



Agricultural Enhancement Program Heavy Use Area Protection Application

West Virginia
Conservation Agency

Applicant Information
Name:
Mailing Address:
Telephone:
Email Address:
Application Date:

Farm Information
Conservation District: WEST FORK CONSERVATION DISTRICT
County :
Farm Name:
Farm # :
Tract # :
Field # or #'s:

Best Management Practice

Please complete the following information for the Best Management Practice you would like to apply for:

BMP	Limits	Cost-Share Rate	Amount applied for	Other
<u>Heavy Use Area Protection</u>	Use of gravel and fabric. Maximum of \$1,000.00 or 1,000 Sq.Ft	\$1.00 per Sq. Ft. not to exceed 1,000 Sq. Ft.	_____ Sq. Ft.	Ground cloth, 6" #57 rock, 2" Crusher Run

Program Eligibility

A. Definition

The stabilization of area frequently and intensively used by animals and/or vehicles by surfacing with suitable materials. The base shall be either gravel, crushed stone or geotextile to provide the site with a need for increased load bearing strength, drainage, separation of material, and soil reinforcement.

B. Purpose

Reduce soil erosion. Improve water quantity and quality, aesthetics and livestock health. Can be used for the following: Livestock watering areas livestock trail and walkways, loading and unloading area, and post-harvest processing areas.

C. Policies for Practice

1. Applicant must be a District Cooperator.
2. A W-9 tax form will be required with application for District tax purposes.
3. Cost share is available to owner or lessee.
4. Applicant must provide map identifying tract and field along with proposed acreage.
5. NRCS standards and specs must be followed.
6. Methods of seeding stands may be established either by conventional or no till.
7. Approvals will be final on _____.
8. Application approvals will be made based upon availability of funds and based on the ranking form.
9. After approval applicant must follow job sheets provided at the time of signing the contract.
10. Practices must be completed and invoices must be submitted by _____.

D. Payment rates & limits:

1. Cost share will pay \$1.00 per square foot up to 1,000 square feet or \$1,000.00.
2. Maximum of \$1,000.00 per applicant.
3. The payment will be made after paid invoices are received, cooperator completes a W-9 form and the AEP committee has made a site visit.
4. No duplication of federal or state cost-share shall be allowed.
5. Total reimbursement will not exceed total cost based on receipts submitted.

E. Practice Specifications

1. Please refer to job sheets provided at the time of approval and signing of contract.
2. Cost-share only covers the use of gravel/stone and geotextile.

By signing this I have read, understand, and agree to the terms and conditions stated in this document.

Farm Name (if applicable): _____

Applicants Signature: _____ **Date:** _____

OFFICE USE ONLY:	
Date Received:	
Time Received:	
Ranking Score:	
If Approved:	
BD Date Approved:	
Contract Expiration Date:	
Application #:	
Verification #:	