

Central Platte NRD



Cost Share Programs

TABLE OF CONTENTS

Central Platte NRD Cost Share Programs.....	1
Nebraska Soil & Water Conservation Program and CPNRD c/s.....	2
Explanation of Compliance Sheet.....	3
Nebraska Soil & Water Conservation Programs (funds from state).....	4-5
NSWCP-Eligible NE Conservation (NC) Practices.....	6-12
Flow Meter Cost Share.....	13
Streambank Stabilization Cost Share.....	14
Well Decommissioning Cost Share.....	15
Center Pivot Incentive.....	16-17
Windbreak and Weed Barrier.....	18
Approval letter example for cost share.....	19
Urban Forestry Program.....	20
Urban Forestry Program Application.....	21
Prescribed Burn Cost Share Program.....	22
	23
Buffer Strips.....	25
Cooperative Contract for Buffer Strip Program.....	28-29
Buffer Strip Program Description and Guidelines.....	30
Buffer Strip Program Application for Participation.....	31-32
Phase II/III Center Pivot Incentive Program Application.....	33
Flow Meter Cost Share Program Application.....	34
Prescribed Burn Cost Share Program Application.....	35
Tree Planting Cost Share Program Application.....	36
Well Decommissioning Cost Share Application.....	37
Nebraska Soil & Water Conservation Cost Share Application.....	38
NSWCP Planned Grazing System Justification for Approval.....	39
NSWCP Irrigation Water Mgmt Practice Justification for Approval.....	40
W-9 (Request for Taxpayer Id Number and Certification).....	41-45
Tree Planting Program Guidelines.....	46-49
Tree Order Form	50
Weed Barrier/Tree Tube Order Form	51
District Tree Planting Check List	52
Sensor Based Nutrient Management Cost Share Application	53
Sensor Based Nutrient Management Cost Share	54
Tree and Shrub Planting Plan.....	55
Form 13.....	56-57
Central Basin CREP Program.....	58-60
United States Citizenship Attestation Form	61
	62
	63
Streambank Stabilization Application	64
	65
	66
	67
Cover Crop Cost Share Application	68
Cover Crop Cost Share	69
Nitrogen Mgmt Program Rules & Regulations	70
Grazing Deferment.....	71
Grazing Deferment Application.....	72
W-9 / US Citizenship form Combined (State of Nebraska Form)	73
Reverse Osmosis Application	74
Reverse Osmosis Program	75
	76
Burn Preparation Application	77
Burn Preparation Information	78
Chemigation Incentive Application	79
Chemigation Incentive Program	80

CENTRAL PLATTE NRD COST SHARE PROGRAMS

Nebraska Soil and Water Conservation Program:

50% cost share:

- Terrace Systems
- Terrace Underground Outlets
- Water Impoundment Dams
- Grade Stabilization Structures
- Diversions
- Grassed Waterways
- Water and Sediment Control Basins
- Dugouts for Livestock Water
- Pasture Planting or Range Seeding
- Critical Area Planting (grass)
- Windbreaks, Drip Systems and Weed Barrier
- Windbreak Renovation
- Planned Grazing Systems
- Streambank Stabilization
- Repair of Practices
- Irrigation Tailwater Recovery Pits
- Underground Return Pipe from Reuse Pits
- Irrigation Water Management:
 - Flow Meters
 - Goose Necks
 - Drop Pipes and Conversion Nozzles
 - Rainfall Auto-shutoff Valves
 - Buried Pipeline to Convert Gravity Systems to Pivots
 - Subsurface Drip Irrigation System
 - Soil Moisture Sensors and Data Readers
- Brush Management

Central Platte NRD:

60% cost share:

- Well Abandonment

50% cost share:

- Streambank Stabilization
- Urban Forestry Program
- Prescribed Burn
- Cover Crop
- Flow Meter (\$800)
- Burn Preparation

75% cost share:

- Windbreaks and Weed Barrier

\$30 Per Acre:

- Grazing Deferment (max \$30,000)

\$13.50 Per Acre:

- Sensor Based Management of Fertigation (max 320 Acres)

\$750 Per System:

- Reverse Osmosis

\$7,000 Max (2):

- Chemigation Incentive

Central Platte NRD Center Pivot Incentive – Maximum payout of \$7,500
 (\$5.77 per foot of pivot installed)

Buffer Strip Program – Nebraska Department of Agriculture

NEBRASKA SOIL & WATER CONSERVATION PROGRAM AND CENTRAL PLATTE NRD COST SHARE PROGRAMS

Applicants for cost share through the Nebraska Soil and Water Conservation Program Must complete the practice and the required paperwork five (5) months after the approval date or June 1, whichever comes first.

An applicant's failure to comply may result in the loss of all or part of the cost share.

It shall be the policy of the Central Platte Natural Resources District Board of Directors:

1. To provide cost share on certain soil and water conservation, flood control, and water quality practices, subject to funds available and based upon priorities established by the Board, to landowners and/or operators across the District who farming operations are in compliance with the rules and regulations of the Central Platte NRD's programs. Programs requiring compliance include, but are not limited to: Groundwater Management (Quality, Supply, Irrigation Runoff, and Chemigation) and Erosion and Sediment Control.
2. Landowners shall be considered in compliance and eligible if the land on which the practice is to be installed, as well as all other land owned by that landowner and operated by the same operator, are in compliance, including operator certification.
3. Owner/Operator shall be considered in compliance and eligible if the owner/operator and all lands owned and operated by him/her are in compliance.
4. Operator shall be considered in compliance and eligible if the operator and all lands operated by that operator are in compliance.
5. Compliance shall be required for eligibility at time of application and shall be required for eligibility prior to payment of cost share funds.
6. Claims for payment submitted but being held subject to compliance shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application(s) cancelled. Funds being held for reimbursement of the application and claim for payment shall then revert back to the appropriate cost share fund and be available for commitment to other cost share applications.
7. The NRCS form (NE-ENG-80) will be used as the official reporting form for rainfall, irrigation water applied and ET and will need to be done by November 1st for the following 3 years. The producer will be encouraged to supply evapotranspiration (ET) data the first year (CPNRD can obtain ET data the initial year) and producer will be required to supply ET data in succeeding years.

ACKNOWLEDGEMENT

I have read and understand the above
policy statements

NAME

EMAIL

EXPLANATION OF COMPLIANCE SHEET

All producers applying for cost share through the Central Platte Natural Resources District must be in compliance with rules and regulations of Central Platte's regulatory programs. There are two areas that a person who takes an application for cost share should check with the producer before he/she leaves the office.

1. **CERTIFICATION:** Producers farming within a Phase II or III area of the Groundwater Nitrogen Management Program growing corn, potatoes or sorghum must be certified. In the case of corporations and family operated farms, only one person needs to be certified. That person should be the person who determines how much fertilizer is to be applied. Persons who have their land custom farmed or have their fertilizer applied by a dealer must still be personally certified. A dealer or crop consultant's certification will not be accepted.

There are several different certifications (pesticide, chemigation, nitrogen management, etc.) so it is important that the producer checks to make sure he/she is certified with the District for the Nitrogen Management Program. This card has Central Platte's name on it. Other NRD's nitrogen management certification is also accepted.

Producers become certified by taking a test provided by the Central Platte Natural Resources District.

2. **NITROGEN MANAGEMENT FORMS:** Producers farming in a Phase II or Phase III area of the Groundwater Nitrogen Management Program must also take water and soil samples and file forms with the District. The planning part of the forms is due March 1st and the production part of the form is due December 31st of each year. When a producer applies for cost share, he/she must have his nitrogen management forms in the Central Platte NRD office by the above dates each year in order to be eligible. The Phase II/III areas include parts of Buffalo, Dawson, Hall, Merrick, Nance, Platte and Polk Counties.

OTHER: There are other areas of compliance that will also be checked by the Central Platte NRD staff, which could affect the producer's eligibility for cost share. Every producer must be in compliance with the Erosion and Sediment Control rules and regulations, Irrigation Runoff, Chemigation and some restrictions on the times and methods fertilizer is applied in the Groundwater Nitrogen Management areas. Other requirements for the Groundwater Nitrogen Management areas include monitoring water applications, taking credits for past legume crops and manure/sludge applications and a copy of lab tests for soil, water and source of manure/sludge must be attached to March 1st form.

COMPLIANCE CHECK: Compliance is checked when the producer applies for cost share and when a bill is submitted. If a producer is in compliance when the application is made and approved, but not in compliance when the bill is submitted, payment will not be made until the producer gets into compliance. However, that payment will only be held for 90 days. After the 90 day period, the payment will not be made.

Nebraska Soil and Water Conservation Program
(Funds come from the State)

Eligible Practices:

- NC-1 Terrace Systems
- NC-2 Terrace Underground Outlets
- NC-3 Water Impoundment Dams
- NC-4 Grade Stabilization Structures
- NC-5 Irrigation Tailwater Recovery Pits
- NC-6 Diversions
- NC-7 Grassed Waterways
- NC-8 Water and Sediment Control Basins
- NC-9 Dugouts for Livestock Water
- NC-10 Pasture Planting or Range Seeding
- NC-11 Critical Area Planting (grass)
- NC-12 Windbreaks, Drip Systems and Weed Barrier
- NC-13 Underground Return Pipe from Irrigation Tailwater Recovery Pits (\$3500 cap)
- NC-14 Planned Grazing Systems (\$7500 cap)
- NC-16 Windbreak Renovation
- NC-17 Irrigation Water Management (\$5000 per landowner per year cap):
 - Flow Meters
 - Goose Necks
 - Drop Pipes and Conversion Nozzles
 - Rainfall Auto Shutoff Valves
 - Buried Pipeline to Convert Gravity Systems to Pivots
 - Subsurface Drip Irrigation System
 - Soil Moisture Sensors and Data Readers
- NC-18 Streambank Stabilization
- NC-19 Repair of Practices
- NC-20 Brush Management (\$10,000 per landowner per year cap)

***** \$10,000 Max on all NSWCP Cost Share Practices, unless otherwise noted. *****

Cost share on all above is 50% of actual costs or 50% of county average costs, whichever is less.

As long as you are a public entity you are eligible for state cost share money. Schools are *not* eligible.

Every landowner must complete a W-9 and US Citizenship form in order to receive cost share.

On windbreak renovation, a plan must be reviewed and approved by a forester of the Nebraska Forest Service. The Landowner must agree to replant the windbreak and no payment for a windbreak renovation practice will be made until the windbreak has been replaced.

Use NSWCP-3 Application Forms. Applications must be in the name of the landowner with corresponding social security number or tax ID number.

Applications for cost share are not effective until approved by the NRD Board of Directors. After approved, application will be returned to the Natural Resources Conservation Service and landowner will be notified by NRD concerning approval.

Practices must be planned and installed according to Natural Resources Conservation Service Specifications.

Claims for payment will not be accepted more than five months from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made or due. *Sales tax is to be included for cost share.*

Maintenance on a practice is not eligible for cost share.

The landowner must agree that if any or all of the installed practices shall be removed, altered, or modified so as to lessen their effectiveness without consent of the NRD for a period of ten years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Nebraska Department of Natural Resources.

Additional terms for NC-17 – Irrigation Water Management:

1. Limit of \$5,000.00 per plan per landowner per year with the year starting at the approval date.
2. Plan must be developed on ASCS tract basis (one plan per tract).
3. Producer must include a flow meter or some type of hour meter, with the NRD certifying the output of the well.
4. Cost share on center pivot drop pipes, regulators, and conversion nozzles (as a package installation) available on system currently operating above 35 PSI at all system nozzles with sprinklers on mainline pipe. System must also be on site and in place for at least 3 years.
5. Regarding cost share on buried pipeline from well to center pivot point, if the field in question is being operated as a gravity system at the time the cooperator signs a NSWCP cost share application, the application can be approved and the pipeline installed with cost share assistance, even if the center pivot is installed prior to the time the pipeline is approved for cost share and installed. However, the pipeline design and total system design review must occur prior to installation of the center pivot even though the pipeline may not yet be approved for cost share assistance.
6. Even though there are no extensions on cost share in Central Platte; this practice will carry the possibility of up to a two-year extension.
7. A plan can be modified by amendment if the modification is according to NRCS specs.
8. The NRCS form will be used as the official reporting form for rainfall, irrigation water applied and ET.
9. Producer will be encouraged to supply evapotranspiration (ET) data the first year (CPNRD can obtain ET data the initial year) and producer will be required to supply ET data in succeeding years.
10. Producer will be required to submit reporting form to NRCS by November 1 each year the plan is being implemented as well as the next two years after completion of the practice and the SCS will review these forms with the producer.
11. Landowner must complete and sign form NSWCP-14.
12. Land must have been irrigated 2 out of the last 5 years, or must be offset, with an equal number of acres, irrigated by gravity 2 of the last 5 years.

Additional terms for subsurface drip irrigation systems:

1. Land must have been irrigated two out of the last five years.
2. No land under the irrigation system is to be newly irrigated land.
3. Land cannot be designated as highly erodible land due to water erosion.

NEBRASKA SOIL AND WATER CONSERVATION PROGRAM

ELIGIBLE NEBRASKA CONSERVATION (NC) PRACTICES

<u>IDENTIFICATION</u>		<u>PRACTICE</u>
<u>Practice</u>	<u>NC – 1</u>	<u>Constructing Terrace Systems</u>
		Purpose: <i>To control erosion on cropland, to conserve water and to reduce pollution</i>
	A	Side Slopes 13.5 feet and over
	B	Parallel, cut and fill
	C	Flat Channel
	D	Push-up
	E	Parallel Flat Channel
	F	Seed for back slopes (critical area)
	(1)	Common
	(2)	Certified
	G	Slope of 10% or greater
	H	Extra Long Terrace Slopes
	J	Narrow Base Terrace
<u>Practice</u>	<u>NC – 2</u>	<u>Constructing Terrace Underground Outlets</u>
		Purpose: <i>To dispose of excess water from a terrace system without causing erosion.</i>
	A	Materials for Underground Outlets (see Exhibit I)
<u>Practice</u>	<u>NC – 3</u>	<u>Constructing Water Impoundment Dams</u>
		Purpose: <i>To impound runoff, conserve water, prevent erosion, prevent pollution, and to enhance groundwater recharge.</i>
	A	Earth Moved – Excavation
	B	Earth Fill – Class A compaction (moisture controlled)
	C	Earth Fill – Class C
	D	Seed (critical area)
	(1)	Common
	(2)	Certified
	E	Fencing
	F	Other construction items (see Exhibit 1)
	G	Mulching
<u>Practice</u>	<u>NC – 4</u>	<u>Constructing Grade Stabilization Structures</u>
		Purpose: <i>To stabilize the grade in an existing watercourse to prevent or heal gully situations.</i>
	A	Earth moved - Excavation
	B	Earth Fill – Class A compaction
	C	Earth Fill – Class C compaction
	D	Seed (critical area)
	(1)	Common
	(2)	Certified
	E	Fencing
	F	Other Construction Items (see Exhibit 1)
	G	Mulching

IDENTIFICATION**PRACTICE**

<u>Practice</u>	<u>NC – 5</u>	<u>Constructing Irrigation Tailwater Recovery Pits with or without Underground Return Pipe</u> Purpose: <i>To impound runoff from irrigated fields for reuse; hence, conserving groundwater.</i> Cost-share Rate: 50% of average or actual, whichever is less.
	A	Earth moved – excavation
	B	Earth Fill – Class A compaction
	C	Earth Fill – Class C compaction
	D	Seed (critical area)
	E	
	(1)	Common
	(2)	Certified
	F	Other Construction Items (see Exhibit 1)
	G	Mulching
		(SEE PRACTICE NC-13 FOR UNDERGROUND RETURN PIPE)
<u>Practice</u>	<u>NC – 6</u>	<u>Constructing Diversions</u> Purpose: <i>To divert water from areas where it is in excess to sites where it can be used or disposed of safely.</i>
	A	Earth moved
	D	Seed (critical area)
	(1)	Common
	(2)	Certified
	E	Seeding
	(1)	Standard Drill
	(2)	Grassland Drill
	G	Other Construction Items (see Exhibit 1)
<u>Practice</u>	<u>NC – 7</u>	<u>Constructing Grassed Waterways</u> Purpose: <i>To shape natural or constructed waterways to required dimensions and vegetate for safe disposal of runoff from a field, diversion, terraces or other structure.</i>
	A	10-19.9 cross-section, earth moved, square feet
	B	20-29.9 " " " " " "
	C	30-39.9 " " " " " "
	D	40-49.9 " " " " " "
	E	50+ " " " " " "
	F	Seed
	(1)	Common
	(2)	Certified
	G	Seeding
	(1)	Standard Drill
	(2)	Grassland Drill
	H	Mulching
	I	Side Dikes
<u>Practice</u>	<u>NC – 8</u>	<u>Constructing Water-and-Sediment-Control Basins</u> Purpose: <i>To reduce on-site erosion, reduce sediment, reduce sediment content in water, intercept and conduct surface runoff through subsurface conduits to stable outlets, reduce peak rate or volume of flow at downslope locations, reduce flooding, prevent gully development, reform the land surface, and improve farmability.</i>

