



# SWRM Grant Program Topics

**Section 1: 2018 Joint Grant Application: Staffing and Cost-Share Grants**

**Section 2: Non-Grant Applications: NOD/NOI and NMFE**

**Section 3: Landowner Cost-share Contracts**

**Section 4: Reimbursements**

**Section 5: Nutrient Management Projects**

**Section 6: Engineered Project Examples**

**Section 7: Well Cost-Sharing**

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## Current documents posted on SWRM Working Manual



- Download and use most current forms including
  - Staffing Reimbursement Form
  - C/S Contract Change Order
  - Cost-Share Reallocation for Discharges
- Review most current documents including
  - ATCP 50 Changes in NM Standards and Cost-Sharing
  - Continuing Compliance Guidance

SWRM Working Manual

[https://datep.wi.gov/Pages/Programs\\_Services/SWRMGrantProgramWorkingManual.aspx](https://datep.wi.gov/Pages/Programs_Services/SWRMGrantProgramWorkingManual.aspx)

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## Paperless submissions: Electronic signing and emailing



- Electronically sign and submit
  - DATCP portion of annual grant application
  - Grant contract
  - Staffing reimbursement request
  - Change order (if required)
- Sign printout, scan, electronically submit, and retain original
  - Cost-share contract
  - Cost-share reimbursement request
  - Cost-share transfer or reallocation request

Email to: [datcpswrm@wisconsin.gov](mailto:datcpswrm@wisconsin.gov)

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## Section 1: Joint Grant Application: Staffing and Cost-Share Grants

### Forms Discussed in this Section:

- Grant Application
- Staffing Grant Reimbursement

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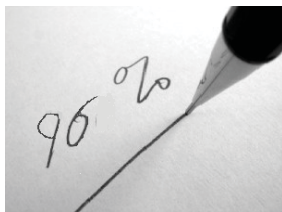
## 2018 Grant Application



- Tier 1: \$75,000 minimum
  - Optional at DATCP discretion
- Tier 2: Counties may seek an additional allocation to cover
  - 100% of first position
  - 70% of second position (no more than 80%)
  - 50% of third and subsequent positions (no funding anticipated)

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## First position eligibility requirements



- May only claim conservationist, technician or engineer
  - Must spend over 95% performing qualifying conservation (SWRM) work
- May not claim staff who provide support (GIS specialist, computer programmer, and office manager), or information and education

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## Non-qualifying work



- Park maintenance and operational activities
- Zoning activities such as subdivision and non-metallic mining
- Wildlife damage claims
- Invasive species outreach and education
- Incidental programming funded by other sources such as recycling, land records, and clean sweep

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First complete Table 1 using 2016 data and listing highest paid positions in the number 1 and 2 slots

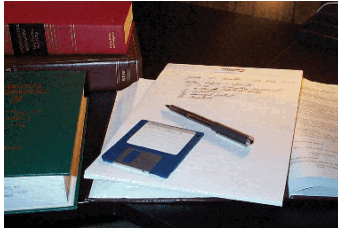
- (1<sup>st</sup> position must be > 95% SWRM)

COUNTY								
2016								
Position Number	Position Title	Limited (LTE), Permanent (PTE), Independent Contractor (IC)	If not currently hired or retained*, insert expected fill date	Salary or Fee	Fringe (for employees - county contribution only)	% Time spent on conservation activities (see instructions)	Total eligible staffing costs (C+D) x E (Rounded to the nearest dollar)	This is the sum of the 4th and subsequent positions.
1	D	FTE		\$84,999.00	\$36,038.00	100.00%	\$101,037.00	
2	A	FTE	4/22/2017	\$62,204.00	\$32,531.00	100.00%	\$94,735.00	
3	C	FTE		\$44,634.00	\$18,848.00	50.00%	\$31,741.00	
4	B	FTE		\$57,881.00	\$27,224.00	100.00%	\$85,105.00	\$201,603.00
5	C	FTE		\$51,741.00	\$15,337.00	100.00%	\$67,078.00	
6	C	LTE		\$49,510.00	\$0.00	100.00%	\$49,510.00	
7							\$0.00	
8							\$0.00	
9							\$0.00	
10							\$0.00	
11							\$0.00	
12							\$0.00	
13							\$0.00	
14							\$0.00	
15							\$0.00	
16							\$0.00	
17							\$0.00	
18							\$0.00	
19							\$0.00	
20							\$0.00	
TOTAL							\$430,206.00	

Provide required documentation to DATCP for new hires and vacancies that will be filled

Totals automatically lowered if less than 100%

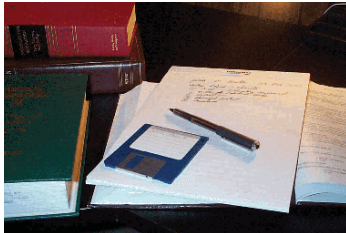




### Staffing grant example 1: Base award only

Position	Base available (running total)	Request	Additional funding
1	\$75,000	\$42,997	No \$32,003 leftover
2	\$32,003	\$26,201	No \$5,802 leftover
County receives \$75,000			

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### Staffing grant example 2: \$32,853 above base

Position	Base available (running total)	Request	Additional funding
1	\$75,000	\$ 88,276	Yes, \$13,276
2	\$0	\$48,943	Yes, \$19,577 (40% of 70% award)
3	\$0	\$35,182	No funding available

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## SEG cost-share funds

SECTION I. STAFFING/PLANNING GRANTS		Amount Requested of DATCP	Amount
1	Soil and Water Resource Management (SWRM) Tier 1		
	A. Base Funding		
	\$75,000 is automatically entered.	\$ 75,000.00	
2	SWRM Tier 2		
	A. Funding for three positions		
	Automatic positions		
	i. First (10)		
	ii. Second		
	iii. Third		
	iv. Fourth		
	Automatic positions		
3	Urban NPDES Storm Water Management - Planning Projects		
	(Complete separate application available on DNR website)		
TOTAL STAFFING REQUESTS ▶		\$ 284,070.00	
SECTION II. COST-SHARING GRANTS		Amount Requested of DATCP	Amount
1	Land and Water Resource Mgmt. (LWRM) Plan Implementation: Bond Funds	\$ 100,000.00	
2	LWRM Plan Implementation: SEG Funds	\$ 75,000.00	
3	Targeted Runoff Management Projects		
	(Complete separate application available on DNR website)		
4	Urban NPDES Storm Water Management - Construction Projects		
	(Complete separate application available on DNR website)		
TOTAL COST-SHARING REQUESTS ▶		\$ 175,000.00	

