



Environmental Quality Incentives Program (EQIP)

Worksheet
Salina, Kansas
November 2008

Fiscal Year (FY) 2009 Kansas Self-Assessment Worksheet - Cropland

1) Name or Entity: List all who will be a party to the contract and identify as owner or operator. If desired, producer may provide copy of FSA-156EZ.

PHONE NUMBER OF CONTACT (Home)_____ (Cell)_____

2) Location of Application Acres: Please provide copies of maps with legal descriptions and all fields clearly marked.

3) Benchmark Condition: Please complete the following information for the offered acres. Answer the following questions: (circle **Yes** or **No**)

- Do you apply nutrients according to a current soil test (less than three years old)?
(See Attachment 1 for soil sampling requirements) **Yes No**
- Are ditches, gullies, or other active erosion occurring?
(Mark these areas on the map[s] provided) **Yes No**
- Do you have land sloughing off into streams or is streambank erosion occurring?
(Mark these areas on the map[s] provided) **Yes No**
- Do you apply livestock waste? **Yes No**
- Do you now or have you ever rented or owned a no-till drill? **Yes No**

If you answer yes to the above question:

How many years owned?_____ rented?_____ No-till acres planted?_____

- What is your planned crop rotation? _____
- Complete the **Cropping Management Inventory Worksheet** (Attachment 2).

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4) Eligibility Requirements for EQIP:

- The following forms must be current and on file with the Farm Service Agency (FSA) for all contract participants that would receive financial assistance. Please verify with FSA.
 - Form AD-1026, Highly Erodible Land Conservation and Wetland Conservation Certification
 - Form CCC-501A, Member's Information (for entity and joint operations only)
 - Form CCC-526, Payment Eligibility – Average Adjusted Gross Income Certification
- If applicant is not the landowner, the applicant must also furnish evidence of control of the land for the contract period. *(This may be a written lease or other legal agreement, a letter from the owner indicating the participant will have control of the acres for the life of the contract, or a statement signed and dated by the owner indicating control by the participant for the life of the contract.)* Landowners must sign the contract if the operator cannot provide control of land documentation or if a structural practice will be installed.
- If applicable, a copy of the corporate charter, bylaws, court orders of appointment, trust agreement, last will and testament, or articles of partnership clearly designating who has signature authority for the entity or joint operation.
- If applicable, Form NRCS-CPA-9, Power of Attorney (POA) will be required. A legally developed POA, is also acceptable.
- Prior to contract approval, participants must agree and set contract shares and identify one decision maker (point of contact) for the contract.

5) Contract Incentive Limits:

Beginning with FY 2008 each participant may earn up to \$50,000 in total EQIP incentive payments for any ranking category (for example: Water Quality, Soil Quality, Grazing Lands Health). Incentive payments shall not exceed \$50,000 per contract or participant.

6) Program Participation:

Do you participate in any of the following program contracts listed below or will you be party to any other current year EQIP applications in Kansas? **Yes No**

- Conservation Reserve Program*
- Conservation Stewardship Program*
- Farm and Ranch Lands Protection Program*
- Grassland Reserve Program*
- Wildlife Habitat Incentives Program*
- Wetlands Reserve Program*

If yes, please list the servicing U. S. Department of Agriculture county office and number of active contracts or current year's applications.

7) Certification:

This Self-Assessment Worksheet must be completed and signed prior to the EQIP application evaluation cutoff date in order for your application to be eligible for EQIP ranking and funding.

I have read and answered all the questions on this worksheet and provided the information requested to the best of my ability.

Signature

Date