IDENTIFICATION**PRACTICE****Practice** **NC – 8****Constructing Water-and-Sediment-Control Basins**

(CONTINUED)

- | | |
|-----|---|
| A | Excavation |
| B | Earth Fill - Class A compaction (moisture controlled) |
| C | Earth Fill - Class C compaction |
| D | Seed (critical area) |
| (1) | Common |
| (2) | Certified |
| E | Other Construction Items (see Exhibit 1) |
| F | Mulching |

Practice **NC – 9****Constructing Dugouts for Livestock Water**
(runoff collection only)

Purpose: *To create an impoundment for livestock water use by excavating to collect runoff in grassland.*

- | | |
|-----|--------------------------|
| A | Earth Moved - excavation |
| B | Seed (critical area) |
| (1) | Common |
| (2) | Certified |
| C | Seeding |
| (1) | Standard Drill |
| (2) | Grassland Drill |
| D | Fencing |

Practice **NC – 10****Pasture Planting or Range Seeding (land use conversions)**

Purpose: *To establish grass on land being converted from other uses or the renovation of existing pasture or range.*

- | | |
|-----|---|
| A | Seed |
| (1) | Common |
| (2) | Certified |
| B | Seeding |
| (1) | Standard Drill |
| (2) | Grassland Drill |
| (3) | Range Interseeder |
| C | Chemicals for seedbed preparation when seeding in existing cover. |

Practice **NC – 11****Critical Area Planting (grass)**

Purpose: *To stabilize the soil, reduce damage from sediment and runoff to downstream areas.*

- | | |
|-----|----------------------|
| A | Seed (critical area) |
| (1) | Common |
| (2) | Certified |
| B | Seeding |
| (1) | Standard Drill |
| (2) | Grassland Drill |
| (3) | Hydroseeder |
| C | Mulching |
| D | Fencing |
| E | Shaping and Filling |

IDENTIFICATION

PRACTICE

Practice

NC – 12

Windbreaks

Purpose: *To establish a stand of trees to conserve soil and moisture and to prevent erosion.*

- A Trees, including planting and chemical weed control the first year.
- B Trees, including planting
- C Chemical Weed Control, first year
- D Trees, including replanting
- E Drip Irrigation System, all appurtenances beginning with in-line screen and pressure regulator (see Exhibit 1)
- F Fencing, where necessary to provide protection from livestock
- G Rodent Control
 - (1) Pocket Gophers
 - (a) Hand Probe
 - (b) Hand Poisoning
 - (c) Burrow Builder
- H Fabric Weed Barrier
(not to be used in conjunction with C or E above)

Practice

NC – 13

Constructing Underground Return Pipe from Irrigation Tailwater Recovery Pits

Purpose: *To provide a permanent conveyance facility for water impounded by an approved Tailwater Recovery Pit to the water supply that created the tailwater.*

- A **Cost-Share Rate:** 50% of average or actual, whichever is less.
- B Other Construction Items (See Exhibit 1)

Practice

NC – 14

Planned Grazing Systems

Purpose: *To reduce erosion and improve water quality by maintaining or improving plant cover for increased forage production, enhanced wildlife habitat, grazing uniformity and water use efficiency.*

- A Cross Fencing
 - (1) Standard
 - (2) Suspension
 - (3) Electric
 - (4) Perimeter Fencing (Restricted to: (a) lands remaining in grass for pasture within two years of completing enrollment in a Federal Conservation Program; or (b) cropland converted to grassland for pasture.)
- B Water Supply
 - (1) Well
 - (a) Drilling and Casing Installation
 - (b) Cost of Casing
 - (c) Cost of Gravel Packing
 - (2) Pipeline Installed
 - (3) Tank Installed
 - (4) Spring Development

IDENTIFICATION

PRACTICE

Practice

NC – 14

(5)

(a)

(b)

(1)

(2)

(c)

(6)

(a)

(b)

(c)

C

(1)

(a)

(b)

(c)

(2)

(a)

Planned Grazing Systems (CONTINUED)

Livestock Water Dugouts, high water table

Earth Moved, excavation

Seed (critical area)

Common

Certified

Mulching

Pumping Plants

Electrical

Solar

Windmill

Rodent Control

Pocket Gophers

Hand Probe

Hand Poisoning

Burrow Builder

Prairie Dogs

Zink Phosphide/Aluminum Phosphide

Practice

NC – 15

Irrigation Surge Valves

** Practice NC-15 RESCINDED as separate practice effective 7-1-94*

Practice

NC – 16

Windbreak Renovation

Purpose: *To provide for the restoration of farmstead or field windbreaks that have been rendered substantially ineffective due to the death of trees or other windbreak plantings as a result of weather, disease, or other natural causes.*

A

Procedures: Specifications are to be based on NRCS (formerly SCS) Technical Guides. An additional requirement is that the windbreak renovation plan is to be based on a plan reviewed and approved by a forester of the Nebraska Forest Service. The forester is to certify that the windbreak has lost its effectiveness, should be renovated and, that they approve the plan of renovation. Costs are to be based on average unit costs, where they exist.

ADDITIONAL LIMITATIONS ARE AS FOLLOWS:

(1)

In no instance will payment from the Soil & Water Conservation Fund be based on a cost greater than the state-wide average unit cost adopted by the USDA-FSA (formerly USDA-ASCS) this practice.

(2)

This practice is not to include the replanting of the windbreak. Those costs could be, if approved by the NRD, included in the previously-approved windbreak practice or paid for from other sources.

IDENTIFICATION

PRACTICE

Practice

NC – 16

(3)

Windbreak Renovation (CONTINUED)

No approval for a windbreak practice will be made by an NRD unless, and until, the landowner also agrees to replant the windbreak and no payment for a windbreak renovation practice will be made from the Soil & Water Conservation Fund until the windbreak has been replanted.

Practice

NC – 17

A

B

C

Irrigation Water Management

Purpose: *To conserve groundwater and surface water by improving water use efficiency on irrigated lands.*

Cost-share Rate: 50% of average or actual, whichever is less.

Eligible Components: Surge valves, flow meters, goose necks, land leveling (on gravity systems only and on land that has been irrigated in four of the five years) drop pipes, conversion nozzles, rainfall auto-shutoff valves, reuse pits, return pipe, soil moisture sensors and data readers, variable rate irrigation, variable frequency drive and the necessary appurtenances to allow each of the components to function properly. Consultant fees are not cost-shareable items.

As an incentive to landowners to conserve water, cost-share on the cost of a buried pipeline from an existing irrigation well ***or*** surface water source now being operated as a gravity system to the pivot point of a new pivot system or the withdrawal point of an alternate efficient sprinkler system will be allowed as part of the Irrigation Water Management Practice of the Nebraska Soil and Water Conservation Program (NSWCP). Buried main pipelines to serve a surge valve system is also allowed. These installations and systems must meet Natural Resources Conservation Service (NRCS) technical specifications.

ADDITIONAL LIMITATIONS ARE AS FOLLOWS:

(1)

Maximum of 1400 feet of buried pipe;

(2)

Land must have been irrigated at least four out of the last five years. If, however, land was enrolled in a federal conservation program that required foregoing irrigation during any of the preceding five years, eligibility will be determined based on the years before and after the program period;

(3)

No more than 10% of land under the pivot system is to be newly irrigated land; and

(4)

Cost-share is not allowed for cost of electrical installation and equipment. As with the current irrigation water management practice, cost-share shall be limited to a maximum of 50%.

<u>IDENTIFICATION</u>	<u>PRACTICE</u>
<u>Practice</u> NC – 17 D	<u>Irrigation Water Management</u> (CONTINUED) Subsurface drip irrigation systems: cost-share on systems installed in accordance with NRCS standards and specifications at a maximum of 50% of actual or average costs, whichever is less. Cost-share will be allowed on only those systems that utilize groundwater as their water source. Eligible components would include: filtration system(s), necessary valves and controllers, pipe and fittings for mains, sub-mains and manifold lines, flush lines, drip tape, chemical injection port, and other appurtenances necessary for meeting NRCS standards and specifications. Costs not included would be the pumping plant, fertilizer or chemical injection systems, and electrical installations.
<u>Practice</u> NC – 18 A	<u>Stream Bank Stabilization</u> Purpose: <i>Restoration and protection of stream banks and riparian areas adjacent to minor water courses. This practice can be done on a stand-alone basis or if needed, in conjunction with a grade stabilization structure or diversion.</i> Eligible Components: Grass seeding, earth fill, rock riprap, trees, fencing, underground outlets, pipes, sand and gravel, concrete, and other components included as part of practices utilized in compliance with NRCS technical specifications.
<u>Practice</u> NC – 19 A	<u>Repair of Practices</u> Purpose: <i>Cost-share under the Nebraska Soil and Water Conservation Program (NSWCP) is authorized for the repair of the following practices or practice elements when the damage to the practice is due to natural cause(s) rather than improper or inadequate maintenance; terraces, dams, diversions, grade stabilization structures, and livestock water supply pipelines. Any repair work must return the practice to a condition that meets technical specifications of the Natural Resources Conservation Service.</i> Eligible Components: Listed under the eligible practice being repaired.
<u>Practice</u> NC – 20 A	<u>Brush Management (mechanical and chemical means)</u> Purpose: <i>Removal or reduction of non-herbaceous plants to restore natural plant community balance, create the desired plant community, and reduce competition between desired and unwanted plants.</i> Practice to be planned in a manner that it will not adversely affect threatened or endangered species (plant or animal) or their habitat. Only chemicals approved by the Nebraska Department of Agriculture may be used, and in accordance with label directions. Mechanical and chemical treatment methods at actual cost not to exceed NRCS established maximums.

CENTRAL PLATTE NRD FLOW METER COST SHARE PROGRAM

Purpose of Cost Share Practice:

A Flow Meter is used to accurately measure the amount of water that is applied during an irrigation application. By using a Flow Meter you can manage how much water is applied which will help the irrigator conserve water and protect water quality.

Cost share on a flow meter is 50% of the actual cost up to \$800.00 maximum with a limit of one meter per landowner per year with the year starting at the approval date.

Use Central Platte NRD Flow Meter Cost Share application Forms. Application must be in the name of the landowner with corresponding social security number or tax ID number. NRCS certification is required.

Applications for cost share are not effective until approved by the NRD Board of Directors. After approved, application will be returned to County Natural Resources Conservation Service office and landowner will be notified by NRD concerning approval. ***Applications must be approved before project can be started.***

Claims for payment will not be accepted more than five months from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made. *Sales tax is to be included for cost share.*

The landowner must agree that if the installed flow meter is removed, or not maintained for a period of five years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte Natural Resources District.

US Citizenship must accompany application.

CENTRAL PLATTE NRD STREAMBANK STABILIZATION COST SHARE PROGRAM

Purpose of Cost Share Practice:

Streambank Stabilization is used to reduce runoff and stabilize areas for water quality.

Cost share is 50% of actual costs up to a maximum of \$3,000.00.

Use Central Platte NRD Streambank Stabilization Application Forms. Applications must be in the name of the landowner with corresponding social security number or tax ID number.

Applications for cost share are not effective until approved by the NRD Board of Directors. ***All applications must be approved before project can be started.***

The stabilization must be designed by an engineer or the NRCS. The landowner must apply for and receive all necessary Federal and State permits.

Claims for payment will not be accepted more than nine months from the date application is approved. Items of cost for which reimbursement is claimed must be supported by documentation of payments made.

The landowner must agree that if any or all of the installed stabilization shall be removed, altered, or modified so as to lessen their effectiveness without consent of the NRD for a period of five years after the date of receiving the payment, that portion of the claimed amount shall be refunded to the NRD.

US Citizenship must accompany application.

CENTRAL PLATTE NRD WELL DECOMMISSIONING COST SHARE PROGRAM

Purpose of Cost Share Practice:

This practice serves to prevent entry of vermin, debris, or other foreign substances into the well or well bore hole. Eliminate the physical hazard of an open hole to people, animals, and farm machinery. Prevent entry of contaminated surface water into well and migration of contaminants into unsaturated (vadose) zone or saturated zone. Prevent the commingling of chemically or physically different ground waters between separate water bearing zones.

Cost share rate is 60% up to \$750.00 maximum for any irrigation well, any well that pumps 50 gallons or less up to a \$500.00 maximum and any hand-dug well up to \$1,500.00 maximum.

Replacement wells are not eligible for cost share.

Use Central Platte NRD Well Decommissioning Application Forms.

Applications must be in the name of the landowner with corresponding social security number or tax ID number.

All applications must be approved before project can be started.

Natural Resources Conservation Service certification is not required.

A licensed water well contractor or licensed pump installation contractor is required to decommission the well and verify that the water well was decommissioned in accordance with state law, standards, rules, and regulations. If the well has been registered, landowners are required to provide the well registration (well log) to the well contractor as well as file the necessary Well Decommissioning Form with the Department of Water Resources, PO Box 94676, Lincoln NE 68509-4676 to get the decommissioned well off the records.

Claims for payment will not be accepted more than five months from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made.

US Citizenship must accompany application.

CENTRAL PLATTE NRD CENTER PIVOT INCENTIVE PROGRAM

Purpose of Cost Share Practice:

To promote efficient and uniform application of irrigation water to maintain adequate soil water for the desired level of plant growth and production without causing excessive water loss, erosion, or water quality impairment.

An incentive program to switch from gravity irrigation to a center pivot is available with the maximum payout of \$7,500.00, at a rate of \$5.77 per foot, with the following rules and regulations:

1. Applications may be made by the landowner or operator with a limit of a one application per owner/operator per year.
2. 100% of the land to be irrigated by the pivot system must have been irrigated by gravity 2 of the last 5 years, or must be offset with an equal number of acres, irrigated by gravity 2 of the last 5 years, to be converted from irrigated to non-irrigated land. All offset acres must be approved by the CPNRD prior to application acceptance, ranking, and consideration for funding by the NRCS/CPNRD.
3. Land may be in the Phase II or Phase III area. Phase III water quality rules must be followed and no more than the NRD recommended amount of fertilizer may be applied for the length of the agreement.
4. Pivot must be installed and used on stated field for a minimum of ten (10) years. Pivot may be moved to another field in Phase II or Phase III by written permission from the NRD for continued use for a consecutive period of ten (10) years. Failure to comply will result in a total refund to the NRD.
5. A used pivot is eligible for the incentive payment if purchased from a reputable dealer. Pivot must be purchased, not leased.
6. The system must meet NRCS Irrigation System Sprinkler (442) low-pressure specifications.
7. Original application evaluation will be completed by the NRCS office on the following point system:

SOIL INTAKE FAMILY:

3.0 intake family	6.0
2.0 intake family	5.0
1.5 intake family	4.0
1.0 intake family	2.0
0.5 intake family	1.0
0.3 intake family	0
0.1 intake family	0

DEPTH TO SAND/GRAVEL SUBSTRATUM:

<20"	4.0
20" – 40"	3.0
41" – 60"	2.0
>60"	0

MAXIMUM HIGH WATER TABLE:

<3'	1.0
3' – 5'	0.5
>5'	0

FURROW LENGTH VARIABILITY:

Variable over >50% of acres	5.0
Variable over <50% of acres	3.0
Uniform	0

FURROW LENGTH (length of run):

>2000'	4.0
1321' – 1999'	3.0
<1321'	0

SYSTEM SIZE:

=>120 acres complete rotation	0
=>120 acres partial rotation	-1.0
=>80 acres <120 acres	-2.0
=>40 acres <80 acres	-3.0
<40 acres	-4.0

1. Central Platte NRD will evaluate the applications according to nitrate levels.

CONTINUOUS SIGNUP

Use Central Platte NRD Center Pivot Incentive Program application form. Natural Resources Conservation Service certification is required.