Apply for realistic amount

- Plan for transition
- Consider additional farms in AEAs or near impaired waters

No need to identify acreage or cost-share rate

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SECTION 1236. 92.14 (6) (c) of the statutes is created to read:		MBLY BILL 64	
92.14 (6) (c) When preparing an annual grant allocation plan under par. (b), the department and the department of natural resources shall consider the existence and location of impaired water bodies that the department of natural resources has identified to the federal environmental protection agency under 33 USC 1313 (d) (1) (A) and agricultural enterprise areas designated under s. 91.84, and shall give priority to projects that are in or near, or that affect, those areas.		NT COMMITTEE ON FINANCE Joint Committee on Finance Recommendations	
2017-2018 Legislature		LRB-1928/1 ALL	
SECTION 183		SECTION 183	
ASSEMBLY BILL 64		itions,	
Five		2017-2018	
C		2018-2019	
1,233,300		1,233,300	
1,585,900		1,587,600	
2,214,600		2,217,600	
5,036,900		5,036,900	
3,325,000		3,325,000	
6,701,100		6,709,000	
24	(g) Soil and water management; local assistance	SEG	A
25	(gf) Soil and water management; aids	SEG	A
	(r) General program operations; agricultural management	SEG	A

- \$825,000 SEG cost-sharing increase
- Allocation focus on Impaired Waters and AEAs

## DATCP will use internal data to award up to 100 points for NM applications



- Up to 15 points based on number of farmers claiming a 2015 FPP tax credit
- Up to 60 points based on number of NM checklists submitted to DATCP in 2016
- Up to 10 points for one or more AEAs
- Up to 15 points based on the spending or committing at least 80% of its 2016 SEG funds

## Bond cost-share formula



- Percentage of funds awarded according to these criteria
  - \$10,000 base (20%)
  - 3-year cumulative under-spending percentage (50%)
  - Ag Census land in farms by acres (20%)
  - 3-year cumulative spent on cost-shared practices (10%)
- DATCP will score counties using data in its possession<sup>16</sup>





## File one request by November 1st

## File one request by November 1st

[illegible]

May include costs for

- Economic hardship determination
- Cultural resource checks
- Endangered species checks

Sign electronically by typing  
name in signature block

## Must provide match to obtain staffing reimbursement



Use these sources to meet match requirement for second and subsequent positions

- county levy
- permit fees
- private grants
- federal grants
- State funds other than under chs. 92, 281 and 283, Stats.

# Section 2: Other Grant Applications: NOD/NOI and NMFE

- 2017 NOD/NOI Grant Application
  - DATCP and DNR funds
- NMFE Grant
  - All requests funded

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## 2017 discharge grants

State of Wisconsin  
Department of Natural Resources  
Bureau of Watershed Management (BWM) (w.gov)  
Department of Agriculture, Trade & Consumer Protection  
Division of Land & Water Resources (DLWR) (w.gov)

**DNR & DATCP Cost-Share Grant Application for  
Notice of Intended Discharge (NOD/NOI) Project Funding**

Form 8700-004 (R 1/15) Page 1 of 4

**Notice:** This application form template was drafted by the Wisconsin Department of Natural Resources (DNR) and the Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP). Applications are hereby made to the DATCP Bureau of Watershed Management and the DATCP Bureau of Land and Water Resources for grant assistance consistent with and under the authority of s. 10.14, Wis. Stats., and in ATCP 10.16, Wis. Admin. Code and the authority of s. 201.05 and 10.14, Wis. Stats., and the 101.03 and 104.16, Wis. Admin. Code. Collection of this information is authorized under the authority of ss. 201.05 and 10.14, Wis. Stats. Personal information collected will be used for administrative purposes and may be provided in response to the request required by Wisconsin's Open Records Law (ss. 19.31 - 19.39, Wis. Stats.). Other information must all obtain under Wisconsin Administrative Code.

**Caution:** Notice of Discharge Grants may not be used to cost-share best management practices to address discharges for which the landowner or operator has been referred to the Wisconsin Department of Justice for prosecution.

**Part 1: Applicant Information**

Project/Landowner Name \_\_\_\_\_

Governmental Unit Applying (Name and Type): (Examples: Jones County Land & Water Resources Department)

Name of Responsible Municipal Representative (Print Last): \_\_\_\_\_ Name of Governmental Contact Person (Print Last) (if different): \_\_\_\_\_

Title \_\_\_\_\_

Area Code + Telephone Number \_\_\_\_\_ Area Code + Telephone Number \_\_\_\_\_

Area Code + Fax Number \_\_\_\_\_ Area Code + Fax Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Mailing Address - Street or Route \_\_\_\_\_ Mailing Address - Street or Route \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

**Part 2: Project Location**

**A. Map and Photograph Requirements:** This application must be accompanied by maps and photographs of the project site.

Mapping requirements are:

1. The base map should be an air photo clearly showing:
  - the location facilities, conveyance channels, and overflow flow paths;
  - all affected surface waters including tributaries and perennial meandering waters; and
  - any point of suspected groundwater susceptibility.
2. The map shall identify and label the pollution control area and clearly mark the flow path and point of discharge to groundwater or the nearest surface water.
3. If the nearest surface water is not navigable, the map shall show the flow path continued to a point where the receiving water surface becomes navigable.
4. Roads, fences, trees, and other features customarily used to orient the reviewer to the site should be included and labeled.

Submit 3 to 6 photographs in total showing the site, the conveyance path and the discharge point. Include brief descriptions of what each photograph is depicting.

