice(s)? Yes No
- H. Would you allow your project to be a demonstration site for project tours? Yes No
- I. Is this project part of an interagency collaboration or partnership? Yes No
- J. Has a cultural resource consultation been done on this parcel? If so, when? _____ Yes No
- K. Will you be willing to monitor and/or allow CCD staff to do effectiveness monitoring of your project? Yes No
- L. (Forestry projects) Is the unit a part of a recognized Firewise community? Yes No
- M. (Forestry projects) Has there been a Firewise home assessment on the property (offered free from Cascadia CD)? Yes No
 (Forestry projects) Have any parcels directly adjacent to your property engaged in significant forest health practices (thinning, pruning)? Yes No
- L. When do you plan to install the proposed BMPs/conservation practices? _____

SECTION 3.

A. Description and location of environmental quality problem(s): Explain environmental quality problems and natural resource concerns that you have on your property. These should be problems and concerns that you would like to improve using Best Management Practices (BMPs) or Conservation Practices. Include descriptions and locations of problems and proposed solutions. Photos of the environmental problems should be attached if possible.

B. Best Management Practices (BMPs) or Conservation Practices needed to correct environmental quality problem(s): Refer to the list of eligible practices on the FAQ sheet and produce a list of the BMPs or conservation practices that are needed to improve the environmental quality problems or natural resource concerns that you identified in Section 3A. There may be other eligible practices not listed on the FAQ sheet.

C. Description of environmental quality benefits that are expected with BMP installation: Explain potential improvements to any aspect the environment.

SECTION 4. BUDGET

Provide estimated cost information for **each** proposed BMP or conservation practice. Be as accurate and complete as possible since this estimate will be used for the budget in your cost share contract. Use additional sheets if more space is needed. Attach any bid information if available.

BMP/Conservation Practice _____

Parts/Materials	_____	\$	_____
Labor	_____ Hours @ \$ _____	\$	_____
Equipment	_____	\$	_____
Other	_____	\$	_____
Total		\$	_____

BMP/Conservation Practice _____

Parts/Materials	_____	\$	_____
Labor	_____ Hours @ \$ _____ = \$ _____		
Equipment	_____	\$	_____
Other	_____	\$	_____
Total		\$	_____

BMP/Conservation Practice _____

Parts/Materials	_____	\$	_____
Labor	_____ Hours @ \$ _____ = \$ _____		
Equipment	_____	\$	_____
Other	_____	\$	_____
Total		\$	_____

BMP/Conservation Practice _____

Parts/Materials	_____	\$	_____
Labor	_____ Hours @ \$ _____ = \$ _____		
Equipment	_____	\$	_____
Other	_____	\$	_____
Total		\$	_____

Total Project Cost Estimate (sum of all BMP/Conservation Practices) **\$** _____

SECTION 5. SIGNATURE

I certify that the information provided is true and accurate to the best of my knowledge.

Applicant Signature

Position

Date

Please submit worksheet and supplemental items to:
Cascadia Conservation District
14 N. Mission St
Wenatchee, WA 98801

Application Received: _____

Application Reviewed: _____

Application CPDS Entry: _____