Applications are not effective until approved by the NRD Board of Directors. After approved, application will be returned to County Natural Resources Conservation Service office and landowner/operator will be notified by NRD concerning approval. **All applications must be approved before project can be started.**

Application for cost share assistance for pipeline to convey water to pivot point to facilitate change from gravity irrigation to sprinkler irrigation may be made anytime prior to the new pivot system being delivered to the field site. Pivot installation prior to pipeline cost share application approval by the board does not disqualify the application for pipeline cost share provided the application was completed and submitted to the board prior to pivot system delivery on site. Pipeline applications submitted in conjunction with an application for the Central Platte NRD pivot incentive program will be considered a high priority application and approved for funding if the companion pivot is approved for funding by the board. In all cases, the pivot system must be installed and operational for the first irrigation season following cost shared pipeline installation regardless of the pipeline cost share approval date. Failure to have the pivot system on site and operational for the first irrigation season following cost shared pipeline installation will result in a refund of cost share earned, as determined by the board of directors.

Landowner/operator must present a **paid** bill for the purchase of the center pivot and the Natural Resources Conservation Service will check on the installation of the pivot.

Claims for payment will not be accepted more than five months from the date application is approved. Applicant must be in compliance with all rules and regulations of the CPNRD programs in order to receive payment. There are no extensions.

US Citizenship must accompany application.

CENTRAL PLATTE NRD WINDBREAK AND WEED BARRIER

Purpose of Cost Share Practice:

To reduce soil erosion from wind, to protect plants from wind related damage, to alter the microenvironment for enhancing plant growth (reduced evapotranspiration), to manage snow deposition, to provide shelter for structures, livestock, and recreational areas, to enhance wildlife habitat (by providing travel corridors, winter cover, food, or other benefits), to provide living noise screens, to provide living visual screens, to provide living windbreaks against airborne chemical drift, to delineate property and field boundaries, to improve irrigation efficiency, to enhance aesthetics, and to increase carbon storage.

When cost share funds are no longer available from Nebraska Soil and Water Conservation Program, applications for cost share for a windbreak and/or weed barrier may be made under this program. *Cost share is not available for windbreak renovation or drip irrigation.*

The cost share rate is 50% of actual costs or 50% of county average costs whichever is less, up to a maximum of \$3,000.00. With a minimum of 200 trees ordered to create a windbreak. Weed barrier will be cost shared as long as 200 trees are ordered. There is NO cost share available for replacement trees.

All cost share forms must be completed by August 1st in order to receive payment.

Use Central Platte NRD Tree Planting Cost Share Forms. Applications must be in the name of the landowner with corresponding social security number or tax ID number.

Applications for cost share are not effective until approved by the NRD Board of Directors. Once approved, the landowner will be notified by NRD.

Claims for payments will not be accepted more than nine months from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made. Sales tax is to be included for cost share.

The landowner must agree that if any or all of the installed practices shall be removed, altered, or modified so as to lessen their effectiveness without consent of the NRD for a period of ten years after the date of receiving payment, that portion of the claimed amount shall be refunded to the NRD.

US Citizenship must accompany application.

August 3, 2017

Name
Address
City State Zip

The Central Platte NRD Board of Directors has approved your cost share application for the following conservation practice:

Diversion

To be installed in the following legal description: SENW 13-8N-24W

Cost share approved for the following amount: \$1,665.00

You are required to obtain appropriate specifications from the NRCS prior to beginning installation of the conservation practice.

Please follow these 3 steps:

1. Obtain required conservation practice specifications from the NRCS
2. Note any restrictions and start times that may affect nesting birds and/or threatened and endangered species from the NRCS office.
3. Install the conservation practice
4. Provide paid bills to the NRCS and sign the original cost share form at the NRCS office.

IF THESE ITEMS ARE NOT COMPLETED IN FIVE MONTHS or JUNE 1st, whichever comes first, COST SHARE FUNDS WILL BE FORFEITED.

If you do not intend to install the conservation practice listed above, please contact your county NRCS office immediately, so that other pending applications may be funded.

If you have questions about this information, please contact the NRCS or this office.

Sincerely,

Kelly Cole
Programs Coordinator

CENTRAL PLATTE NATURAL RESOURCES DISTRICT URBAN FORESTRY PROGRAM

FUNDING:

Central Platte Natural Resources District will provide a 50% matching grant on trees and shrubs to cities or villages within the Central Platte Natural Resources District. Matching funds from the city or village must be for the cost of the trees and shrubs only.

Grants will be funded according to availability of NRD funds and applications will be reviewed by NRD Board and staff on a first come, first served basis. An Application not funded (because of lack of NRD funds) will be kept on file for the following year.

The NRD will provide a total of \$5,000.00 (maximum) in matching funds over a period of either one, two or three consecutive years. **An additional grant is available three years after the completion date of the previous grant.**

It is recommended that the city or village utilize the technical expertise of a nursery, District Forester, city arborist etc. in developing a tree plan.

APPLICATION MUST INCLUDE:

1. Name of city or village and contact person.
2. Time-table for completion of the project (or each phase of the project)
3. List of individual species of the trees and shrubs, size and number to be planted.
4. Itemized estimate of the total tree cost. If project is to be completed in phases, itemized estimate of tree cost for each phase (total project costs should not include ground preparation, planting or maintenance).
5. Map showing where trees will be planted (all trees must be planted on public property within the jurisdiction of a city or village).
6. Plans for maintenance and information on who will do the planting.

COMPLETION:

City or village must provide proofs of purchase of trees and shrubs. NRD funds will be paid upon completion of each approved yearly phase of the project and upon satisfactory final inspection and acceptance by an NRD staff member and an NRD Director.

CENTRAL PLATTE NRD URBAN FORESTRY PROGRAM APPLICATION

Revised 8-7-17

Public Entity _____

City of Village _____

Contact Person _____

Address _____

Phone _____ **Email** _____

YEAR 1: Estimated Completion Date: _____

Trees and Shrubs Size Quantity Total Cost

For Office Use Only: **Year 1**

Total Cost: _____ 50% Reimbursed _____

Date Paid: _____ NRD Representative _____

Remaining Balance Available for Project: _____

YEAR 2: Estimated Completion Date: _____

Trees and Shrubs Size Quantity Total Cost

For Office Use Only: **Year 2**

Total Cost: _____ 50% Reimbursed _____

Date Paid: _____ NRD Representative _____

Remaining Balance Available for Project: _____

YEAR 3: Estimated Completion Date: _____

Trees and Shrubs Size Quantity Total Cost

For Office Use Only: **Year 3**

Total Cost: _____ 50% Reimbursed _____

Date Paid: _____ NRD Representative _____

Remaining Balance Available for Project: _____

TOTAL ESTIMATED COST FOR ENTIRE PROJECT: _____

CPNRD Approved \$ _____

NRD Representative

Date

Supply map showing location of project and planting plan. Describe plans for maintenance and who will do the planting.

Additional sheets may be used to supply the required information.

Mail To: Central Platte NRD, 215 Kaufman Avenue Grand Island NE 68803

CENTRAL PLATTE NATURAL RESOURCES DISTRICT PRESCRIBED BURN COST SHARE PROGRAM

Purpose of Cost Share Practice:

To control undesirable vegetation, to prepare sites for harvesting, planting or seeding, to control plant disease, to reduce wildfire hazards, to improve wildlife habitat, to improve plant production quantity and/or quality, to remove slash and debris, to enhance seed and seedling production, to facilitate distribution of grazing and browsing animals, and to restore and maintain ecological sites.

Cost share is 50% of actual cost (or 50% of landowners share when other cost share is involved) not to exceed \$2,500.00 per landowner, per year. Each parcel of land is eligible to be cost shared every 7 years.

The cost of a prescribed burn by the Central Platte Natural Resources Districts is as follows:

Burns 40 acres or less = \$2,000 minimum charge
41-159 acres = An additional \$16/acre
160-319 acres = An additional \$8/acre
Burns over 320 acres will be determined on a case-by-case basis.

Use Central Platte NRD Prescribed Burn Cost Share Application Form. Application must be in the name of the landowner with corresponding social security number or tax ID number.

Applications for cost share are not effective until approved by the NRD Board of Directors. Landowner(s) will be notified by the NRD concerning approval.

The prescribed burn must be planned by a person or persons qualified to carry out such work. The prescribed burn plan must be reviewed and approved by the NRD's Prescribed Burn Coordinator before the prescribed burn can be accomplished. Landowner will be required to obtain a valid open burning permit as per Nebraska Statute 81-520.01.

The prescribed burn must be carried out by a qualified team or private company approved by the NRD Prescribed Burn Coordinator. Proof of adequate insurance and landowner liability agreement will be required before conducting any activity covered under this cost share program.

Claims for payment will not be accepted more than nine months from the date the application is approved. Items of cost for which reimbursement is claimed must be supported by documentation of payments made.

The Central Platte NRD accepts no liability for any prescribed burn activities associated with the cost share, application, application approval, prescribed burn plan, prescribed burn approval, or the prescribed burn itself.

US Citizenship must accompany application.

BUFFER STRIPS

A Partnership with the Nebraska Department of Agriculture providing strips of grass and/or trees that slow water runoff, trap sediment and enhance water infiltration in the buffer itself. They also trap fertilizers, pesticides, bacteria, pathogens and heavy metals, minimizing the chances of these potential pollutants reaching surface or groundwater sources.

Land adjacent to streams or permanent bodies of water, or existing filter strips established since January 1, 1996, are eligible.

This is a land rental program and does not include installation cost share dollars.

Contracts are 5 to 10 years in length.

- For irrigated cropland where CRP, CREP, or other governmentally-funded programs are also used, rental rates are \$250 per acre minus payments from the other programs.
- For irrigated cropland where CRP, CREP, or other governmentally-funded programs are not used, the rental rate is \$225 per acre minus any other program payments.
- For non-irrigated cropland enrolled in CRP, CREP or other governmentally-funded programs, the rental rate is equal to 20% of the average CRP soil rental rate.
- For non-irrigated cropland without CRP, CREP, or other governmentally-funded programs, the rental rate per acre is equal to 120% of the average CRP soil rental rate plus \$5 per acre, minus the payment rate from any other programs.
- In no case may payments from all programs exceed \$250 per acre.

There is a one-acre minimum.

Specific widths for either practice will follow NRCS standards.

These contracts are renewable.

Cancellation of all, or a portion, of this contract prior to its expiration date may warrant penalties equaling the total of all payments received, plus 25%, for the affected portion. In addition, acres in contract which are cancelled prior to the expiration date are ineligible for re-enrollment for two years.

US Citizenship must accompany application.

**COOPERATIVE CONTRACT FOR
BUFFER STRIP PROGRAM**

THIS CONTRACT made and entered into this ____ day of _____, 20____,
by and between _____ of _____,
hereinafter referred to as the "Cooperator," and the _____ Natural Resources
District, hereinafter referred to as the "District."

WHEREAS, LB 1126 as adopted by the 1998 Nebraska Legislature establishes the Buffer Strip
Act to encourage landowners to take sensitive land out of production for the purpose of reducing
agricultural pollutants in runoff;

WHEREAS, the District and the Nebraska Department of Agriculture are responsible for
implementing the Act and have established a Buffer Strip Program ("Program");

WHEREAS, the Cooperator desires to participate in the Program and has made an application to
enroll land in the Program; and

WHEREAS, the application has been approved by the District and the Nebraska Department of
Agriculture.

NOW, THEREFORE, in consideration of the promises and covenants contained herein, the
parties agree as follows:

I. THE COOPERATOR AGREES:

- A. To designate the tract(s) of land described in the application and shown in the
aerial photo(s) as a Buffer Strip for the purposes of this Program.
- B. To develop and maintain, throughout the term of this contract, the tracts enrolled
in the Program in the manner required by the Buffer Strip Act, its regulations, and
the terms of this contract.
- C. To control all noxious weeds on lands enrolled in the Buffer Strip Program.
- D. All haying and grazing of land enrolled in the program shall meet NRCS
conservation practice standards.
- E. The Cooperator shall immediately notify the district if land enrolled in the
Program also becomes enrolled in the CRP, or receives payment from any other
source, or if the land has, or is to be taken out of, the Program prior to the
termination of the contract. In addition, during the contract period, the
Cooperator shall notify the District if fields adjacent to the enrolled acres are
planted to grass, or other vegetation, which would cause the adjacent field to be
considered as something other than cropland through this program.
- F. To allow an inspection of the buffer strip to ensure compliance.

II. The District agrees:

- A. To administer the Program in the manner described and provided in Exhibit "A"
and as further provided herein.
- B. To make annual payments to the Cooperator as set forth in the contract, subject
to the availability of funds, as provided for in III (F).

III. It is mutually agreed:

A. That the following practices and payments will apply to this contract:

Tract No.	Acres	Payment Rate/Acre	Date Established	Expiration Date	Annual Payment	Total Contract Payment

B. The approved application submitted by the Cooperator, including the aerial photo and topographic map, as specified in the guidelines, is attached as Exhibit A and, by this reference, is made a part of this agreement.

C. Payments under this contract shall be sent to:

D. All payments made under this contract shall be made on _____ of each year, beginning in _____.

E. If the Cooperator fails to plant or maintain the buffer strip or is otherwise in violation of the contract, all future payments under the contract shall be forfeited, the contract may be terminated, and the Cooperator may be required to repay any payments previously received.

F. If sufficient funds are no longer available to make payments under the Program, the District may terminate or suspend the contract and all future payments under this contract.

G. Cancellation of all, or a portion, of this contract prior to its expiration date may warrant penalties equaling the total of all payments received, plus 25%, for the affected portion. In addition, acres in a contract which are cancelled prior to the expiration date are ineligible for re-enrollment for two years.

By signing this contract, the Cooperator certifies that the statement made herein and on the application are true, complete, and correct.

Landowner/Cooperator

Date

Social Security Number/Tax ID _____

Landowner/Cooperator

Date

Natural Resources District Representative

Date

NEBRASKA BUFFER STRIP PROGRAM

Description and Guidelines

Introduction

The Nebraska Buffer Strip Program (NBSP) was created by the Nebraska Legislature in 1998. The program encourages landowners to establish buffer strips, specifically filter strips and riparian forest buffers, along vulnerable surface water resources. Buffer strips are an effective means of reducing sediments and other pollutants in runoff. Funding for the program is from a fee assessed on pesticides registered for sale in Nebraska, and is administered by the Nebraska Department of Agriculture (NDA), Nebraska's natural resources districts (NRDs), and the USDA Natural Resources Conservation Service (NRCS).

Eligible Areas

Land eligible for enrollment in this program is cropland (in annual crops or legumes as part of a rotation) adjacent to perennial streams, seasonal streams, wetlands, permanent bodies of water, or existing buffer strips established after January 1, 1996. The area of the streams, wetlands, and permanent bodies of water are not eligible for enrollment except that three-dot blue line seasonal streams on USGS quadrangle maps that are cropped may be eligible for out of channel flow filter strips. Fields adjacent and parallel to the area to be buffered must be cropped (in annual crops or legumes as part of a rotation).

- Perennial streams are any solid blue line on USGS quadrangle maps or other streams with perennial flow that are verified on-site.
- Seasonal streams are any three-dot blue line on USGS quadrangle maps or any areas of concentrated flow with a defined bed and bank that has either a scoured bottom (from normal flow) or hydrophytic vegetation.
- Wetlands are any wetlands that meet permanently flooded, intermittently exposed, semi-permanently flooded, or seasonally flooded criteria. The wetlands protected by buffer strips cannot be cropped during the life of the contract.
- Permanent bodies of water are surface water bodies, such as lakes or ponds that provide water cover throughout the year.
- Areas in expiring NBSP contracts are eligible for re-enrollment within six months of expiration date.
- Areas in expiring continuous or regular CRP contracts are eligible for enrollment, provided the eligibility criteria above and NRCS practice specifications are met.
- Areas in NBSP, CRP, or CREP contracts which were cancelled early must wait two years before they are eligible for the NBSP, provided eligibility criteria and NRCS practice specifications are met.

Payment Rates

- For dryland cropland that is enrolled in the CRP, CREP, or other governmentally-funded programs, the NBSP payment rate per acre shall be 20% of the weighted average soil rental rate.
- For dryland cropland that is not enrolled in CRP, CREP, or other governmentally-funded programs, the NBSP payment rate per acre shall equal 120% of the CRP weighted average soil rental rate plus \$5, minus payments from any other source. (The CRP weighted average soil rental rate is the amount calculated before the incentive and maintenance rate are added.) In no case may the payment from all sources exceed \$250 per acre.
- For irrigated cropland enrolled in CRP, CREP, and/or any other governmentally-funded program, the NBSP payment rate per acre shall equal \$250, minus payments received from all other sources.
- For irrigated cropland not enrolled in CRP, CREP, and/or any other governmentally-funded program, the NBSP payment per acre shall be equal \$225, minus any other program payments.