**B. Location Information**

County	Township	Range	E or W	Section	Quarter	Latitude	Longitude
State of Wisconsin							

- Set aside of \$2.35 million
- Submit a separate application, <http://dnr.wi.gov/aid/nod.html>
  - 2017 applications deadlines: April 15, mid June, and mid August
- Contacts: Scott Karel, [Scott.Karel@wi.gov](mailto:Scott.Karel@wi.gov) or Mike Gilbertson, [Mike.Gilbertson@wi.gov](mailto:Mike.Gilbertson@wi.gov)
- Contact DATCP Engineers for funding to address other discharges

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## 2018 NMFE Training Grants

The image shows the cover page of the 2018 NMFE Program Grant application form. It is titled "2018 NMFE Program Grant - Cover Page" and includes the Wisconsin Department of Agriculture, Trade and Consumer Protection logo. The form contains several sections for applicant information, project details, and funding preferences. Key sections include: "Project Title", "Are you seeking Tier 1 or Tier 2 funding?", "Are you seeking continued funding for a prior Natural Resource Management Program Extension project?", "What organization will handle your project's fiscal administration?", "What state best describes the geographic focus of your project?", and "Provide a brief description of your project." The form is labeled "Form 1 of 5" at the bottom.

- April 15<sup>th</sup> deadline to submit application materials,  
[https://datcp.wi.gov/Pages/Programs\\_Services/NMFEGrants.aspx](https://datcp.wi.gov/Pages/Programs_Services/NMFEGrants.aspx)
- Two funding levels:
  - Tier 1: \$20,000 max
  - Tier 2: \$2,500 max
- Contact:  
Rachel Rushmann,  
[Rachel.Rushmann@wi.gov](mailto:Rachel.Rushmann@wi.gov)

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## Section 3: Landowner Contracts

### Forms Discussed in this Section:

- Landowner Contract
- Exhibit A-1 Form
- Change Order Form
- Verification Status Data Sheet

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## One year cycle for cost-share projects



- Sign cost-share contracts in the year funds are awarded
  - May sign before grant contract signed with DATCP
- Complete by Dec. 31 (must incur all costs) or extend incomplete projects
- Pay costs for completed projects by Jan. 31 of the next year
- Request reimbursement no later than Feb. 15 of the next year <sup>25</sup>

## Practices eligible for cost-sharing



- Identified in ATCP 50, subch. VIII
  - DATCP approval required for VTAs and feed storage
- Other practices approved by DATCP
  - None approved to date

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## Ineligible practices and costs



- Required as part of CAFO permit.
  - Excludes streambank protection
- Heavy use area protection as a separate practice
  - Must be cost-shared as a component
- State or local permit fees
- Road building for public use

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## NM plans required with cost-sharing



- A manure storage system
- Barnyard runoff control over \$25,000 in cost-sharing
- Feed storage runoff control where runoff is
  - Collected from a storage area over 1 acre
  - Not transferred to a manure storage
- Manure storage closure and milking center waste control if waste must be land applied as part of the cost-shared practice

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and grant recipient(s) \_\_\_\_\_. **This contract is complete and valid as of the date signed by the county representative.**

In consideration of the terms and conditions herein, the parties agree to this contract as set forth in the following Sections 1, 2, and 3, and any addenda that are annexed and made a part hereof.

**NOTE 1:** It is not necessary to notarize the spouse's signature unless this contract will be recorded. However, the spouse must sign his or her own name. All other signatures must be notarized. If there are additional landowners or any grant recipients, check here ☐ and attach Exhibit A1.

**NOTE 2:** Only properly authorized person(s) can sign in a representative capacity and must sign in such capacity if the landowner is a corporation, trust, estate, partnership, limited partnership, or limited liability company.

Recording Area \_\_\_\_\_  
Agency Name & Return Address \_\_\_\_\_  
Parcel Identification Number \_\_\_\_\_

William Hawk 12/25/13 Ruth Hawk 12/25/13  
LANDOWNER/REPRESENTATIVE DATE LANDOWNER/REPRESENTATIVE DATE  
PRINT OR TYPE NAME: William Hawk PRINT OR TYPE NAME: Lilly Hawk

State of Wisconsin )  
Dane County ) ss.  
This instrument was acknowledged before me on 12/21/12 (date)  
by William Hawk  
(name of landowner or representative)  
as \_\_\_\_\_  
(representative's position or type of authority, if applicable)  
for \_\_\_\_\_  
(name of entity on behalf of whom instrument was executed, if applicable)  
O. F. Ficial O.F. Ficial  
SIGNATURE PRINT NAME  
Notary Public, State of Wisconsin  
My commission expires \_\_\_\_\_ (is permanent).  
H.D. Worker 1/5/14  
SIGNATURE OF COUNTY REPRESENTATIVE DATE  
PRINT OR TYPE NAME: H.D. Worker

State of Wisconsin )  
\_\_\_\_\_ County ) ss.  
This instrument was acknowledged before me on \_\_\_\_\_ (date)  
by \_\_\_\_\_  
(name of landowner or representative)  
as \_\_\_\_\_  
(representative's position or type of authority, if applicable)  
for \_\_\_\_\_  
(name of entity on behalf of whom instrument was executed, if applicable)  
\_\_\_\_\_  
SIGNATURE PRINT NAME  
Notary Public, State of Wisconsin  
My commission expires \_\_\_\_\_ (is permanent).

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- All contracts must have landowners signature on first page
- Grant recipients never sign first page

- Spouse must sign if landowner is married

This contract is made and entered into by and between \_\_\_\_\_ County Land Conservation Committee, and landowners(s) \_\_\_\_\_ and grant recipient \_\_\_\_\_. **This contract is complete and valid as of the date signed by the county representative.**

In consideration of the terms and conditions herein, the parties agree to this contract as set forth in the following Sections 1, 2, and 3, and any addenda that are annexed and made a part hereof.

**NOTE 1:** It is not necessary to notarize the spouse's signature unless this contract will be recorded. However, the spouse must sign his or her own name. All other signatures must be notarized. If there are additional landowners or any grant recipients, check here ☐ and attach Exhibit A1. Insert "not applicable" for each line not completed.

**NOTE 2:** Only properly authorized person(s) can sign in a representative capacity and must sign in such capacity if the landowner is a corporation, trust, estate, partnership, limited partnership, or limited liability company.

