





Vermont Association of Conservation Districts (VACD) Regional Conservation Partnership Program (RCPP) Nutrient Management Planning Program

2017 Farmer Application & Information Release Form

Applicant Name	Farm Address
Farm Name	
Phone/Fax	City, State
E-mail	Zip Code
VACD RCPP program to develop and comple	Quality Incentives Program (EQIP) technical assistance under the ste a Nutrient Management Plan on a farm that I own or lease. ed in my Nutrient Management Plan is acres.
 discussing my production and conserved allowing technical assistance provided treatment plan; assisting with soil sampling; taking and delivering manure samples collecting and recording farm data; participating in six days of nutrient manure 	arm Service Agency to determine my eligibility for EQIP support; vation goals with technical assistance providers; ers access to my land to take soil/manure samples and complete a land er; anagement planning classes, and; Plan to standards established by the U.S. Department of Agriculture
and NRCS technical assistance providers for	rovide farm access to Conservation District, VACD, UVM Extension the purpose of collecting data to assist in the development of my plan. measurements, and conducting resource assessments.
I authorize the USDA Farm Service Agency (I	FSA) to release information regarding my farm to:
(Name of TA providers)	
This authorization is for farm records for any	farms on which I am an owner/operator, or other producer:

-- Aerial Photography Property Map which includes farm ID, tract ID, field ID, acres and land use determinations such as HEL and WC. -- USDA - FSA form AD-1026A - Farming Interest

-- USDA - FSA form FSA-578 - Report of Acreage

-- Crop Records

I understand that this information will only be used for the purpose of assisting me in developing my Nutrient Management Plan and any other voluntary conservation planning and implementation activity of my choosing. This authorization is in effect for two years from the date of my signature.		
Farm Owner/Operator:		
Signature:	Date:	
Printed Name:		
Conservation District:		
Signature:	Date:	
Printed Name :	Title:	
Name of Conservation District:		

VACD RCPP NMP Program Application Form p. 2 for (farmer name):