Deadlines

- Funding availability for new applications is reviewed annually near the start of each calendar year but applications may be submitted at anytime. Depending on funding availability and program demand, applications may be held, reviewed, and approved on a periodic basis.

Process

1. The landowner works with the NRCS on tentative buffer strip locations and to complete the application.
2. The landowner submits the completed application to the NRD.
3. The NRD and the NDA consider the application.
4. If approved, the landowner enters into a formal agreement with the NRD.
5. The landowner establishes and maintains the buffer strip according to NRCS FOTG practice requirements.

General Terms

1. The contract length cannot be less than five, or more than ten, years.
2. Eligible buffer strips are filter strips (NRCS FOTG practice 393) and riparian forest buffers (NRCS FOTG practice 391).
3. The established vegetation must meet NRCS FOTG practice requirements.
4. Limited haying and grazing is allowed provided it meets NRCS FOTG practice requirements.
5. Minimum width is 20 feet for filter strips and 55 feet for riparian forest buffers (35 feet must be trees and 20 feet must be grass), unless NRCS FOTG practice requirements are greater.
6. Maximum width is 120 feet for filter strips and 180 feet for riparian forest buffers, unless NRCS FOTG practice requirements are greater. For streams, the maximums apply to each side of the stream.
7. Minimum size per application is one acre.
8. Fields adjacent and parallel to the area to be buffered must be cropped (in annual crops or legumes as part of a rotation) for the duration of the contract.
9. Failure to maintain the buffer strip according to contract requirements may result in forfeiture of past and future payments.
10. Early cancellation of all, or a portion of, a contract may warrant penalties of not more than the total of all payments received, plus 25% of one year's payment.
11. Buffer strips will be subject to compliance checks by NRD and/or NDA staff.

NEBRASKA BUFFER STRIP PROGRAM
Application for Participation

Name of Landowner:		Phone:	
Address:	City:	State:	Zip:
Natural Resources District:		County:	
Farm Number:	Tract Number:		

Site Information									
Site	Section	Township	Range	A	B	C	D	E	F
				Filter Strip Acres	Riparian Forest Buffer Acres	Stream Length	Total Buffer Length	Non-Irrigated Acres	Irrigated Acres
1									
2									
3									
4									
Totals				0.0	0.0	0.00	0.0	0.0	0.0

- A. Enter acres offered in filter strips. (Note: A + B = E + F)
- B. Enter acres offered in riparian forest buffer.
- C. Enter length of stream protected by buffer or distance around wetlands or permanent bodies of water.
- D. Enter total length of buffers (for streams with buffers on both sides, total each side of the stream).
- E. Enter acres of non-irrigated cropland.
- F. Enter acres of irrigated cropland (assessed for tax purposes as irrigated).

Contract Length Requested = years - (minimum of five years and maximum of ten years)

Are the offered acres down-gradient of adjacent cropland planted to annual crops, or legumes as part of a rotation? Yes___ No___ ([see next tab](#))

Rental Payments Received from Other Sources (does not include buffer establishment cost-share)

Enter \$/acre/year, practice establishment date, and contract expiration date for each source. If none, check here. ☐
(CRP/CREP includes the weighted average soil rental rate, plus incentives, plus the maintenance rate. List NRD pmt. for CREP separately)

USDA CRP, CREP	\$/acre/year		Estab. Date:		Contract expiration date	
NRD	\$/acre/year		Estab. Date:		Contract expiration date	
Other (list)	\$/acre/year		Estab. Date:		Contract expiration date	
Total Dollars	\$/acre/year	\$0.00				

Were the offered acres previously involved in a canceled NBSP, CRP, or CREP contract? ☐ Yes ☐ No

If so, enter cancellation date: Describe in remarks below and indicate on plan map the number and location of the acres involved.

Required Attachments

- Aerial photo - Identify the boundary of each buffer strip in ink. For buffer strips adjacent to wetlands, NRCS wetland determination must be delineated on the photo. List the length, average width, and acres for each buffer strip on the photo. Highlight each buffer strip with a yellow highlighter. A yellow highlighter facilitates any needed photocopying.
- USGS quadrangle map - With a yellow highlighter, highlight perennial and seasonal streams that are associated with the buffer strips. Do not put any ink or pencil marks on the USGS quadrangle maps. For streams not shown on USGS quadrangle maps, describe the conditions that make the buffer strips eligible in the remarks section below.

Remarks: _____
I certify that the above information is true, and I understand that if this application is approved, I will be required to enter into an agreement with the above-named Natural Resources District.

Landowner Signature: _____ Date:

Participation in this program is contingent upon review and approval of this application and the availability of funds.

NEBRASKA BUFFER STRIP PROGRAM (For Office Use Only – To Be Completed by NRCS)

Ranking Points Calculation

Stream Classification Points				Watershed Points			
Percentage of acres adjacent to: (enter % in decimals, i.e., 90% = 0.9)				Percentage of land within a priority watershed – see Nebraska Unified Watershed Assessment (enter % in decimals, i.e., 90% = 0.9).			
Perennial Stream =		x 9 =	0	8-digit HUC: _____			
Seasonal Stream =		x 6 =	0				
Wetland =		x 5 =	0	High Priority Category 1	x 3 =	0	
Perm. Water Body > 5 ac		x 6 =	0	Medium Priority Category 1	x 2 =	0	
Perm. Water Body < 5 ac		x 3 =	0	Low Priority Category 1	x 1 =	0	
Total Points 0				Total Points 0			
New Application Point – One (1) point for buffers to be installed after the date of this application, i.e., not pre-existing. ----->							
Stream Classification Pts. 0		+ Watershed Pts. 0		+ New App. Pts. 0		= 0 Grand Total Pts.	

Weighted Average Soil Rental Rate (SRR) Calculation

(Complete this for non-irrigated cropland only)

	Map Unit Symbol	Acres	CRP Soil Rental Rate	Rent
Primary			=	\$0.00
Secondary			=	\$0.00
Tertiary			=	\$0.00
Total Acres =		0.0	Total Rent =	\$0.00
\$0.00 (Total		÷	0.0 (Total Acres)	= #DIV/0! Weighted Average Soil Rental Rate (SRR)

Buffer Strip Payment Calculation

Non-irrigated Cropland without CRP, CREP or other governmentally-funded program (complete 1; complete 2, if applicable)

1. 1.2 X #DIV/0! (Weighted Average SRR) = #DIV/0! + \$5 = #DIV/0! (NBSP payment rate)

2. #DIV/0! (NBSP pmt. rate or \$250, whichever is less) - #DIV/0! (other pmts. from prev. pg.) = \$0.00 (NBSP pmt. rate)

#DIV/0! (NBSP pmt. rate) from 1 or 2, whichever applies X #DIV/0! acres = \$0.00

Non-irrigated Cropland with CRP, CREP, or other governmentally-funded programs (complete 1; complete 2 and 3 if applicable)

1. 0.20 X #DIV/0! (Weighted Average SRR) = #DIV/0! (NBSP payment).

2. #DIV/0! (NBSP payment rate) + #DIV/0! (other pmts. from prev. pg.) = #DIV/0! (total pmts.)

3. If "total payments" > \$250, then \$250 - #DIV/0! (other pmts. From prev. pg.) = \$250.00 (NBSP pmt. rate)

#DIV/0! (NBSP payment rate from 1 or 3, whichever applies X #DIV/0! acres = \$0.00

Irrigated Cropland without CRP, CREP, or other governmentally-funded programs

1. NBSP pmt. Rate = \$225 - #DIV/0! (other pmts. from prev. pg.) = \$225.00 (NBSP pmt. rate) X #DIV/0! acres = \$0.00

Irrigated Cropland with CRP, CREP, or other governmentally-funded programs

1. NBSP pmt. rate = \$250 - #DIV/0! (other pmts. from prev. pg.) = \$250.00 (NBSP pmt. rate) X #DIV/0! acres = \$0.00

Total Annual Buffer Strip Payment = \$0.00

Remarks: _____

NRCS Representative: _____	Date: _____
NRD Action: Approved _____ Disapproved _____ returned to landowner for more information: _____	Date: _____
NRD Representative: _____	Date: _____
NDA Action: Approved _____ Disapproved _____ returned to landowner for more information: _____	Date: _____
NDA Representative: _____	Date: _____

Additional Remarks:

CENTRAL PLATTE NRD PHASE II/III CENTER PIVOT INCENTIVE PROGRAM

Revised (01/27/26)

The purpose of a Center Pivot is to promote efficient and uniform application of irrigation water to maintain adequate soil water for the desired level of plant growth and production without causing excessive water loss, erosion, or water quality impairment.

Owner/Operator: _____

Address: _____

Irrigation Well Tag# _____

County: _____

Location: _____ 1/4 _____ 1/4 **Section** _____ **Township** _____ **Range** _____

Social Security No: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Does application require a Transfer? _____

This application will not be effective until approved by the NRD. All applications must be approved before project can be started. Cost share to switch from gravity irrigation to center pivot irrigation. 100% of the land to be irrigated by the pivot system must have been irrigated by gravity 2 of the last 5 years or must be offset with an equal number of acres, irrigated by gravity 2 of the last 5 years, to be converted from irrigated production to dryland. All offset acres must be approved by the CPNRD prior to application acceptance, ranking, and consideration for funding by the NRCS/CPNRD. One application per landowner/operator per year. Phase III water quality rules will be followed and no more than the NRD recommended amount of fertilizer will be applied for the length of the agreement. Claims for payment will not be accepted more than five months from the date this application is approved. Cost share is \$5.77/ft with a maximum payout of \$7,500.00

Items of cost for which reimbursement is claimed are to be supported by documentation of payment made.

RANKING CRITERIA

POINTS

Soil Intake Family:	
3.0 intake family	6.0
2.0 intake family	5.0
1.5 intake family	4.0
1.0 intake family	2.0
.5 intake family	1.0
.3 intake family	0.0
.1 intake family	0.0
Depth to sand/gravel substratum:	
<20"	4.0
20" - 40"	3.0
41" - 60"	2.0
>60"	0.0
Maximum High Water Table:	
<3'	1.0
3' - 5'	0.5
>5'	0.0
Furrow Length Variability	
variable over >50% of acres	5.0
variable over <50% of acres	3.0
uniform	0.0
Furrow Length (Length of Run)	
>2000'	4.0
1321' - 1999'	3.0
<1321"	0.0
System Size	
> 120 acres complete rotation	0.0
> 120 acres partial rotation	-1.0
> 80 acres < 120 acres	-2.0
> 40 acres < 80 acres	-3.0
< 40 acres	-4.0

TOTAL POINTS

NRCS or NRD Technician _____ Date _____

GROUNDWATER NITRATE LEVELS:

For water source (ppm) _____

For Up gradient Water Sources (Ave. ppm) _____

TOTAL PPM POINTS

GRAND TOTAL OF ALL POINTS

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

Owner/Operator (Application) _____ **Date** _____

APPLICATION APPROVAL: The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

NRD Representative _____ Date _____

COMPLETION AND CERTIFICATION:

Number of Acres Benefitted: _____

OWNER/OPERATOR AGREEMENT: I agree to keep the pivot in my possession and use it for a minimum of ten years after the date of receiving payment. Pivot may be moved to another field in Phase 2 or 3 by written permission from the NRD for continued use for a consecutive period of ten years. I further agree to apply no more than the NRD recommended amount of fertilizer for the length of this agreement. I understand failure to comply will result in a total refund to the NRD.

Owner/Operator (Certification) _____ **Date** _____

NRCS or NRD Technician _____ Date _____

NRD Representative _____ Date _____

APPLICANT'S REQUEST				PERFORMED		
# of Feet	Price per foot	Maximum	Assistance	Actual # of Feet	Price Per Foot	Cost Share Amount
	5.77				5.77	

Office Use Only: Record# _____ Compliance _____ Bills Paid _____

CENTRAL PLATTE NRD FLOW METER COST SHARE PROGRAM

Revised (01/27/26)

The purpose of a flow meter is to accurately measure the amount of water that is applied during an irrigation applicaion. By using a flow meter you can manage how much water is applied which will help the irrigator conserve water and protect water quality.

LANDOWNER: _____ ADDRESS: _____ _____ _____ Email: _____ LOCATION: _____ 1/4, _____	SOCIAL SECURITY NO: _____ PHONE: _____ Cell Phone: _____ County: _____ Operator: _____ SECTION _____ TOWNSHIP _____ RANGE _____
--	--

This application will not be effective until approved by the NRD: *All applications must be approved before project can be started*. Claims for payment will not be accepted more than five months from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

Items of cost for which reimbursement is claimed are to be supported by documentation of payments made.

Cost share is 50% of actual cost up to \$800.00 maximum on each flow meter and limited to one meter per landowner per year.

APPLICANT'S REQUEST	PERFORMED		
Maximum Assistance	Actual Cost	50% Actual	Cost Share
\$800.00			

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

LANDOWNER CERTIFICATION:

I certify that the item for which payment is claimed was furnished under authority of the law and that the charges are reasonable, proper and correct. I further certify that I am the owner of the above described property and agree that if the above installed flow meter is removed, or not maintained for a period of five years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte NRD. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in force and to obtain such new owner's acceptance of the responsibilities herein.

--	--

NRCS or NRD Technician	Date
------------------------	------

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

Landowner	Date
-----------	------

COMPLETION AND CERTIFICATION:

NRCS or NRD Technician	Date
------------------------	------

NRD Representative	Date
--------------------	------

NRD Representative	Date
--------------------	------

Office Use Only:

Record # _____

Compliance _____

Bills Paid _____

CENTRAL PLATTE NRD PRESCRIBED BURN COST SHARE PROGRAM

Revised (01/27/26)

The purpose of a prescribed burn is to control the undesirable vegetation, to prepare sites for harvesting, planting or seeding, to control plant disease, to reduce wildfire hazards, to improve wildlife habitat, to improve plant production quantity and/or quality, to remove slash and debris, to enhance seed and seedling production, to facilitate distribution of grazing and browsing animals, and to restore and maintain ecological sites.

LANDOWNER:				SOCIAL SECURITY NO:	
ADDRESS:				Home Phone:	
				Cell Phone:	
Email:				County:	
LOCATION:		1/4,	SECTION	TOWNSHIP	RANGE

This application will not be effective until approved by the NRD: *All applications must be approved before project can be started.* Claims for payment will not be accepted more than nine months from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled. Items of cost for which reimbursement is claimed are to be supported by documentation of payments made. Cost share is 50% of actual cost (or 50% of landowners share when other cost share is involved) not to exceed \$2,500.00 per landowner, per year. Each parcel of land is eligible to be cost shared every 7 years.

APPLICANT'S REQUEST			PERFORMED		
# of Acres	Price per acre	Maximum Assistance	Actual Cost	50% Actual	Cost Share

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

LANDOWNER CERTIFICATION:

I certify that the items for which payment is claimed were furnished under authority of the law and that the charges are reasonable, proper, and correct and no part of the claim has been paid. I further certify that I am the owner of the above described property. I certify that I accept all responsibility for any activities associated with this cost share, including prescribed burn planning, prescribed burn approval, and the prescribed burn itself.

Landowner	Date
-----------	------

NRCS or NRD Technician	Date
------------------------	------

Landowner	Date
-----------	------

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

COMPLETION AND CERTIFICATION:

NRCS or NRD Technician	Date
------------------------	------

NRD Representative	Date
--------------------	------

NRD Representative	Date
--------------------	------

CENTRAL PLATTE NRD TREE PLANTING COST SHARE PROGRAM

Revised (06/11/26)

The purpose of tree planting is to reduce soil erosion from wind, to protect plants from wind related damage, to alter the microenvironment for enhancing plant growth (reduced evapotranspiration), to manage snow deposition, to provide shelter for structures, livestock, and recreational areas, to enhance wildlife habitat (by providing travel corridors, winter cover, food, or other benefits), to provide living noise screens, to provide living visual screens, to provide living windbreaks against airborne chemical drift, to delineate property and field boundaries, to improve irrigation efficiency, to enhance aesthetics, and to increase carbon storage.

LANDOWNER: _____	SOCIAL SECURITY NO: _____
ADDRESS: _____	Home Phone: _____
_____	Cell Phone: _____
Email: _____	County: _____
LOCATION: _____ 1/4, SECTION _____ TOWNSHIP _____ RANGE _____	

This application will not be effective until approved by the NRD. All applications must be approved before project can be started. Claims for payment will not be accepted more than nine months from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled. Items of cost for which reimbursement is claimed are to be supported by documentation of payments made. Cost share is 75% of average costs, up to a maximum of \$5000. Tree plantings must be planned and installed in accordance with technical specifications of the NRCS.