Recording Area \_\_\_\_\_  
Agency \_\_\_\_\_

William Hawk 12/21/14  
LANDOWNER/REPRESENTATIVE DATE  
PRINT OR TYPE NAME: William Hawk

State of Wisconsin )  
Dane County ) ss.  
This instrument was acknowledged before me on 12/21/14 (date)  
by William Hawk  
(name of landowner or representative)  
as \_\_\_\_\_  
(representative's position or type of authority, if applicable)  
for \_\_\_\_\_  
(name of entity on behalf of whom instrument was executed, if applicable)  
O. F. Ficial O.F. Ficial  
SIGNATURE PRINT NAME  
Notary Public, State of Wisconsin  
My commission expires \_\_\_\_\_ (is permanent).  
H.D. Worker 1/5/14  
SIGNATURE OF COUNTY REPRESENTATIVE DATE  
PRINT OR TYPE NAME: \_\_\_\_\_

State of Wisconsin )  
\_\_\_\_\_ County ) ss.  
This instrument was acknowledged before me on \_\_\_\_\_ (date)  
by \_\_\_\_\_  
(name of landowner or representative)  
as \_\_\_\_\_  
(representative's position or type of authority, if applicable)  
for \_\_\_\_\_  
(name of entity on behalf of whom instrument was executed, if applicable)  
\_\_\_\_\_  
SIGNATURE PRINT NAME  
Notary Public, State of Wisconsin  
My commission expires \_\_\_\_\_ (is permanent).

Never notarize for spouse's signature unless contract recorded

Notarize landowner signature if:

- Contract recorded
- Bond funds used
- Not required for SEG funds

# Download and use Exhibit A1

ARM LWR 260 (Rev. Mar. 2010)  
Exhibit A1

**ACKNOWLEDGEMENT**

COST-SHARE CONTRACT NO. \_\_\_\_\_

**ADDITIONAL LANDOWNER**

**NOTE 1:** It is not necessary to notarize the spouse's signature unless this cost-share contract is for a partnership, limited partnership, or limited liability company. Strike titles that do not apply and insert "not applicable".

**NOTE 2:** Only properly authorized person(s) can sign in a representative capacity for a partnership, limited partnership, or limited liability company.

Tom Falcon 1/5/14  
Signature of landowner/grant recipient/authorized representative Date

Print Name: Tom Falcon

Betty Falcon 1/5/14  
Signature of spouse Date

Print Name: Betty Falcon

State of Wisconsin )  
Dane County ) ss.

This instrument was acknowledged before me on 1/5/14 (date)

by \_\_\_\_\_  
(name of person(s))

as \_\_\_\_\_  
(representative's position or type of authority, if applicable)

for \_\_\_\_\_  
(name of entity on behalf of whom instrument was executed, if applicable)

O. F. Ficial  
Signature  
PRINT NAME: O. F. Ficial  
Notary Public, State of Wisconsin  
My commission expires \_\_\_\_\_ (is permanent).

Signature of landowner/grant recipient/authorized representative Date

Print Name: \_\_\_\_\_

Signature of spouse Date

by \_\_\_\_\_  
(name of person(s))

as \_\_\_\_\_  
(representative's position or type of authority, if applicable)

for \_\_\_\_\_  
(name of entity on behalf of whom instrument was executed, if applicable)

SIGNATURE \_\_\_\_\_  
PRINT NAME: \_\_\_\_\_  
Notary Public, State of Wisconsin  
My commission expires \_\_\_\_\_ (is permanent).

**Use if there are multiple landowners or a grant recipient**

**For NM cost-sharing (SEG funds):**

- Notarize grant recipient signature

Retained by LCD as part of county records

**GENERAL INFORMATION**

NAME OF ENTITY OR INDIVIDUAL ENTERING INTO CONTRACT  
**Hawk Farms, LLC**

CHECK ALL THAT APPLY:

☐ Corporation, list president and secretary: \_\_\_\_\_

☐ Limited liability company, list manager or if none assigned, a member: \_\_\_\_\_

☐ Partnership, list authorized general partner(s): \_\_\_\_\_

☐ Limited partnership, list authorized general partner(s): \_\_\_\_\_

☐ Trust, list authorized trustee(s): \_\_\_\_\_

☐ Estate, list personal representative: \_\_\_\_\_

☐ Guardianship, list guardian: \_\_\_\_\_

☐ Power of Attorney, list designated attorney-in-fact: \_\_\_\_\_

Documentation to determine an individual's representative capacity may include a corporation's most recent annual report (stating officers), partnership or trust agreement, domiciliary letters for a personal representative, appointment letters for a guardian, or a power of attorney.

**VERIFICATION (Check the applicable box(es) below)**

☐ I verified that the entity (corporation, partnership, limited partnership, limited liability company, trust, or estate) listed above is in fact the landowner by obtaining a warranty deed or other documentation.

☐ I contacted the Wisconsin Department of Financial Institutions (DFI) and confirmed that the entity listed above (corporation, limited partnership and limited liability company) is registered with the state.

☐ For entities not registered at DFI (partnerships\*, trusts and estates), I have confirmed the following based on documents in my possession: 1) the legal existence of the entity listed above, and 2) the authority of the listed representative(s) to sign the cost-share contract on behalf of the entity, and 3) that the authority of the representative(s) will be in effect when the cost-share contract is signed.

☐ For individuals with legal representatives (guardians and powers of attorney), I have confirmed the following based on documents in my possession: 1) the authority of the listed representative(s) to sign the cost-share contract on behalf of the individual, and 2) that the authority of the representative(s) will be in effect when the cost-share contract is signed.

\*Note: If no partner has clear authority to be the sole signatory on behalf of a general partnership, all partners must sign.

