

Request #: _____

Date Received at NHQ: _____

WETLANDS RESERVE PROGRAM 7-YEAR OWNERSHIP WAIVER REQUEST

State:

County:

Landowner(s):

Landowner Request Date:

Date Deed Acquired:

Total tract Acres:

Total Offered Acres:

Total cropland acre offered:

Description of Circumstances:

Recommendations:

State Conservationist: I recommend approval of this Waiver Request YES NO

Landowner(s) meet all other eligibility requirements: YES NO

Offered acreage has been determined to be eligible: YES NO

Signature: _____ **Date:** _____

Director, Easements Program Division: Approve Deny

Signature: _____ **Date:** _____

Deputy Chief for Easements and Landscape Planning: Approve Deny

Signature: _____ **Date:** _____

Chief Decision:

I approve this waiver request

I Deny this waiver request

Dave White, Chief

Date