APPLICANT'S REQUEST					PERFORMED				
Description	Extent	Ave Cost	75%	\$	Description	Extent	75% Ave	75% Actual	Cost Share
Trees & Planting		2.00	1.50		Trees & Planting		1.50		
Weed Barrier & Install		1.50	1.12		Weed Barrier & Install		1.12		
WB Squares		2.50	1.88		WB Squares		1.88		
TOTAL					TOTAL				

APPLICATION/CERTIFICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment. I further certify that I am the owner of the above described property and agree that if the above installed practice is removed, or not maintained for a period of ten years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte NRD. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in force and to obtain such new owner's acceptance of the responsibilities herein.

APPLICATION APPROVAL: The Central Platte NRD Board of Directors approved the applicant's request and hereby obligate \$ _____

NRD Representative Date

ALL BILLS FOR DISTRICT PLANTS THROUGH CENTRAL PLATTE NRD
MUST BE PAID FOR BEFORE COST SHARE CHECKS CAN BE DISTRIBUTED

COMPLETION AND CERTIFICATION:

Landowner Date

NRCS or NRD Technician Date

NRCS or NRD Technician Date

NRD Representative Date

Office Use Only:			
Record#	Compliance	Bills Paid	

CENTRAL PLATTE NRD WELL DECOMMISSIONING COST SHARE PROGRAM

Revised (01/27/26)

The purpose of well decommissioning is to prevent entry of vermin, debris, or other foreign substances into the well or well bore holes. Eliminate the physical hazard of an open hole to people, animals, and farm machinery. Prevent entry of contaminated surface water into well and migration of contaminants into unsaturated (vadose) zone or saturated zone. Prevent the commingling of chemically or physically different ground waters between separate water bearing zones.

LANDOWNER: _____ SOCIAL SECURITY NO: _____

ADDRESS: _____ Home Phone: _____

_____ Cell Phone: _____

OPERATOR: _____ County: _____

EMAIL: _____ Well Driller: _____

LOCATION: _____ 1/4, SECTION _____ TOWNSHIP _____ RANGE _____
_____ feet from (N / S) section line and _____ feet from (E / W) section line

If registered, # _____ type of well _____ Replacement Well Y or N

Does this well pump 50 gallons or less? _____

This application will not be effective until approved by the NRD. All applications must be approved before project can be started. Claims for payment will not be accepted more than 5 months from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled. **Items of cost for which reimbursement is claimed are to be supported by documentation of payment made. A LICENSED WATER WELL CONTRACTOR OR PUMP INSTALLATION CONTRACTOR IS REQUIRED TO DO THE ABANDONMENT IN ORDER TO RECEIVE COST SHARE.** Cost share available only for actual filling of well. Cost share is 60% up to a \$750 for irrigation wells. Any well that pumps 50 gallons or less is 60% up to \$500, and any hand dug well is 60% up to \$1,500.

Replacement wells are not eligible for cost share.

APPLICANT'S REQUEST	PERFORMED		
Maximum Assistance	Actual Cost	60% Actual	Cost Share

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

COMPLETION AND CERTIFICATION:

The Department of Health regulations governing water well decommissioning Chapter 12, have been followed.

Water Well Contractor _____ Date _____

Landowner _____ Date _____

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

NRD Representative _____ Date _____

NRD Representative _____ Date _____

Office Use Only:		
Record#	Compliance	Bills Paid

NEBRASKA SOIL AND WATER CONSERVATION PROGRAM
Cost-Share Assistance Application, Payment Claim and Agreement

FOR DNR USE ONLY

B#

AB#

IN ACCOUNT WITH THE STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES	DATE	LANDOWNER			
	SOC. SEC. OR TAX IDENT NO.	ADDRESS	CITY	STATE	ZIP CODE + 4
EMAIL:		TELEPHONE NUMBER (Including Area Code):			

- I (we) the undersigned, do hereby request cost-share assistance to help defray the cost of installing the soil and water conservation practices as listed below. It is understood and agreed that:
1. Before receiving any cost-share funds, it will be necessary for the landowner(s) to sign the agreement below relating to the maintenance of practices installed.
 2. Practices must be planned and installed in accordance with technical specifications of the Natural Resources Conservation Service.
 3. The responsible technician must make prior determination that the practices are feasible on the site where they are to be installed, that they are properly planned and installed, and that estimates of quantities are proper and reasonable.
 4. Items of cost for which reimbursement is later claimed are to be supported by documentation of payments made or due to contractors or other workers.
 5. This application will not be effective until approved by the Natural Resources District. Claims for payment will not be accepted more than nine (9) months from the date this application is approved unless an extension is granted by the Natural Resources District.
 6. Maximum reimbursement will be limited to 50 percent of the actual cost to the landowner, the percentage of average costs specified below or the amount obligated by the Natural Resources District, whichever amount is the least.

LOCATION OF PRACTICE ¼, SEC. , TWP. , RNG. , COUNTY

APPLICANT'S REQUEST						PRACTICE UNITS PERFORMED			
PRACTICE NO. & DESCRIPTION	UNIT	EXTENT	AVE. COST/ Unit	MAXIMUM ASSISTANCE		EXTENT	SHARE RATE		COST-SHARE EXTENT X SMALLEST RATE
				%	\$		% AVE.	% ACT.	
TOTAL						TOTAL			\$
				LESS OTHER COST-SHARE ASSISTANCE					\$
Signature of Landowner or Authorized Rep. _____ Date _____				TOTAL AMOUNT NSWCP CLAIM					\$

Practices and Quantities requested are needed and practical and will be planned in accordance with Natural Resources Conservation Service technical specifications.

Signature of NRCS or NRD Technician _____ Date _____

APPLICATION APPROVAL:
The _____ NRD Board of Directors approved the
Applicant's Request and hereby obligate \$ _____

Signature of NRD Representative _____ Date _____

COMPLETION AND DOCUMENTATION CERTIFICATION:

Signature of NRCS or NRD Technician _____ Date _____

Signature of NRD Representative _____ Date _____

LANDOWNER(S) CERTIFICATION AND AGREEMENT

I certify that the items for which payment is claimed were furnished under authority of the law and that the charges are reasonable, proper, and correct and no part of the claim has been paid. I further certify that I am the owner of the above described property and agree that if any or all of above installed practices shall be removed, altered, or modified so as to lessen their effectiveness without consent of the Natural Resources District for a period of ten years after the date of receiving payment, that a portion of the claimed amount shall be refunded to the Nebraska Department of Natural Resources. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in force and to obtain such new owner's acceptance of the responsibilities herein.

SIGNATURE OF LANDOWNER(S)

NEBRASKA DEPARTMENT OF NATURAL RESOURCES CERTIFICATION

I hereby certify that the above claim has been reviewed by me and I find it a proper claim against the Nebraska Soil and Water Conservation Fund.

Authorized Signature

Date _____

NEBRASKA SOIL AND WATER CONSERVATION PROGRAM

Nebraska Department of Natural Resources

PLANNED GRAZING SYSTEM JUSTIFICATION FOR APPROVAL AND COMMITMENT BY LANDOWNER

Technician

The need and feasibility for the practice(s) itemized on the attached form **NSWCP-3** are based on the overall Ranch Plan aimed at achieving a planned grazing system for the ranch. The objective of this installation is:

Acres Benefitted _____

The necessary Job Sheets have been provided.

Technician

Date _____

Landowner

I recognize that the practice(s) itemized on the attached **NSWCP-3** are based on my overall ranch plan. In accordance with the objectives of that plan, I agree to comply with the following requirements for ten years after the date of receiving the payment requested.

- (a) I will not remove, alter or modify components installed with NS&WCP assistance unless such removal or modification is needed to accommodate a revised plan and the installation has served its intended purpose. Prior approval by the NRD will be required;
- (b) I will use those components of the plan that have been installed in a manner consistent with the objectives of the plan;
- (c) I will complete any remaining components of the plan in accordance with the plan schedule if cost-share assistance is available from FSA, NRCS, DNR, or the NRD.
- (d) I will refund all funds paid to me from the NS&WCP if I fail to comply with items (a) or (b) above;
- (e) I will refund all or part of the funds paid to me from the NS&WCP if I fail to comply with item (c) above and if such failure is not due to extreme financial hardship. The amount, if any, to be refunded in such event shall be determined by the NRD by comparing the conservation value of the components installed with the amount of funds paid to me for such installation.

Landowner

Date _____

NEBRASKA SOIL AND WATER CONSERVATION PROGRAM

Nebraska Department of Natural Resources

IRRIGATION WATER MANAGEMENT PRACTICE JUSTIFICATION FOR APPROVAL AND COMMITMENT BY LANDOWNER

Technician

The need and feasibility for the practice(s) itemized on the attached form **NSWCP-3** is based on the irrigation water management plan for the irrigated land described on that form. The component(s), planned year(s) of implementation, and anticipated cost-share status for that plan, which was prepared in accordance with NRCS specifications, are summarized as follows:

Irr. Water Mgt. Component	Year for Implementation*	Cost-Share Anticipated**	Comments

- All components must be scheduled for implementation within three consecutive years.

** Any checks made in this column do not represent a commitment by the Natural Resources District or the state to cost-share the component checked, only an indication that the component is for a practice for which the availability of cost-share funds is anticipated when this form is being completed.

Acres
Benefitted _____

Technician

The necessary Job Sheets have been provided.

Date _____

Landowner

I acknowledge that the practices itemized on the attached **NSWCP-3** are based on the irrigation water management plan for the land involved. In accordance with the objectives of that plan and in consideration of the cost-share assistance for which I am applying from the Nebraska Soil and Water Conservation Fund, I agree to the following requirements:

- Even if cost-share anticipated in future years is not then available, I will complete implementation of the irrigation management plan as scheduled above or as extended by the NRD; I understand that no more than a two-year extension could be granted.
- I will maintain and use the components of the approved irrigation management plan and will operate my irrigation system in accordance with that plan for ten years after receipt of the initial NS&WCP assistance.
- For ten years after receipt of NS&WCP assistance, I will not remove, alter or modify components installed with that assistance unless such removal or modification is temporary and needed for maintenance, off-season storage or other purposes not adversely affecting implementation of the approved plan.
- I will report to the NRD such irrigation related information, as the NRD may require, on forms provided by the NRD.**
- I will refund all or part of funds paid to me from the NS&WCP if I fail to comply with items (a), (b), (c), or (d) above. The amount to be refunded in such event shall be determined by the NRD.

Landowner (Print) _____

(Signature) _____

Date _____

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐	
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-				-			
or											
Employer identification number											
					-						

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
------------------	--------------------------	------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid).
- Form 1099-DIV (dividends, including those from stocks or mutual funds).
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds).
- Form 1099-NEC (nonemployee compensation).
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers).
- Form 1099-S (proceeds from real estate transactions).
- Form 1099-K (merchant card and third-party network transactions).
- Form 1098 (home mortgage interest), 1098-E (student loan interest), and 1098-T (tuition).
- Form 1099-C (canceled debt).
- Form 1099-A (acquisition or abandonment of secured property).

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

Caution: If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding; or
3. Claim exemption from backup withholding if you are a U.S. exempt payee; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See *What Is FATCA Reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441–1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(l)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester;
2. You do not certify your TIN when required (see the instructions for Part II for details);
3. The IRS tells the requester that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under “*By signing the filled-out form*” above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

• **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note for ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

• **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or "doing business as" (DBA) name on line 2.

• **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

• **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.

• **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner's name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For

example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or	Individual/sole proprietor.
• Sole proprietorship	
• LLC classified as a partnership for U.S. federal tax purposes or	Limited liability company and enter the appropriate tax classification:
• LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	P = Partnership, C = C corporation, or S = S corporation.
• Partnership	Partnership.
• Trust/estate	Trust/estate.

Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

Note: A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

Line 4 Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

- 2—The United States or any of its agencies or instrumentalities.
- 3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5—A corporation.
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission.
- 8—A real estate investment trust.
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940.
- 10—A common trust fund operated by a bank under section 584(a).
- 11—A financial institution as defined under section 581.
- 12—A middleman known in the investment community as a nominee or custodian.
- 13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
• Interest and dividend payments	All exempt payees except for 7.
• Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
• Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.
• Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5. ²
• Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.

¹ See Form 1099-MISC, Miscellaneous Information, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).

B—The United States or any of its agencies or instrumentalities.

C—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.

G—A real estate investment trust.

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.

I—A common trust fund as defined in section 584(a).

J—A bank as defined in section 581.

K—A broker.

L—A trust exempt from tax under section 664 or described in section 4947(a)(1).

M—A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/EIN. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Go to www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))**	The grantor*

For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(i)(B))**	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

* **Note:** The grantor must also provide a Form W-9 to the trustee of the trust.

** For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

TREE PLANTING PROGRAM GUIDELINES

TREE ORDERS:

Orders are taken every November 1st through April 1st, with limited quantities after April 1st.

PLEASE SUPPLY WHITE MARKING FLAGS to district plant customers with instructions for marking rows for “Diggers Hot Line” purposes and district planting.

Complete address which includes town, zip code, phone number and email.

Legal not required with handplants

**Fill out separate orders for District plant and Handplant.
(One check for multiple orders is acceptable)**

All handplant orders will be delivered to the county NRCS offices for pick-up. There will be *NO handplants* delivered to the landowners directly.

Sell species in multiples of 25

On District plant, if slightly short (example – 5 trees), don’t order another 25

Price of trees: \$1.25 plus tax

Sales tax depends on point of delivery – **Grand Island is 7.5%, Lexington, Kearney, Central City and Osceola are 7%**
(District plant would be rural delivery and less tax **5.5%**)

There will be tax on tree planting and weed barrier installation by the District

Indicate check or cash
(A receipt must accompany any cash received.)

Form must be signed by the purchaser

Trees must be paid for at time of order

If District Plant, make sure you get specific directions from landowner on planting site.

TREE PLANTING CHARGE:

Planting by District: \$0.75 per tree

Minimum charge is \$300.00 = 400 trees

Minimum of 200 trees per planting site per purchase NO EXCEPTIONS – *based on design*

Landowner must complete the District Tree Planting Check List.

If planting sites are more than 1 mile apart (vehicle travel distance) they must be considered separate plantings.

Planting charges will be billed to the customer after District Planting

Tree spades are available at \$55.00 (includes tax)

Tree planters will be available at Dawson, Buffalo, and Merrick NRCS offices and CPNRD for free customer use with each NRCS office doing the scheduling

Landowners are responsible for marking any private utility lines. (ex: gas line to a grill, propane)

February 1ST IS CUT OFF DATE FOR DISTRICT PLANTS EVERY YEAR.

NEW: \$250 Return Fee – If the landowner is not ready when we start planting in their county and we have to come back at the end to plant, a \$250 return fee will be added to your tree bill.

The NRD will NOT District Plant Cottonwood Trees.

WEED BARRIER ORDERS:

Complete address includes town, zip code, phone number and email.

NRD will install weed barrier on *first* year plantings only

NRD must have an aerial photo and planting plan-showing site with number of rows and entrance to planting area, along with all roads marked.

Legal is not necessary if landowner is installing weed barrier

Price of Weed Barrier:

\$0.50 per lineal foot plus tax

(Rolls 6' wide by 500' long)

District will sell partial rolls (**minimum order 50ft**) and deliver orders to NRCS offices for customer pickup. Orders are to be paid for at time of ordering.

Weed barrier squares: 4'x 4' - \$1.75 each plus tax – no minimum

Weed barrier staples: 2" x 10" - \$0.15 each plus tax – no minimum

Tree Tubes (4ft Vented) – price varies when ordered – no minimum *(do not keep on hand)*

For customer installation, sales tax depends on point of delivery

Customer must sign form.

Fill out separate orders for District installed weed barrier and weed barrier to be delivered to NRCS offices for landowner installation

WEED BARRIER INSTALLATION:

Installation by District: \$1.50 per lineal foot plus tax includes weed barrier, staples and installation. There is tax on District installation.

Minimum order of 1000 feet NO EXCEPTIONS – based on design

Minimum charge is \$1,500.00 = 1000 ft of weed barrier

50% deposit due at time of ordering

Please have customer sign the estimate form.

District will bill customer for remaining costs after installation. Sales tax will be added by the District after installation (5.5%).