SIGNATURE OF COUNTY REPRESENTATIVE \_\_\_\_\_ DATE: \_\_\_\_\_

**Use DATCP data sheet to verify documentation for authorized representative to sign contract**

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ADDRESS		CITY, STATE, ZIP CODE	
NAME OF AUTHORIZED REPRESENTATIVE			
<b>SECTION 1B. LANDOWNER and GRANT RECIPIENT INFORMATION</b>			
TOTAL DATCP COST-SHARE AMOUNT (refer to page 5) \$		NON-DATCP FUNDING BY SOURCE (refer to page 5) <input checked="" type="checkbox"/> County \$ <input type="checkbox"/> Other State Agency \$ <input type="checkbox"/> Federal \$ <input type="checkbox"/> Non-Profit or Other \$	
NAME OF LANDOWNER (Check the description that best applies: <input checked="" type="checkbox"/> Individual (Note: Spouse must be included) <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Trust, Estate or Partnership <input type="checkbox"/> Local Unit of Government			
ADDRESS			
CITY, STATE, ZIP CODE		TELEPHONE NUMBER	
LOCATION OF COST-SHARED PRACTICE(S) (Locate by providing parcel numbers(s) or coordinates below or attach required information as Exhibit B)			
Parcel Identification Number(s):			
Latitude and longitude (degrees and minutes):			
<small>Note: If this document will be recorded, attach a legal description of the location of the cost-shared practice(s) that meets the requirements of ss. 706.05(2m)(a) and 66.0217(1)(c), Wis. Stats.</small>			
NAME OF GRANT RECIPIENT, if different than above. NOTE: SPOUSE MUST BE INCLUDED			

Identify landowner by description that best applies

- Use parcel number for NM and other practices installed on fields
- Use latitude/longitude for practices that can located by point (e.g. manure storage)
- Attach description using 1/4, 1/4 section if contract is recorded

following items as long as the parties record the number of years of cost-sharing in the appropriate column in Section 3:

a. To install and maintain contour farming, cover and green manure crop, nutrient management, pest management, residue management, and strip-cropping (up to 4 years).

b. For land taken out of production for 10 years or other period specified in Section 3.

c. For erosion land taken out of production for 15 years or in perpetuity as specified in Section 3.

NAME OF AUTHORIZED REPRESENTATIVE <b>Kurt R. Calkins</b>	
<b>SECTION 1B. LANDOWNER and GRANT RECIPIENT INFORMATION</b>	
TOTAL DATCP COST-SHARE AMOUNT (refer to page 5) <b>\$4,984.00</b>	NON-DATCP FUNDING BY SOURCE (refer to page 5) <input type="checkbox"/> County \$ <input type="checkbox"/> Other State Agency \$ <input type="checkbox"/> Federal \$ <input type="checkbox"/> Non-Profit or Other \$
NAME OF LANDOWNER (Check the description that best applies: <input checked="" type="checkbox"/> Individual (Note: Spouse must be included) <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Trust, Estate or Partnership <input type="checkbox"/> Local Unit of Government	
NAME OF LANDOWNER <b>Pierre Juckem</b>	
ADDRESS <b>N355 Ethun Rd</b>	
CITY, STATE, ZIP CODE <b>WI 53960</b>	TELEPHONE NUMBER <b>608-837-6297</b>
LOCATION OF COST-SHARED PRACTICE(S) (Locate by providing parcel numbers(s) or coordinates below or attach required information as Exhibit B)	
<div style="border: 1px solid black; padding: 5px;"> <b>Exhibit B</b>            Nutrient Management CSA - BMP-06-2015            76355 Rd            Rio, WI 53960            Legal descriptions of properties covered under the Nutrient Management Plan            Located in Sections 3, 31 and 32, T20N-R11E, Town of Hampden, Columbia County, WI            Parcel numbers:            11016-627            11016-630            11016-623            11016-629            11016-603            11016-624 A            11016-624 A         </div>	
<small>31* of the cost-share contract more than one year for the item in Section 3: cost management, residue</small>	

- Attach description using 1/4, 1/4 section if contract is recorded

writing, any decision of the county land grantee is chligible for a hearing under  

se	Date	County	Date
als		Reps.	
		Initials	
		<b>JRC</b>	<b>2/20/2015</b>

## Section 2, Page 3, A (9)

8. To comply with (i) the performance standards, prohibitions, conservation practices
- Each page must be initialed by parties (landowner and spouse, grant recipient and spouse, county representative)**
- for compliance at least equal to the cost-sharing required under s. ATCP 50.06, Wis. Admin. Code. There is no requirement for continuing compliance for land that is taken out of production unless cost-sharing is provided.
9. To acknowledge receipt, where applicable, of a notice provided by the county explaining continuing compliance requirements arising out of the installation of specific cost-shared practices. (Initial here \_\_\_\_, \_\_\_\_, \_\_\_\_, \_\_\_\_.)
10. Not to discriminate against contractors because of age, race, religion, color, handicap, gender, physical condition, developmental disability, or national origin, in the performance of responsibilities under this contract.
11. To make any changes to this contract, including changes in project components and costs, according to the procedures set forth in Section 2.C.3.
12. To the county's right to stop work, or withhold cost-share grant funds, if it is found that the landowner, grant recipient, or construction contractor in their employ has violated ch. 92, Wis. Stats., ch. ATCP 50, Wis. Admin. Code, or has breached this contract.

WDC	12/25/13	RHC	12/25/13	GF	12/25/13	RF	12/25/13	SCD	1/5/14
Lender Initials	Date	Spouse Initials	Date	Grant Recipient Initials	Date	Spouse Initials	Date	County Rep. Initials	Date

**COST-SHARE CONTRACT NO. :**

---

**SECTION 3. PRACTICES, COST, COST SHARE AMOUNTS, AND INSTALLATION SCHEDULE**

The parties agree to the following related to the conservation practices, technical design and implementation, eligible costs, cost-share rates and amounts, and rate per acre herein.

