2025 NC Agriculture Cost Share Program Applicant Information

Applicant:						
Name						
Business						
Address						
Phone			email			
Landowner (if different fro	om Applicant) :				
Address						
Phone			email			
Farm information:						
			Tract #: _			
Type Operation:				(crops, livestock, pasture,	or hay, etc.)	
Total Owned Acres:	Total Leased Acres:					
Animals?						
	Number		Typo	Number		
Type	Number		Type_ Type	Number Number		
туре	_ Number		i ype_	Number		
Streams on Property?	Yes	or	No			
Farm sales tax exem Other, please descril				owner or operator by the NC De	pt. of Revenue	
Check Practices of Interes	st:					
			<u>Ero</u>	sion Control on Cropland:		
Manure Management: ☐ Compost Structure				□ Cropland Conversion to Grass or Tre□ Cover Crop	ees	
☐ Waste Storage Structure				□ Sod-Based Rotation		
☐ Storm Water Management				□ Grassed Waterways		
☐ Heavy Use Area Protection				☐ Field Borders		
☐ Closure of Waste Storage Structure				☐ Strip Cropping		
Canaan lation Irrigation				□ Long Term No-Till (3 Year) or (5 Year	ar)*	
Conservation Irrigation: ☐ High Pressure to Drop Noz	عماده		Stre	eam Protection: (Livestock must be excl	uded from streams	
☐ High Pressure to Low Nozzles				☐ Livestock Exclusion Fencing	adda irom oli damo,	
☐ Overhead to Drop Nozzles				☐ Heavy Use Area		
□ Overhead to Low Pressure				☐ Alternative Watering Systems		
☐ Traveling gun to Center Piv	ot Drop or Low P	ressure		☐ Stock Trails and Walkways		
Water Supply Ponds:			<u>Oth</u>			
□ Restoration/Repair Existing	y Pond			□ Pasture Renovation		
□ Pond Sediment Removal□ Private Engineering Assista	ance			□ Critical Area Seeding		
Applicant Signature					 Date	

Return completed form to:

Guilford SWCD, 3309 Burlington Road, Greensboro, NC 27405 or **FAX to: 336-641-2441**Email to: fcox@guilfordcountync.gov or <u>jwalker1@guilfordcountync.gov</u> Phone: 336-641-2440