Inform customers receiving District installation that tree rows must have an area 10' in width properly prepared with a minimum of **12' to 20'** between rows.

NRD will NOT:

- Install weed barrier with cottonwood or walnut in tree row
- Install weed barrier in the fall
- Install weed barrier sheets
- Install weed barrier on side slopes of 5% or greater or on curves
- Install weed barrier in unworked ground
- Install weed barrier on windbreak renovation
- Install weed barrier unless estimated weed barrier order form is signed by the customer
- Install weed barrier on handplants.

DISTRICT PLANTING:**Ground Preparation:***Cropland Sites:*

Area to be planted (may not need tillage in soybean residue) must be disked and harrowed or tilled prior to planting. Sufficient crop residue should remain to control erosion.

Existing crop residue may be left undisturbed between tree rows to control erosion, however, rows themselves must be worked as stated above. A minimum 6 feet width without weed barrier or 11 feet width with weed barrier must be worked.

Sod Sites:

Entire area to be planted may be disked and harrowed or tilled prior to planting. If necessary to control erosion, only the area of the tree rows may be worked.

The minimum tree row width to be worked is 6 feet. The worked strip may be tilled a minimum of 8 to 10 inches in depth.

A minimum of 11 feet width is required to be worked if barrier is to be used.

Sites to be strip tilled should have the sod killed by nonselective herbicide prior to being worked to help insure total kill is achieved.

Hand Plant Sites:

A minimum 6 feet diameter area must be worked for each tree planted in sod. Trees may be planted directly into crop residue.

REFER TO THE TECHNICAL GUIDE, STANDARD 380 – FOR ADDITIONAL GROUND PREPARATION REQUIREMENTS.

Give landowner white flags to mark the start and end of row and about every 250' in the row.

Distances:

8' minimum off fence- row for machine plant

8' minimum off fence- row for weed barrier installation

Within row distance between trees – 4, 5 or 6 feet or multiples thereof according to NRCS tech guides.

Double-check your math on planting plans

Make landowners aware that there are no changes allowed when the tree planter gets out there to plant.

Aerial Photos must accompany the planting plan with point of entry and route to planting site clearly marked.

Label name of closest road or roads to planting site for “Diggers Hotline”

Complete address, cell phone numbers and home phone numbers on planting plan

Indicate weed barrier on plan if it is included and identify rows receiving barrier

TREE ORDER FORM



Central Platte NRD
215 Kaufman Avenue
Grand Island NE 68803
(308) 385-6282

NAME: _____
ADDRESS: _____
CITY, STATE, ZIP: _____
Cell Phone: _____ Receive Text Messages Y or N

EMAIL: _____

Date of Order: _____

COUNTY OF *DELIVERY* (handplant only)- Circle one:

HALL MERRICK DAWSON BUFFALO POLK

Please mark one:

HANDPLANT

☐

DISTRICT PLANT

☐

WINDBREAK RENOVATION:

Y or N

1/4

Section

Township

Range

(Only required to fill out legal on district plant order)

All tree orders are accepted subject to availability.

THERE IS ABSOLUTELY NO SURVIVAL GUARANTEE ON STOCK SOLD BY THE DISTRICT OR PLANTED BY THE DISTRICT.

Must order in multiples of 25 of same kind, except for the Packages.

CONIFERS	Multiples of 25	HARDWOODS	Multiples of 25	SHRUBS	Multiples of 25	PACKAGES	(\$65 each)
Black Hills Spruce		Black Cherry		American Plum		Wildlife	
CO Blue Spruce		Black Walnut		American Hazel		Flowering	
Eastern Red Cedar		Bur Oak		Amur Maple		Eastern	
		Catalpa		Caragana		Western	
Ponderosa Pine		Cottonwood		Chokecherry			
Rocky Mtn Juniper		Hackberry		Common Lilac			
Norway Spruce		Manchurian Apricot		Elderberry			
SW White Pine		Midwest Crabapple		False Indigo			
		Red Oak		Golden Currant			
				Peking Cotoneaster			
		Silver Maple		Red-Osier Dogwood			
		Swamp White Oak		Sandcherry			
				Serviceberry			
				Silver Buffaloberry			
				Skunkbush Sumac			

of Trees Ordered 0

of Packages Ordered 0

Total cost of trees ordered (# x 1.25) 0.00

Total cost of packages ordered (# x 65) 0.00

Pre-Total 0.00

10% Discount if ordered before December 31st 10.00% 0.00

SUB-TOTAL 0.00

TAX 7.50% 0.00

TOTAL DUE TODAY 0.00

PAYMENT (please mark one):

Cash _____

Check # _____

Make checks payable to the Central Platte NRD

I understand that the above charges are for trees only:

Landowner or Operator

Trees Received by:

(For Handplants Only)

DATE: _____ 50



Central Platte NRD
215 Kaufman Avenue
Grand Island NE 68803
(308) 385-6282

WEED BARRIER ORDER FORM

NAME: _____ 0
ADDRESS: _____ 0
CITY, STATE, ZIP: _____ 0
Cell Phone _____ 0 Receive Text Messages Y or N
EMAIL: _____ 0

Date of Order: _____ 1/0/00

COUNTY OF *DELIVERY* (handplant only)- Circle one:
HALL MERRICK DAWSON BUFFALO POLK

Please mark one:

HANDPLANT ☐ 0 DISTRICT PLANT ☐ 0 WINDBREAK RENOVATION: ☐ Y or N
_____ 0 1/4 Section _____ 0 Township _____ 0 Range _____ 0
(Only required to fill out legal on district plant order)

	QUANTITY	PRICE	TOTAL
WEED BARRIER		0.50	0.00
WEED BARRIER INSTALLATION (District Plant only)		1.00	0.00
WEED BARRIER SHEETS		1.75	0.00
STAPLES		0.15	0.00
TREE TUBES - Crème Colored		4.00	0.00

Minimums: Hand plant : 50 ft minimum. District plant : 1,000 ft minimum.

PAYMENT (please mark one):	
Cash _____	
Check _____ #	
<i>Make checks payable to the Central Platte NRD</i>	

Sub Total	0.00
10% discount if ordered before December 31. 10.0%	0.00
Total after discount	0.00
Tax 7.5%	0.00
Grand Total	0.00

Customer Signature _____ Date _____

District Plant ONLY:
50% deposit required.: **\$0.00**
Paid _____

FOR OFFICE USE ONLY:

DATE: _____
Price per lineal foot: _____
Actual lineal foot laid: _____

Signature of Contractor

*District Plant Only: The above charges are an estimate only and you will be charged for the actual lineal feet installed.
If the paid amount above exceeds the amount that is due, a refund will be issued.*

District Tree Planting Check List

(Landowner must initial each item)

_____ There is absolutely no survival guarantee on stock sold by the district or planted by the district.

_____ **White Flags Received:** All Tree rows should be marked where the individual row begins, ends and about every 250 feet. Marking the rows with white flags will assist our tree planting crew in planting the trees where you want them and will also alert the “digger’s hot line” personnel where the trees will be planted. All planting sites *must be* checked by the digger’s hotline prior to the NRD planting your trees. The CPNRD will make all necessary contacts to digger’s hotline regarding your tree site.

_____ **Site Prep:** Area to be planted must be disked and harrowed or tilled prior to planting. A minimum of 6 feet in width if no weed barrier, or a minimum of 11 feet in width if weed barrier will be installed. Soil should be worked a minimum of 8-10 inches in depth.

_____ Trees must be paid for at time of ordering. If installing Weed Barrier, 50% deposit is due when ordering. Remaining balance will be billed when project is completed.

_____ If eligible for Cost Share, this will be paid out to the landowner when project is completed and paid in full.

_____ Landowners must be ready to go by April 15th.

_____ Landowners will receive a letter, *email if provided or text message*, a month prior to planting starting. And again 2 weeks prior to planting.

_____ Tree Planter, Tom Backer, will call you the night before to verify he will be there the next day.

_____ If you’re not ready when tree planters arrive after they’ve contacted you. You are then put on the bottom of the list and if we have to return to your county, a **\$250 return fee** will be added to your tree order.

_____ If you must cancel the planting, the trees you ordered are yours. There are no refunds on trees ordered.

_____ Absolutely **NO CHANGES** are allowed when the tree planter gets out to field to plant.

_____ Any left-over trees from the planting will be left for the landowner to handplant elsewhere. Our tree planters will do their best to notify you as to where the extra trees were left.

Landowner NAME: _____

SENSOR BASED NUTRIENT MANAGEMENT COST SHARE PROGRAM

Revised (02/27/26)

The purpose of the sensor based management program is to introduce producers to data driven nitrogen management.

LANDOWNER: or OPERATOR ADDRESS:	SOCIAL SECURITY NO:
PHONE:	
Cell Phone:	
Chemigation Permit # (s)	County:
Email:	Operator:
LOCATION: 1/4, SECTION TOWNSHIP RANGE	

This application will not be effective until approved by the NRD: *All applications must be approved before project can be started.* Claims for payment will not be accepted more than five months after growing season applied for. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

Cost share is \$13.50/acre with a 2-year commitment. Must be enrolled with an approved supplier.

Final report must be provided by supplier on an annual basis, prior to payment.

After year one, 1/3 of the cost share will be paid. After year two, the remaining 2/3 of the cost share will be paid.

Applications are accepted on a first come, first serve basis, with priority given to those using a chemigation system.

Land must be Pivot or SDI Irrigated, gravity irrigated fields are not eligible.

Each landowner/operator is eligible to sign-up two fields (320 acres max) one-time per lifetime.

APPLICANT'S REQUEST			PERFORMED		
ACRES	PRICE	APPROVED	ACRES	PRICE	TO BE PAID

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

Operator Date

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$

NRD Representative Date

Office Use Only:
Record #
Compliance
Bills Paid

LANDOWNER CERTIFICATION:

I certify that the items for which payment is claimed are reasonable, proper, and correct and no part of the claim has been paid. If unable to fulfill the two year commitment, a portion of the claim amount shall be refunded to the CPNRD.

I certify that I accept all responsibility for any activities associated with this.

Operator Date

COMPLETION AND CERTIFICATION: YEAR 1	
Final Report Received:	
NRD Representative	Date
Amount To Pay:	

COMPLETION AND CERTIFICATION: YEAR 2	
Final Report Received:	
NRD Representative	Date
Amount To Pay:	

CENTRAL PLATTE NRD SENSOR BASED NUTRIENT MANAGEMENT COST SHARE PROGRAM

Purpose of Cost Share Practice:

Educate producers on data driven nitrogen management.

Cost share \$13.50/acre with a 2 year commitment.

Must be enrolled with an approved supplier.

Cost share payments: 1/3 after the first year. Remaining 2/3 after the second year. Each year a final report must be provided by supplier before payment is made.

Landowner/operator is eligible to sign-up two fields (320 acres max) one-time per lifetime.

The operator may chose to move to a different field the next year, but first must okay it with the NRD Staff.

Use Central Platte NRD Sensor Based Management of Fertigation Cost Share Application Form. Application can be in the name of the landowner or operator with corresponding social security number or tax ID number.

Applications for cost share are not effective until approved by the NRD Board of Directors. *Applications must be approved before project can be started.*

Claims for payment will not be accepted more than five months after the growing season application is applied for. There are no extensions.

The operator must agree that if the 2-year commitment is not maintained after the date of receiving payment, a portion of the claim amount shall be refunded to the Central Platte Natural Resources District.

U.S. Citizenship and compliance form must accompany application.

TREE AND SHRUB PLANTING PLAN

OPERATOR _____ ADDRESS _____ PHONE NO. _____
NRD _____ COUNTY _____ SEC. _____ T. _____ R. _____
TYPE OF PLANTING _____ SOIL NAME OR SYMBOL _____
WINDBREAK SUITABILITY GROUP _____

PLANNED WEED CONTROL

Between Rows		
In The Rows		Lbs./Ac.
Planned herbicide applied by	☐ Farmer	☐ Dist.

PLANNED METHOD & YEAR OF PLANTING

	Dist.	Farmer	Date
Machine			
Hand			

AREA PLANTED

Field #	Width	Length	Sq. Ft.	Acres
Total Ac.				

PLANNED COMPOSITION

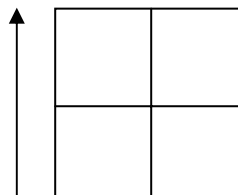
ROW #1 is always on north or west side of planting.

PLANNED GROUND PREPARATION:

SKETCH OF PLANTING

Planned By _____
Date _____

N Location in Section



Row No.	SPECIES	Spacing in Rows	Spacing between Rows	Est. Number of Trees Needed	Actual Number of Trees Planted

Total Number of Trees by Species

This practice has been installed according to plans and specifications

Crew Forman ☐ NRCS Tech. ☐ Farmer ☐

Signature

Date Planted



Nebraska Resale or Exempt Sale Certificate

for Sales Tax Exemption

• Read instructions on reverse side/see note below

RESET FORM

FORM

13

NAME AND MAILING ADDRESS OF PURCHASER			NAME AND MAILING ADDRESS OF SELLER		
Name			Name		
Street or Other Mailing Address			Street or Other Mailing Address		
City	State	Zip Code	City	State	Zip Code

Check Type of Certificate

☐ Single Purchase

☐ Blanket

If blanket is checked, this certificate is valid until revoked in writing by the purchaser.

I hereby certify that the purchase, lease, or rental by the above purchaser is exempt from the Nebraska sales tax for the following reason:

Check One

☐ Purchase for Resale (Complete Section A)

☐ Exempt Purchase (Complete Section B)

☐ Contractor (Complete Section C)

SECTION A—Nebraska Resale Certificate

Description of Item or Service Purchased

I hereby certify that the purchase, lease, or rental of _____
from the above seller is exempt from the Nebraska sales tax as a purchase for resale, rental, or lease in the normal course of our business, either in the
form or condition in which purchased, or as an ingredient or component part of other property to be resold.

I further certify that we are engaged in business as a: ☐ Wholesaler ☐ Retailer ☐ Manufacturer ☐ Lessor
of _____
Description of Product Sold, Leased, or Rented

If None, State Reason

and hold Nebraska Sales Tax Permit Number 01- _____

or Foreign State Sales Tax Number _____ State _____

SECTION B—Nebraska Exempt Sale Certificate

The basis for this exemption is exemption category _____ (Insert appropriate category as described on reverse of this form.)

If exemption category 2 or 5 is claimed, enter the following information:

Description of Item(s) Purchased

Intended Use of Item(s) Purchased

If exemption categories 3 or 4 are claimed, enter the Nebraska Exemption Certificate number. 05- _____

If exemption category 6 is claimed, seller must enter the following information and sign this form below:

Description of Item(s) Sold

Date of Seller's Original Purchase

Was Tax Paid when Purchased by Seller?

Was Item Depreciable?

☐ YES

☐ NO

☐ YES

☐ NO

SECTION C—For Contractors Only

1. Purchases of Building Materials or Fixtures:

☐ As an Option 1 or Option 3 contractor, I hereby certify that purchases of building materials and fixtures from the above seller are exempt from
Nebraska sales tax. My Nebraska Sales or Consumer's Use Tax Permit Number is: 01- _____

2. Purchases of Contractor Labor for Resale:

☐ As an Option 1, Option 2, or Option 3 contractor, I hereby certify that purchases of contractor labor from the above seller are exempt from Nebraska sales
tax as a purchase for resale. My Nebraska Sales Tax Permit Number is: 01- _____

3. Purchases Made Under Purchasing Agent Appointment:

☐ Pursuant to an **attached** Purchasing Agent Appointment and Delegation of Authority for Sales and Use Tax, Form 17, I hereby certify that purchases
of building materials, fixtures, and/or contractor labor are exempt from Nebraska sales tax.

Any purchaser, or the agent thereof, or other person who completes this certificate for any purchase which is other than for resale, lease, or rental
in the regular course of the purchaser's business, or is not otherwise exempted from the sales and use tax under Sections 77-2701 through 77-27,135 of
the Nebraska Revenue Act, as amended, shall in addition to any tax, interest, or penalty otherwise imposed, be subject to a penalty of \$100 or ten times
the tax, whichever amount is larger, for each instance of presentation and misuse. With regard to a blanket certificate, said penalty shall apply to each
purchase made during the period the blanket certificate is in effect. Under penalties of law, I declare that I am authorized to sign this certificate, and to the
best of my knowledge and belief, it is correct and complete.

**sign
here**

Authorized Signature

Title

Date

NOTE: Sellers must keep this certificate as part of their records. DO NOT SEND TO THE NEBRASKA DEPARTMENT OF REVENUE.