Name of Person Preparing Technical Design:		Technical Standards Used in the Design: (LIST NAME AND DATE OF NRCS ENGINEERING OR OTHER STANDARDS EMPLOYED IN THE DESIGN)		USE OF THE 3 BOXES BELOW IS OPTIONAL.		
Representing: (GOVT OR PRIVATE BUSINESS) FSA#:		NRCS 590(12/15)		REPRESENTING:		DATE OF APPROVAL:
				AMOUNT OF COST-SHARE CONTRACT APPROVED: \$		

#	Cost-Shared Item Description <small>(see ATCP 50 d)(1), 50 e(1), 50 f(1) &amp; (2), &amp; 50 g(1) and (2))</small>	Yrs of CS**	Quantity (Use Standard Units)	Unit Cost or Flat Rate*	Estimated Total Cost \$	COST SHARE RATE			ESTIMATED COST SHARE AMOUNT		
						State %***	Federal %	County/other %	DATCP #	Federal \$	County/other \$
<input type="checkbox"/>	50.78 NM	4	200 acres	\$7/ac	\$5,600	100%				\$5,600	
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
					<b>TOTALS</b>						

\* Must check if the 50% maximum rate applies based on the installation of a practice after January 1, 2014 under one of these two conditions:  
 a. The practice is installed on land owned by a local government.  
 b. Cost-sharing is provided for erosion control (ATCP 50 d)(1), seed/rail system (ATCP 50 h)(1), streambank or shoreline protection (ATCP 50 i)(1), stream crossing (s. ATCP 50 j)(1)), or wetland development or restoration (ATCP 50 k)(1) and the practice does not implement a farm performance standard.

\*\* Enter the number of years the practice is cost-shared only if the contract provides for (x) more than farming, cover and green manure crop, nutrient management, pest management, residue management more than one year, or (y) CRP equivalent payments for riparian land taken out of production. For contracts entered before the practice is certified, and has a contractual obligation to maintain the practice continuously for at least five years, enter "5".

\*\*\* Enter the percentage of total project cost share provided by the State, Federal Government, County, or other entity providing cost share.

contingency procedures, consistent with ch. ATCP 50, Wis. Admin. Code, when estimating and paying for cost-shared practice(s).

Consider adding contingency clause

5. The county may provide up to \$12 per acre (\$3 per acre for four years) as additional cost-sharing if the landowner consents to a change order to increase the cost-share amount and agrees to comply with the 2015 NRCS 590 standard. The county will make a good faith effort to secure the funds necessary to increase the cost-share payment; however, the county is not obligated to fulfill this commitment if the revision of ATCP 50.42(2)(g) does not become effective or the county cannot secure additional cost-share funds.

- its DATCP annual allocation or the county fails to obtain DATCP approval required under 2.C.2.
- Written approval from DATCP shall be obtained before this contract is executed or amended if the DATCP cost-share amount exceeds \$50,000, and such approval shall be attached to, and made part of, this contract.
  - This contract may be amended, by mutual written agreement of the parties, during the installation or maintenance periods, if the proposed changes will provide equal or greater control of water pollution. For any changes in practice components or costs, the county will determine eligibility and whether to approve such changes. Counties must use a "Cost-Share Contract Change Order" form (ARM-LR-166) for changes prior to or during the installation and maintenance periods. Except as otherwise provided in the "Change Order" form, any completed "Change Order" form must be attached to, and made part of, this contract. Changes to this contract that increase the DATCP cost-share amount over \$14,000 or \$50,000 are subject to requirements in Sections 2.A.7., regarding recording and 2.C.2., regarding DATCP approval, respectively.
  - ~~This contract is void if, prior to installation, the county determines that due to a material change in circumstances the proposed practices will not provide cost-effective water quality benefits.~~

Practice	Date	Source	Date	Grant	Date	Source	Date	County	Date

Practice code to use in cost-share documents

Type of funding required to cost-share practice

Barnyard runoff control systems (specify components including heavy use area protection)	50.64	Bond	Number
Access road			
	50.70	Bond	Linear Ft.
	50.71	Bond	Linear Ft.
Filter strips	50.72	Bond	Acres
Feed storage runoff control systems	50.705	Bond	Number
Grade stabilization structures	50.73	Bond	Number
Livestock fencing	50.75	Bond	Linear Ft.
Livestock watering facilities	50.76	Bond	Number
Milking center waste control systems	50.77	Bond	Number
Nutrient management for cropland or pasture	50.78	SEG <sup>1</sup>	Acres

<sup>1</sup> While DATCP awards SEG funds primarily to cost-share nutrient management plans, a county may use a limited portion of the its award (cumulative expenditures may not exceed 25 percent of a county's annual cost-share allocation unless otherwise allowed in the allocation plan for that year) if the following conditions are met:

- The landowner agrees to remain in compliance with the soil erosion control standard (NR 151.02) and the nutrient management standard (NR 151.08) for as long as the land is farmed;
- The landowner submits a nutrient management plan checklist covering the cropland where the soft practice is installed; and
- The county documents that cover crop or other cost-shared "soft" practice is required to meet "T" or other requirement of the NRCS 590 standard, and is the most cost-effective approach to meeting the NRCS 590 requirement.

Unit of measure to use in cost-share documents

2.2 - 1



- Documents new and deleted practices, and project modifications (e.g. cost overruns)
- Tracks cumulative costs and units for each practice
- County certifies that landowner has consented and received copy of notice

- Documents new and deleted practices, and project modifications (e.g. cost overruns)
  - Tracks cumulative costs and units for each practice
  - County certifies that landowner has consented and received copy of notice
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The collage consists of three overlapping documents:

- Top Document: Cost-Share Contract Change**
  - Header: AGRICULTURE, TRADE & CONSUMER PROTECTION DIVISION
  - Address: Madison WI 53708-8911
  - Phone: (608) 224-4648 or (608) 224-4649
  - Form Title: Cost-Share Contract Change
  - Fields: CONTRACT NO., DATE, AMOUNT, COUNTY NAME (BUFFALO), LANDOWNER'S SIGNATURE (LONNIE D. ...), DATE (7-15-15).
- Middle Document: Nutrient Management Contract**
  - Form Title: NUTRIENT MANAGEMENT CONTRACT
  - Table with columns: PRACTICE, UNIT, COST PER UNIT, TOTAL COST, AMOUNT, DATE.
  - Table Content:
 

PRACTICE	UNIT	COST PER UNIT	TOTAL COST	AMOUNT	DATE
1. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
2. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
3. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
4. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
5. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
6. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
7. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
8. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
9. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
10. Nutrient Management Plan	1	\$1,000.00	\$1,000.00		
- Bottom Document: Landowner/Grant Recipient Consent**
  - Form Title: LANDOWNER/GRAZING RECIPIENT CONSENT
  - Section 1: Check if the grantee has documentation of the landowner/grantee's consent to the change(s) described herein.
    - ☒ 1. The landowner/grantee has documentation of the landowner/grantee's consent to the change(s) described herein.
    - ☐ 2. The landowner/grantee has documentation of the landowner/grantee's consent to the change(s) described herein.
  - Section 2: For a change that increases project costs by more than \$500, the landowner/grantee must sign this form to give consent if any of the following apply (check all that apply).
    - ☒ For a change that increases project costs by more than \$500.
    - ☒ To acknowledge that the landowner will maintain compliance responsibility, after the maintenance.
    - ☒ To obtain consent to use the following maintenance practices as part of the cost-share contract.
  - Section 3: By signing below, I (we) consent to the change(s) described herein and acknowledge that these changes may be cost-shared only in part, and further acknowledge that the cost-share contract number listed above, the standard listed in ch. ATCP 50 (1st).
  - Signatures: Landowner/Grant Recipient (Lonnie D. ...), Date (7-15-15).







