



Chesapeake Bay Program Cover Crop Application

Sign up period: June 16th, 2025, through July 18th, 2025

Practices **MUST** be completed by October 31st, 2025



Name: _____

Farm Number/Name _____

Address: _____

Tract # _____

Field # _____

Good Day Time Phone # _____

Email Address _____

Best Management Practice (BMP) applied for:

BMP	Limits	Cost-Share Rate	Amount applied for	Current Crop	Crop to be planted
Cover Crops	Not to exceed 50 acres	Flat rate \$50/ac. Must be planted by October 31 st Max Payment of \$2,500.00	_____ acres	_____	_____

A. Description and Purpose

1. Cost-share payments are provided for the establishment of vegetative cover on cropland for protection from rain and wind erosion and the reduction of nutrient losses to groundwater.

B. Polices 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 one of the following documents: Written lease for current time period, Current Farm Service Agency Farm Data Report or WVCA Operator Form. This will describe who is the owner and/or lessee.
5. The applicant, if a member of a legal entity, must provide a copy of a CCC-901 Form stating who the members are.
6. The applicant must have a Farm Use Evaluation for this property.
7. Applicants must provide a map identifying tract and field where the proposed planting will be.
8. Approvals will be final on **the second Tuesday of August depending on available funds.**
9. Application approvals will be made based upon availability of funds and order received.
10. Invoices must be submitted by **November 21, 2025, 4:00PM.**

C. Practice Specifications:

1. All seed must be free of prohibited noxious weed seed and have a minimum germination rate of 80%. If the grower elects to use home grown seed, it must be tested for purity, germination and noxious weeds prior to seeding by a recognized seed laboratory.

2. **Practice must be completed by October 31, 2025.**

3. The cover crop purpose: may be left on the field for conservation purposes; or the cover crop or its residue may be tilled under; or the cover crop may be harvested after April 1st.

4. The life span of this practice is a minimum of 1 year.

D. Payment rates & limits:

1. The maximum cost-share for this practice is **\$50/ac by the October 31st Plant Date, Max Payment of \$2,500.00**

2. Maximum of 50 acres per producer.

3. **Practice must be completed by October 31, 2025.**

4. The payment will be made **within 45 days** after invoices are submitted and AEP representative has made a site visit, providing funding is available.

5. No duplication of federal or state cost-share shall be allowed.

<i>Some of the recommended seed type and planting rates are listed in the following table:</i>			
<i>Species</i>	<i>Rates/ ac</i>	<i>Species</i>	<i>Rates/ac</i>
Wheat	2 bu.	Crimson Clover	20 lbs.
Cereal Rye	2 bu.	Red Clover	15 lbs.
Spring Oats	2 bu.	White Clover	12 lbs.
Barley	2 bu.	Ryegrass	40 lbs.
Triticale	2 bu.	Bluegrass	40 lbs.
Annual Ryegrass	30 lbs.	Smooth Bromegrass	40 lbs.
Hairy Vetch	30 lbs.	Orchardgrass	40 lbs.
Crownvetch	5-20 lbs.	Timothy	40 lbs.
Mixed: Radish, peas, etc.	Consult	Birdsfoot Trefoil	10 lbs.

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

Applicant's Signature: _____ Date: _____

OFFICE USE ONLY:	
Date Received:	
Time Received:	
Ranking Score:	
If Approved:	
District Bd Date Approved:	
Verification #:	