Incomplete certificates cannot be accepted.

INSTRUCTIONS

WHO MAY ISSUE A RESALE CERTIFICATE. Form 13, Section A, is to be issued by persons or organizations making purchases of property or taxable services in the **normal** course of their business for the purpose of resale either in the form or condition in which it was purchased, or as an ingredient or component part of other property.

WHO MAY ISSUE AN EXEMPT SALE CERTIFICATE. Form 13, Section B can only be issued by persons or organizations exempt from payment of the Nebraska sales tax by qualifying for one of the six enumerated **Categories of Exemption** (see below). Nonprofit organizations that have a 501(c) designation and are exempt from federal and state income tax are **not** automatically exempt from **sales** tax. Only the entities listed in the referenced regulations are exempt from paying Nebraska sales tax on their purchases when the exemption certificate is properly completed and provided to the seller. Organizations claiming a sales tax exemption may do so only on items purchased for their own use. Items purchased by an exempt organization that will be resold must be supported by a properly completed Nebraska Resale Certificate, Form 13, Section A.

Indicate the category which properly reflects the basis for your exemption. Place the corresponding number in the space provided in Section B. If category 2 through 6 is the basis for exemption, you must complete the information requested in Section B.

Use Form 13E for purchases of energy sources which qualify for exemption. Use Form 13ME for purchases of mobility enhancing equipment on a motor vehicle.

CONTRACTORS. Form 13, Section C, Part 1, must be completed by contractors operating under Option 1 or Option 3 to document their tax-free purchase of building materials or fixtures from their suppliers. A contractor may purchase the contractor labor of another contractor tax-free (for resale) by completing Section C, Part 2. Section C, Part 3, may be completed to exempt the purchase of building materials, fixtures, and/or contractor labor pursuant to a Purchasing Agent Appointment, Form 17. See the contractor information guides on our Web site www.revenue.ne.gov for additional information.

WHERE TO FILE. The Form 13 is given to the seller at the time of the purchase of the property or service or when sales tax is due. The certificate must be retained with the seller's records for audit purposes. Do not send to the Department of Revenue.

WHEN NO NUMBER IS REQUIRED. A purchaser who completes Section A and is engaged in business as a wholesaler or manufacturer is not required to provide an identification number. Section B does not require an identification number when exemption category 1 or 2 is indicated.

PROPERLY COMPLETED CERTIFICATE. A purchaser must complete a certificate before issuing it to the seller. To properly complete the certificate, the purchaser must include: (1) identification of the purchaser and seller, (2) a statement as to whether the certificate is for a single purchase or is a blanket certificate, (3) a statement of basis for exemption including completion of all information for the basis chosen, (4) the signature of an authorized person, and (5) the date the certificate was issued.

PENALTIES. Any purchaser who gives a Form 13 to a seller for any purchase which is other than for resale, lease, or rental in the

normal course of the purchaser's business, or is not otherwise exempted from sales and use tax under the Nebraska Revenue Act, shall be subject to a penalty of \$100 or ten times the tax, whichever amount is larger, for each instance of presentation and misuse.

Any purchaser, or the agent thereof, who fraudulently signs a Form 13 may be found guilty of a Class IV misdemeanor.

CATEGORIES OF EXEMPTION

1. Purchases made directly by certain governmental agencies identified in Nebraska Sales and Use Tax Reg-1-012, Exemptions; Reg-1-072, United States Government and Federal Corporations; and Reg-1-093, Governmental Units, are exempt from sales tax. A list of specific governmental units are provided in the above regulations. These regulations are available on the department's Web site at www.revenue.ne.gov/legal-information/regulations. Governmental units are not assigned exemption numbers.

Sales to the United States government, its agencies, and corporations wholly owned by the United States government are exempt from sales tax. However, sales to institutions chartered or created under federal authority, but which are not directly operated and controlled by the United States government for the benefit of the public, generally are taxable.

Purchases that are NOT exempt from Nebraska sales and use tax include, but are not limited to, governmental units of other states, sanitary and improvement districts, urban renewal authorities, rural water districts, railroad transportation safety districts, and county historical or agricultural societies.

2. Purchases when the intended use renders it exempt as set out in paragraph 012.02D of Reg-1-012, Exemptions. Complete the description of the item purchased and the intended use as required on the front of Form 13. Sellers of repair parts for agricultural machinery and equipment cannot accept a Form 13 to exempt such sales from tax.

3. Purchases made by organizations that have been issued a Nebraska Exempt Organization - Certificate of Exemption are exempt from sales tax. Reg-1-090, Nonprofit Organizations; Reg-1-091, Religious Organizations; and Reg-1-092, Educational Institutions, identify such organizations. These organizations will be issued a Nebraska state exemption identification number. This exemption number must be entered in Section B of the Form 13.

4. Purchases of common or contract carrier vehicles and repair and replacement parts for such vehicles.

5. Purchases of manufacturing machinery or equipment by a manufacturer for use predominantly in manufacturing. This includes the installation, repair, or maintenance of such qualified manufacturing machinery or equipment.

6. A sale that qualifies as an occasional sale, such as a sale of depreciable machinery and equipment productively used by the seller for more than one year and the seller previously paid tax on the item. The **seller** must sign and give the exemption certificate to the purchaser. The certificate must be retained by the purchaser for audit purposes. See Reg-1-014.01.

CENTRAL PLATTE / COOPERATOR CONTRACT CENTRAL BASIN CREP PROGRAM

Description and Guidelines

Introduction

- The program encourages landowners to establish buffer strips, specifically filter strips and riparian buffers, along vulnerable surface water resources. Buffer strips are an effective means of reducing sediments and other pollutants in runoff.

Eligible Areas

- Land eligible for enrollment in this program is eligible cropland (according to 2-CRP paragraph 97) adjacent to perennial streams, seasonal streams, wetlands, or permanent bodies of water.
- Fields adjacent and parallel to the area to be buffered must be cropped.
- Perennial streams are any solid blue line on USGS quadrangle maps or other streams with perennial flow that are verified on-site.
- Seasonal streams are streams that have concentrated flow with a defined bed and bank that has either a scoured bottom (from normal flow) or hydrophytic vegetation as determined by NRCS.
- Permanent bodies of water are surface water bodies, such as lakes or ponds, that provide water cover throughout the year. To be eligible for CREP, permanent water bodies must provide at least a seasonal flow of surface water from the water body off the farm each year.

Payment Rates

- For cropland (irrigated or non-irrigated), the payment rate per acre shall equal 150% (maximum \$150 per acre) of the CRP weighted average soil rental rate plus addition of payments from any other source. (The CRP weighted average soil rental rate is the amount calculated before the incentive and maintenance rate are added.)

Deadlines

- Funding availability for new applications is reviewed annually near October 1st, however, applications may be submitted any time. First year payments will be adjusted according to sign-up and approval dates.

Process

1. The landowner works with Farm Service Agency (FSA) and Natural Resources Conservation Service (NRCS) on tentative buffer strip locations.
2. FSA and NRCS will process Form CRP-2C according to 2-CRP paragraph 138.
3. The landowner submits the completed application to the Natural Resources District (NRD).
4. The NRD considers the application.
5. If approved, the landowner enters into a formal agreement with the NRD.
6. NRCS will develop Conservation Plan of Operations (CPO) for signatures and approval.
7. FSA will develop CRP-1 according to 2-CRP paragraph 253 and Exhibit 16 for signature and approval.
8. The landowner establishes and maintains the buffer strip according to NRCS FOTG practice requirements.

General Terms

1. The contract length must be at least 10 years but no more than 15 years (at the option of the local NRD).
2. Eligible buffer strips must be enrolled as Filter Strips (CP21) or Riparian Buffers (CP22) in the Central Basins CREP.
3. The established vegetation must meet NRCS FOTG practice requirements.
4. Haying and grazing are not allowed on buffers unless previously approved by FSA.
5. Minimum width is 20 feet for filter strips unless 2-CRP practice requirements are greater.
6. Maximum width is 120 feet for buffer strips unless 2-CRP practice requirements are greater. For streams, the maximums apply to each side of the stream.
7. Maximum width for riparian forest buffers is 180 feet and the minimum width is 35 feet unless 2-CRP practice requirements are greater.
8. Minimum size per application is one acre.
9. Failure to maintain the buffer strip according to contract requirements may result in forfeiture of past and future payments.
10. Buffer strips will be subject to compliance checks by the NRD, FSA and/or NRCS.

CENTRAL BASIN CREP PROGRAM

Application for Participation

Name of Landowner: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Social Security Number: _____ or Tax Identification Number: _____

Natural Resources District: _____ County: _____

Farm Number: _____ Tract Number: _____

Site Information

				A	B	C
Site	Section	Township	Range	Buffer Strip Acres	Stream Length	Total Buffer Length
1						
2						
3						
4						
Totals						

A. Enter acres offered in filter strips or riparian buffers.

B. Enter length of stream protected by buffer or distance around wetlands or permanent bodies of water.

C. Enter total length of buffers (for streams with buffers on both sides, total each side of the stream).

Ten (10) to (15) year contract required (at the option of the NRD).

Enter \$/acre/year, practice establishment date, and contract expiration date.

FSA/CREP \$/acre/year _____

NRD \$/acre/year _____

Total Dollars \$/acre/year _____

Establishment Date _____

Contract Expiration Date _____

Total does not include other payments from FSA.

• **Aerial Photo** – Identify the boundary of each buffer strip in ink. List the length, average width, and acres for each buffer strip on the photo. Highlight each buffer strip with a yellow highlighter. A yellow highlighter facilitates any needed photocopying.

• **USGS Quadrangle Map** – With a yellow highlighter, highlight perennial and seasonal streams that are associated with the buffer strips. Do not put any ink or pencil marks on the USGS maps. For streams not shown on USGS quadrangle maps, describe the conditions that make the buffer strips eligible in the remarks section below.

Remarks: _____

I certify that the above information is true, and I understand that if this application is approved, I will be required to enter into an agreement with the above named Natural Resources District. I permit access to the NRD to FSA records for the land under contract for planning, inspection, and reporting purposes.

Landowner Signature: _____ Date: _____

Participation in this program is contingent upon review and approval of this application and the availability of funds.

CENTRAL BASIN CREP PROGRAM

To Be Completed by NRCS

Buffer Strip Payment Calculation

Rental Rate (Irrigated Land and Dryland are paid at Same Rate)

CREP Payment

130% x _____ (weighted average soil rate) = \$ _____ x _____ acres in buffers = \$ _____
(CRP-2C Block 15)

NRD Payment

20% x _____ (weighted average soil rate) = \$ _____ x _____ acres in buffers = \$ _____
(CRP-2C Block 15)

TOTAL ANNUAL BUFFER STRIP PAYMENT = \$ _____

Remarks _____

Additional FSA Payments to Landowner for Establishing Buffers.

- + \$100/\$150 acre sign-up incentive for a 10 to 15 year contract. (SIP) FSA
Total years at the option of the local NRD.
- + 50% of installation cost for seed and seeding cost. FSA
- + 40% of installation cost for Practice Incentive Payment. (PIP) Paid by FSA.
- + \$4-9/acre/year maintenance payment. Paid by FSA.

NRCS Representative _____ Date _____

NRD Action Approved _____ Disapproved _____ Returned to landowner for more information _____

NRD Representative _____ Date _____

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, check one of the following and attest to your response by providing your name, and signing and dating this form.

☐ I am a citizen of the United States.

— OR —

☐ I am a qualified alien under the federal Immigration and Nationality Act, my immigration status is _____ and my alien number is _____, and I agree to provide a copy of my USCIS documentation upon request.

I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.

PRINT NAME _____
(first, middle, last)

SIGNATURE _____

DATE _____

**CENTRAL PLATTE NATURAL RESOURCES DISTRICT
STREAMBANK STABILIZATION PROGRAM**

Cost-Share Assistance Application and Agreement

Landowner _____ Social Security No. _____

Address _____

Email: _____ Phone: _____

I the undersigned, do hereby request cost-share assistance to help defray the cost of installing the streambank stabilization practices as listed below. It is understood and agreed that:

1. Before receiving any cost-share funds, it will be necessary for the landowner to sign the agreement below relating to the maintenance of practices installed.
2. Practices must be planned and installed in accordance with the Natural Resources Conservation Service or an engineer.
3. The landowner must apply for and receive all necessary Federal and State permits.
4. Items of cost for which reimbursement is later claimed are to be supported by documentation of payment made to contractor. Proof that contractor has been paid in full must be submitted to the NRD before payment is made to applicant.
5. This application will not be effective until approved by the Natural Resources District. Claims for payment will not be accepted more than nine (9) months from the date this application is approved unless an extension is granted by the Natural Resources District.
6. Maximum reimbursement will be limited to 50 percent of the actual cost to the landowner or the amount obligated by the Natural Resources District, whichever amount is the least. Maximum cost-share is \$3,000.00 per landowner.

Location of Practice: _____, 1/4 Sect _____ Township _____ Range _____

County: _____ Name of River/Stream: _____

Describe Project: _____

ESTIMATED TOTAL COST: _____

A map or drawing must accompany this application showing the location(s) of the works of improvement.

LAND AGREEMENT

I certify that I am the owner of the above described property and agree that if any or all of the above installed practices shall be removed, altered, or modified so as to lessen their effectiveness without consent of the Natural Resources District for a period of five years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte Natural Resources District. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in force and to obtain such new owner's acceptance of the responsibilities herein.

Signature of Landowner Date

APPLICATION APPROVAL

The Central Platte NRD Board of Directors approved the Applicant's Request and hereby obligate
\$ _____

Signature of NRD Representative Date

CENTRAL PLATTE NRD COVER CROP COST SHARE PROGRAM

Revised (01/27/26)

The purpose of a cover crop is to manage soil fertility, soil quality, water, weeds, pests, diseases, biodiversity and wildlife in agroecosystems.

LANDOWNER or : _____	SOCIAL SECURITY NO: _____
OPERATOR _____	
ADDRESS: _____	PHONE: _____
_____	Cell Phone: _____
	County: _____
Email: _____	Operator: _____
LOCATION: _____ 1/4, SECTION _____ TOWNSHIP _____ RANGE _____	

This application will not be effective until approved by the NRD: *All applications must be approved before project can be started*. Claims for payment will not be accepted more than one year from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

Two 3ft.soil samples for nitrate analysing must be taken following NRD guidelines and submitted to the NRD. The first sample will be taken when the cover crop is seeded and the second sample will be taken just before it is removed/destroyed.

Items of cost for which reimbursement is claimed are to be supported by documentation of payments made.

Cost share is 50% of actual cost up to \$2,000.00 for Seed **ONLY**. One application per landowner or operator per year. Plantings must be planned and installed in accordance with technical specifications of the NRCS.

APPLICANT'S REQUEST		PERFORMED		
# of Acres to be Planted	Maximum Assistance	Actual Cost	50% Actual	Cost Share
	\$2,000.00			

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

LANDOWNER/OPERATOR CERTIFICATION:

I certify that the items for which payment is claimed were furnished under authority of the law and that the charges are reasonable, proper, and correct and no part of the claim has been paid. I certify that I accept all responsibility for any activities associated with this cost share.

Landowner/Operator Date

Landowner/Operator Date

NRCS or NRD Technician Date

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

COMPLETION AND CERTIFICATION:

NRD Representative Date

NRCS or NRD Technician Date

NRD Representative Date

Office Use Only:

Record # _____

Compliance _____

Bills Paid _____

CENTRAL PLATTE NRD COVER CROP COST SHARE PROGRAM

Purpose of Cost Share Practice:

To manage soil fertility, soil quality, water, weeds, pests, diseases, biodiversity and wildlife in agro ecosystems.

Cost share on cover crops is 50% of the actual cost for **seed only** up to \$2,000.00.

One application per landowner or operator per year. Applications will be approved on a first come, first serve basis.

Use Central Platte NRD Cover Crop Cost Share Application Form. Application must be in the name of the landowner or operator with corresponding social security number or tax ID number. NRCS certification is required.

Planting must be planned & installed in accordance with technical specifications of the NRCS.

Applications for cost share are not effective until approved by the NRD Board of Directors. After approved, application will be returned to County Natural Resources Conservation Service office and landowner or operator will be notified by NRD concerning approval. Applications must be approved before the project can be started.

Claims for payment will not be accepted more than one year from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made. *Sales tax is to be included in the cost share.*

Two 3ft. soil samples for nitrate analysis must be taken. The first sample will be taken when the cover crop is seeded, and the second sample will be taken just before it is removed / destroyed. Copies of those soil tests must be submitted to the NRD office.