## Submit reimbursement requests electronically

The image shows a stack of three documents. The top document is a NRCS form, likely a Reimbursement Request Form. The middle document is a Reimbursement Request Form with various fields for project details, costs, and signatures. The bottom document is a cost-share contract, showing sections for project description, cost breakdown, and signatures of the parties involved.

- Complete and convert to PDFs
- Organize submission with reimbursement request form first, certification documentation next, cost-share contract last

Send to  
**datcpswrm@wisconsin.gov**

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## Recording

The image shows a recording document from Joseph G. Boll, Lafayette County, WI Register of Deeds. It includes a barcode, the recording date (12/14/2012 08:55 AM), and the recording fee (\$30.00). The document is titled "RE CONTRACT" and mentions "Sec. 92.14, Wis. Stats." It also includes a "Recording Area" section with the address "Lafayette County, WI 53530" and a "Parcel Identification Number" of "016.0365.0000". The document is signed by "Shelia Carnek" on "2-1-2012".

- Required if DATCP cost-sharing exceeds \$14,000 for bondable practices
  - Applies to change orders cost increases
- Record before making any cost-share payment
- May use DATCP funds to pay recording cost
  - Include cost in the total project cost


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## Partial payments



- Can only pay for stand alone practice with independent WQ benefits
- Cannot make partial payments for more than 90% of the total cost-share
- Cannot pay part of NM costs
  - Soil tests
  - Less than four years (Pay four years upfront)

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2811 Agriculture Drive, PO Box 8911  
Madison WI 53708-8911  
Phone: (608) 224-4648 or (608) 224-4610

**DATCP Received:**

Use to certify practices and request partial or final reimbursements. Provide DATCP electronic copies of cost-share contracts, addenda, NM checklists (Appendix C), calculation sheets and other required documentation

Select type of payment

GENERAL INFORMATION						
COUNTY	<input checked="" type="checkbox"/> <b>FINAL PAYMENT</b> [check only if all practice components of this project have been properly installed]  <input type="checkbox"/> <b>PARTIAL PAYMENT</b> [check only if installed practice components provide independent conservation benefits see ACTP 50.40(12)]					
COST SHARE CONTRACT #						
LANDOWNER NAME						
<div style="background-color: #0056b3; color: white; padding: 5px; display: inline-block; border-radius: 5px;">Select practice location</div>	<b>CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT</b> <input type="checkbox"/> Land owned by a local governmental unit, as defined by ATCP 50.01(17), subject to 50% cap in ATCP 50.42(1)(dr) <input type="checkbox"/> Farm land <input checked="" type="checkbox"/> Other					

Update feet to

COST-SHARED PRACTICE DESCRIPTION <small>(Practices should be listed exactly as shown on cost-share contract with appropriate reference to ATCP 50 provision)</small>	NR 151 Code #	WATER-SHED CODE <small>(Refer to WS Code table)</small>	ORIGINAL DATCP COST-SHARE AMOUNT	CHANGE ORDER AMOUNT(S) <small>(enter + or -)</small>	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP	COST-SHARE PAYMENT FROM DATCP <sup>99</sup>
50.88 Streambank Prot.	08	BR12	3,000	500		3500
30 feet	00					
	00					



LANDOWNER NAME		CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT				
GRANT RECIPIENT NAME (Only if different than landowner)		<input type="checkbox"/> Land owned by a local governmental unit, as defined by ATCP 50.01(17), subject to 50% cap in ATCP 50.42(1)(dr) <input type="checkbox"/> Farm land <input type="checkbox"/> Other				
COST-SHARED PRACTICE DESCRIPTION (Practices should be listed exactly as shown on cost-share contract with appropriate reference to ATCP 50 provision)	NR 151 Code #	WATER-SHED CODE (Refer to WS Code table)	ORIGINAL DATCP COST-SHARE AMOUNT	CHANGE ORDER AMOUNT(S) (enter + or -)	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP	COST-SHARE PAYMENT FROM DATCP <sup>##</sup>
50.88 Streambank	00	BR12	1,000	2,000	1,000	2,000
	00					

50% cost-sharing for these practices if no NR 151 code:

- Access roads (50.65)
- Roof runoff systems (50.85)
- Streambank and shoreline protection (50.88)
- Stream crossing (50.885)
- Wetlands (50.98)

COMPETE CERTIFICATIONS AND VERIFICATION ON SECOND PAGE  
Personal information you provide may be used for purposes other than that for which it was originally collected (sec. 15.04(1) (m), Wis. Stats.).

GRANT RECIPIENT NAME (Only if different than landowner)		CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT				
		<input type="checkbox"/> Land owned by a local governmental unit, as defined by ATCP 50.01(17), subject to 50% cap in ATCP 50.42(1)(dr) <input checked="" type="checkbox"/> Farm land <input type="checkbox"/> Other				
COST-SHARED PRACTICE DESCRIPTION (Practices should be listed exactly as shown on cost-share contract with appropriate reference to ATCP 50 provision)	NR 151 Code #	WATER-SHED CODE (Refer to WS Code table)	ORIGINAL DATCP COST-SHARE AMOUNT	CHANGE ORDER AMOUNT(S) (enter + or -)	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP	COST-SHARE PAYMENT FROM DATCP <sup>##</sup>
50.88 Streambank	08	BR12	1,000	2,000	1,000	2,000
	00					

70% cost-sharing for these practices if farmland and NR 151 code provided:

- Access roads (50.65)
- Roof runoff systems (50.85)
- Streambank and shoreline protection (50.88)
- Stream crossing (50.885)
- Wetlands (50.98)

COMPETE CERTIFICATIONS AND VERIFICATION ON SECOND PAGE  
Personal information you provide may be used for purposes other than that for which it was originally collected (sec. 15.04(1) (m), Wis. Stats.).



