



Natural Resources Conservation Service

**CONSERVATION STEWARDSHIP PROGRAM (CSP)
Control of Land Certification by Owner**

MICHIGAN CSP PARTICIPANT CONTROL OF LAND CERTIFICATION

Owner Name: _____

Participant Name: _____

Farm Number: _____

Tract Number: _____

**Land Unit
Description:** _____

**For the above described land unit that I own, I hereby certify that my Tenant,
_____, will have control of this land for the purpose
of satisfying the terms and conditions of a Conservation Stewardship Contract, for the
proposed contract period, 5 years.**

Landowner's Signature of Authorization

Date

(Complete a separate sheet for each parcel to be enrolled in CSP that is owned by other than the CSP contract participant.)

Revised July 2009