Payment will be made once the bill for seed the first soil sample is received.

The landowner must agree that if the two soil samples are not taken, all of the claim amounts will be refunded to the Central Platte Natural Resources District.

U.S. Citizenship and compliance form must accompany application.

Central Platte Natural Resources District Rules and Regulations

Commodity crop growers must adhere to the following regulations

Phase I - between 0 & 7.5 ppm; Phase II - between 7.6 & 15 ppm; Phase III - 15.1 ppm or higher

Phase IV - Areas where nitrate levels are not declining at an acceptable rate

Because NRDs do not have the authority to regulate surface water, surface water irrigators are not required to take water samples or monitor water applications

	Phase I	Phase II	Phase III	Phase IV
1. Fall applications of N fertilizer on sandy soils are prohibited.	X	X	X	X
2. Fall N applications on heavy soils are prohibited until after November 1.		X	X	X
3. Application of commercial nitrogen fertilizer is prohibited on all soils until after March 1st.		X	X	X
4. Farm operators using nitrogen fertilizer must be certified . Certification good for 4 years.		X	X	X
5. (a) Spring application of commercial nitrogen fertilizer will require a split application [pre-plant/pre-emergent, or pre-emergent/post-emergent] with no more than 50% applied as pre-emergent. If more than 50% is applied as pre-emergent, the operator is required to furnish certification from the dealer that an inhibitor was used at the recommended rate. Or, (b) Up to 80 pounds total of pre-plant and pre-emergent nitrogen can be applied as pre-emergent without an inhibitor.			X	X
6. All crops must be reported (including corn, sorghum, potatoes, beans, alfalfa, small grains and any other commodity crop), on District approved report forms. Reports will be due each crop year by March 31st and include the legal description of well(s) irrigating the crop, acres of each crop and the crop planted. Crops other than corn, sorghum and potatoes <u>do not</u> have to take soil and water tests.		X	X	X
7. In addition to the above, the report for corn, sorghum, and potatoes must list the following for the upcoming crop year : expected yields, water and soil test results, credits for past legume crop and manure or sludge, and the UNL's recommended nitrogen application rate. The report will also include the following for the previous crop year : actual yields, fertilizer applied as pre-emergent or sidedress, and irrigation water applied. Laboratory reports for soil, water and manure analysis, and an inhibitor receipt if used, must be submitted with the annual report.		X	X	X
8. An annual deep soils analysis for residual nitrogen (NO ₃ -N) on each field or 80 acre tract growing corn, sorghum or potatoes, whichever is smaller, with the analysis to be conducted by a laboratory participating in the University of Nebraska Soil Testing Program. A composite sample tested must consist of a mixture from no less than one three-foot probe every five acres. The report from the lab must be attached to the annual report.		X	X	X
9. A groundwater analysis for nitrogen (NO ₃ -N) content on each field growing corn, grain sorghum or potatoes must be made annually . The report from the lab must be attached to the annual report.		X	X	X
10. If manure or sludge is used, a credit for the nitrogen in the manure or sludge must be used in the calculation for the nitrogen recommendation. A laboratory analysis must be conducted for each source of manure or sludge and attached to the report form.		X	X	X
11. A credit for previous year's crop if the previous year was in beans, alfalfa, etc., must be used in the calculation for the nitrogen recommendation on corn and sorghum.		X	X	X
12. The expected yield to be set by the District (last 5 year average of regulated crop + 5%)				X
13. Nitrogen applications must not exceed District Recommendations with a copy of a fertilizer receipt attached to the annual report.				X
14. NRD Staff work with individuals on best management practices				X
15. Operators must monitor groundwater applications to allow for the better management of fertilizer applications and control leaching of nitrates.		X	X	X
16. Phase II, III and IV areas can be established in the future based on N levels in Vadose Zone or based upon nitrate levels not declining at an acceptable rate as determined by the Board of Directors.		X	X	X

CENTRAL PLATTE NRD GRAZING DEFERMENT COST SHARE PROGRAM

Purpose of Cost Share Practice:

To provide incentive for landowners to defer grazing in a pasture for one growing season so that a prescribed burn can be successfully applied in the following year to help in cedar reduction.

Cost share is \$30/acre with a maximum of \$30,000 per landowner.

One application per landowner per year. Applications must be received by January 31st of each year for approval in February.

Priority will be given to lands which will be concurrently enrolled in EQIP or WHIP programs through the NRCS or are within a CPNRD focus project area for cedar reduction.

Use Central Platte NRD Grazing Deferral Cost Share application form. Application must be in the name of the landowner with corresponding social security number or tax ID number. Technician certification is required.

Applications for cost share are not effective until approved by the NRD Board of Directors. Landowner will be notified by NRD concerning approval. Applications must be approved before project can be started.

Claims for payment will not be accepted more than one year from the date the application is approved. There are no extensions.

Documentation must be provided to CPNRD that the land was deferred from grazing from March 1 through the end of the calendar year in the year prior to burn before payment will be made. A field visit will also be done before payment will be made.

U.S. Citizenship and compliance form must accompany application.

CENTRAL PLATTE NRD GRAZING DEFERMENT COST SHARE PROGRAM

Revised (01/27/26)

The purpose of the program is to provide incentive for landowners to defer grazing in a pasture for one growing season so that a prescribed burn can be successfully applied in the following year to help in cedar reduction.

LANDOWNER: _____ SOCIAL SECURITY NO: _____
ADDRESS: _____ PHONE: _____

Cell Phone: _____
County: _____
Email: _____ Operator: _____
LOCATION: _____ 1/4, SECTION _____ TOWNSHIP _____ RANGE _____

This application will not be effective until approved by the NRD: *All applications must be approved before project can be started.* Claims for payment will not be accepted more than one year from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

Lands eligible are annually grazed and planned to be burned the following year. All applications must be received by January 31st of each year to be eligible for funding in February. Priority will be given to lands which will be concurrently enrolled in EQIP or WHIP programs through the NRCS or are within a CPNRD focus project area for cedar reduction.

Cost share is \$30/acre with a maximum of \$30,000 per landowner. One application per landowner per year. Documentation must be provided to CPNRD that the land was deferred from grazing from March 1 through the end of the calendar year in the year prior to burn before payment will be made.

APPLICANT'S REQUEST				PERFORMED		
# of Acres	Price per acre	Maximum	Assistance	Actual # of Acres	Price Per Acre	Cost Share
	30.00				30.00	

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

LANDOWNER CERTIFICATION:

I certify that the land stated above was deferred from grazing for the past year.
I further certify that I am the owner of the above described property associated with this cost share.

Landowner _____ Date _____

Landowner _____ Date _____

NRCS or NRD Technician _____ Date _____

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

COMPLETION AND CERTIFICATION:

NRCS or NRD Technician _____ Date _____

NRD Representative _____ Date _____

NRD Representative _____ Date _____

Office Use Only:

Record #

Compliance

Bills Paid

STATE OF NEBRASKA W-9 & ACH ENROLLMENT FORM

PLEASE SUBMIT FORM TO INVOICED AGENCY

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following boxes:

- ☐ Individual ☐ Sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/Estate
☐ Non-Profit Entity ☐ Government (Local, State or Federal)
☐ **Limited Liability Company.** Enter the tax classification (C = C Corporation, S = S Corporation, P = Partnership) _____
☐ Other (see instructions)

Note: Enter the owner's name on line 1 and mark the appropriate federal tax classification box for disregarded entities.

4 Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____

5 Address: _____ Remit Address (if different): _____

6 City, state, and ZIP code _____ City, state, and ZIP code _____

Taxpayer Identification Number (TIN):

Social Security Number (SSN): _____ OR Employer Identification Number (EIN): _____ Month & Year Tax Id/Name changed

Certification:

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding due to failure to report interest and dividend income, and
3. I am a U.S. citizen or other U.S. person (defined in the instructions), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

For additional instructions please refer to <http://www.irs.gov/pub/irs-pdf/fw9.pdf> to obtain a copy of the IRS Form W-9 General Instructions.

Signature of US Person: _____ Date: _____

Printed Name: _____ Contact Phone: _____

Comments or Business/Entity Notes:

ACH Enrollment:

☐ Initial Setup ☐ Change ☐ Close Account

This information is REQUIRED to process ACH payments. Without this information, your payment may be delayed.

Financial Institution Name:	Nine Digit Routing Number:	Prior Routing Number: *	☐ Check here if the bank is outside of the United States.
Address:	Depositor Account Number:	Prior Account Number: *	☐ Check here if our payments to you are being forwarded from a U.S. financial institution to a financial institution in another country
City, state and ZIP code:	Type of Account: ☐ Checking ☐ Savings	* Prior ACH instructions are required to be completed if changing/updating your ACH instructions with the State of Nebraska.	

This account will be used for all payments by the State of Nebraska unless specified here: _____

E-mail: _____

(Used for ACH payment notifications.)

Authorized Individual or Entity Signature:	Attachment Required! (Select and attach one of the following items for verification):
Printed Name:	☐ Blank check (voided) or ☐ Photocopy of a cleared check
Date:	☐ Letter from your financial institution
	☐ Vendor invoice or letter which contains printed ACH instructions

AGENCY APPROVAL #1 -Signature:

DATE:

AGENCY APPROVAL #2 -Signature:

DATE:

CENTRAL PLATTE NRD REVERSE OSMOSIS SYSTEM COST SHARE PROGRAM

Revised (06/11/26)

The Purpose of the Reverse Osmosis system is to strip away up to 99% of dissolved salts, heavy metals (like lead, arsenic and nitrogen), and chemical pollutants.

Owner: _____
 Address: _____

 Well Registration # _____
 County: _____

Social Security No: _____
 Home Phone: _____
 Cell Phone: _____
 Email: _____

This application will not be effective until approved by the NRD. All applications must be approved before project can be started.

Claims for payment will not be accepted more than five months from the date this application is approved.

Claims for payment submitted but being held subject to compliance with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

Cost share is 50% of actual cost up to \$750.00. **One application per landowner per home.**

Items of cost for which reimbursement is claimed are to be supported by documentation of payment made.

Requirements

Is the private well registered with the Nebraska Department of Water, Energy and Environment? _____

If the well is registered, please attach a copy of the well registration issued by NDWEE.

*If the well is **NOT** registered, please register the well before submitting this application.*

Registration # _____ Copy of Reg. Attached _____

Results from Nitrate testing of well: _____ ppm

(A nitrate test must be done prior to being eligible for cost share - and proof must be attached to application)

APPLICANT'S REQUEST	PERFORMED		
Maximum Assistance	Actual Cost	50% Actual	Cost Share
\$750.00			

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

Owner _____ Date _____

APPLICATION APPROVAL: The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

NRD Representative _____ Date _____

OWNER AGREEMENT:

I certify that the item for which payment is claimed was furnished under authority of the law and that the charges are reasonable, proper and correct. I further certify that I am the owner of the above described property and agree that if the above installed RO System is removed, or not maintained for a period of five years after the date of receiving payment, that a portion of the claimed amount shall be refunded to the Central Platte NRD. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in force and to obtain such new owner's acceptance of the responsibilities herein.

Owner _____ Date _____

NRD Representative _____ Date _____

Office Use Only: Record# Compliance Bills Paid

CENTRAL PLATTE NRD REVERSE OSMOSIS SYSTEM COST SHARE PROGRAM

The purpose of the Reverse Osmosis System is to strip away up to 99% of dissolved salts, heavy metals (like lead, arsenic and nitrogen) and chemical pollutants.

Cost share on a reverse osmosis system is 50% of the actual cost up to \$750.00 maximum with a limit of one system per landowner per home.

A nitrate test must be done prior to being eligible for cost share and the well must be registered with the State. A copy of the test and registration must be attached.

Use Central Platte NRD Reverse Osmosis System Cost Share Application Forms. Application must be in the name of the landowner with corresponding social security number or tax ID number.

Applications for cost share are not effective until approved by the NRD Board of Directors. After approved the landowner will be notified by the NRD concerning approval. ***Applications must be approved before project can be started.***

Claims for payment will not be accepted more than five months from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made. *Sales tax is to be included for cost share.*

The landowner must agree that if the installed reverse osmosis system is removed or not maintained for a period of five years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte Natural Resources District.

US Citizenship must accompany application.

Revised (01/27/26)

77

CENTRAL PLATTE NRD BURN PREPARATION COST SHARE PROGRAM

Purpose of Cost Share Practice:

To make pastures safer for burning, conserve native grasslands for sustained grazing and increase wildlife habitat.

Cost share is 50% up to \$75 per acre per landowner.

Max payout is \$10,000.

One application per landowner per lifetime.

Cost share covers the cost of tree removal and fire line prep.

A map of the area to clear must accompany application

Pasture applications where the goal is to burn are given top priority.

Use Central Platte NRD Rangeland Conservation Cost Share application form. Application must be in the name of the landowner with corresponding social security number or tax ID number. Technician certification is required.

Applications for cost share are not effective until approved by the NRD Board of Directors. Landowner will be notified by NRD concerning approval. Applications must be approved before project can be started.

Claims for payment submitted but being held subject to compliance with all rules and regulations of the CPNRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.

U.S. Citizenship and compliance form must accompany application.

CENTRAL PLATTE NRD CHEMIGATION INCENTIVE COST SHARE PROGRAM

Revised (06/11/26)

The purpose of this program is to increase the number of producers using chemigation as a fertilizer application method.

LANDOWNER: _____ ADDRESS: _____ _____ Email: _____ LOCATION: _____ 1/4,	SOCIAL SECURITY NO: _____ PHONE: _____ Cell Phone: _____ County: _____ Operator: _____ SECTION _____ TOWNSHIP _____ RANGE _____
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This application will not be effective until approved by the NRD: *All applications must be approved before project can be started. Claims for payment will not be accepted more than five months from the date this application is approved. Claims for payment submitted but being held subject to compliance with all rules and regulations of the CPNRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled.*

Items of cost for which reimbursement is claimed are to be supported by documentation of payments made.

Cost share is 50% of actual cost up to \$3,500.00 per field. Landowner must also be enrolled in the Sensor Based Nutrient Management Program. to be eligible for this chemigation incentive program.

Each landowner is eligible to sign-up two fields (320 acres max). \$7,000 lifetime max.

APPLICANT'S REQUEST	PERFORMED		
Maximum Assistance	Actual Cost	50% Actual	Cost Share

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

LANDOWNER CERTIFICATION:

I certify that the item for which payment is claimed was furnished under authority of the law and that the charges are reasonable, proper and correct. I further certify that I am the owner of the above described property and agree that if the above installed flow meter is removed, or not maintained for a period of five years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte NRD. If title to this land is transferred to another party, it shall be my responsibility to advise the new owner that this agreement is in force and to obtain such new owner's acceptance of the responsibilities herein.

Landowner	Date
-----------	------

NRCS or NRD Technican	Date
-----------------------	------

APPLICATION APPROVAL:

The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate \$ _____

Landowner	Date
-----------	------

COMPLETION AND CERTIFICATION:

NRCS or NRD Technician	Date
------------------------	------

NRD Representative	Date
--------------------	------

NRD Representative	Date
--------------------	------

Office Use Only:

Record # _____

Compliance _____

Bills Paid _____

CENTRAL PLATTE NRD CHEMIGATION INCENTIVE COST SHARE PROGRAM

Purpose of Cost Share Practice:

To increase the number of producers using chemigation as a fertilizer application method.

Cost share is 50% of the actual cost up to \$3500.00 per location(field) – 2 max. Eligible items: chemical injection pump, interlock, injection valve, mainline check valve, low pressure drains and discharge hose.

Landowners must also be enrolled in the Sensor Based Nutrient Management Program to be eligible for this program.

Each landowner is eligible to sign-up two fields (320 acres max). \$7,000 lifetime max.

Use Central Platte NRD Chemigation Incentive Cost Share Application Forms. Application must be in the name of the landowner with corresponding social security number or tax ID number. NRCS certification is required.

Applications for cost share are not effective until approved by the NRD Board of Directors. After approved the landowner will be notified by NRD concerning approval. *Applications must be approved before project can be started.*

Claims for payment will not be accepted more than five months from the date the application is approved. There are no extensions.

Items of cost for which reimbursement is claimed must be supported by documentation of payments made. *Sales tax is to be included for cost share.*

The landowner must agree that if the chemigation system is removed or not maintained for a period of three years after the date of receiving payment, that portion of the claimed amount shall be refunded to the Central Platte Natural Resources District.

US Citizenship must accompany application.