<b>Practice</b>	<b>NR 151 Code Options</b>
Critical Area Stabilization (\$0.69)	02
Riparian Buffer (\$0.83)	08

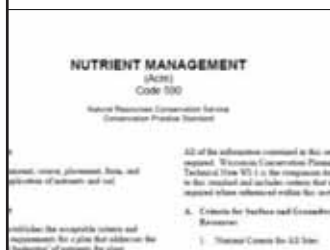
## Section 5: Nutrient Management Projects

### Documents Discussed in this Section:

- Nutrient Management Checklist Plan
- Guidelines for Notice of Compliance Requirements

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### Transition in NRCS 590 standard



- 2017 NM cost-sharing at \$28/acre to meet 2005 standard
  - Option to increase 2017 contracts by \$12/acre after ATCP 50 revised
- 2018 NM cost-sharing at \$40/acre to meet 2015 standard
  - Extended 2017 contracts must be upgraded to 2015 standard



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## Pastures and NM plan cost-sharing



- Farmers receiving DATCP cost-sharing for NMPs must include pastures:
  - Stocked at an average animal unit density greater than one,
  - Receiving mechanically-applied manure or fertilizers

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## Sign separate contracts

- Identify all landowners who have land covered by the NM plan
- Sign a separate contract with each landowner
  - Operator must sign Exhibit A1 for each contract

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## Cost-sharing for fewer acres



- Use to effectively manage funds
- Develop a NM plan that covers all acres if possible
- Use future funds to cost-share remaining acres
  - Do not make commitments that cannot be honored

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## Cost-sharing and continuing compliance



- No cost-sharing unless continuing compliance secured
- All landowners must maintain NM compliance for as long as the land is farmed
  - Not just for the four years of the contract

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## Securing continuing compliance

- Discuss with operator and landowner
- Record operator and landowner acknowledgement on contract
- Provide separate notice if maximum flat rate

2. To make all payments for which the landowner/grant recipient (hereinafter referred to as "landowner") is obligated under this contract, as specified in Section 3.
3. To provide the county with evidence of payment, as applicable, for services, supplies, and practices performed or installed pursuant to this contract. Proof of payment may be in the form of a statement or invoice, or receipts or cancelled checks with the related vendor contract. For services provided by the landowner, the landowner shall submit a detailed invoice or cost-estimate for those services.
4. To maintain the cost-shared practice for at least 10 years from the date of installation, except for these "so practices: contour farming, cover and green manure crop, nutrient management, pest management, residue management, and strip-cropping. Soft practices must be maintained for each year cost-share funds are provided, as specified in Section 3. Extended maintenance periods apply if land is taken out of production more than 10 years, as specified in Section 3.
5. To operate and maintain each cost-shared practice for the required maintenance period following the certification of installation or replace it with an equally effective practice. To refrain, during the maintenance period, from actions that may reduce a practice's effectiveness, or result in water quality problems. Where appropriate, the landowner agrees to follow an operation and maintenance plan. All nutrient management plans must comply with s. ATCP 50.04(3), Wis. Admin. Code.
6. To repay cost-share funds immediately, upon demand by the county, if the landowner fails to operate and maintain the cost-shared practice according to the contract. Repayment of grant funds shall not be required if a practice(s) is rendered ineffective during the required maintenance period due to circumstances beyond the control of the landowner.
7. To the recording of this contract, including the legal description of the subject property, with the deed to the subject property, if the cost-share contract amount is greater than \$14,000. This contract shall be recorded before the county makes any cost-share payment to the landowner. Upon recording, this contract constitutes a covenant running with the land described in Section 1B, and is binding on subsequent owners, heirs, executors, administrators, successors, trustees, and assigns, and users of the land for the period set forth in Section 3.
8. To comply with (i) the performance standards, prohibitions, conservation practices and technical standards under s. 281.16, Stats., (ii) plans approved under ss. 92.14, 92.15 (1985 Stats.), 92.10 and 281.65, Stats., and (iii) the practices necessary to meet the requirements of this contract, and to continue such compliance after the term of this contract, without further cost-sharing, if the landowner has received cost-sharing for compliance at least equal to the cost-sharing required under s. ATCP 50.08, Wis. Admin. Code. There is no requirement for continuing compliance for land that is taken out of production unless cost-sharing is provided.
9. To acknowledge receipt, where applicable, of a notice provided by the county explaining continuing compliance requirements arising out of the installation of specific cost-shared practices. (Initial here \_\_\_\_\_)
10. Not to discriminate against contractors because of age, race, religion, color, handicap, gender, physical condition, developmental disability, or national origin, in the performance of responsibilities under this contract.
11. To make any changes to this contract, including changes in project components and costs, according to the procedures set forth in Section 2.C.3.
12. To the county's right to stop work, or withhold cost-share grant funds, if it is found that the landowner, grant recipient, or construction contractor in their employ has violated ch. 92, Wis. Stats., ch. ATCP 50, Wis. Admin. Code, or has breached this contract.

## Separate continuing compliance notice

### GUIDELINES FOR NOTICE OF COMPLIANCE REQUIREMENTS



**DANE COUNTY**  
Land and Water Resources Department  
Kevin Connors  
Director

#### GRANT COUNTY LAND & WATER CONSERVATION COMMITTEE

#### NOTICE of COMPLIANCE with CHAPTER NR 151 of the WISCONSIN ADMINISTRATIVE CODE

The purpose of this Notice of Compliance is to inform and explain to the landowner and/or the grant recipient of legal obligations in conjunction with the acceptance of cost share monies and to certify that the landowner/grant recipient acknowledges the existence and accepts the legal responsibility of fulfilling these continuing obligations.

I (We) have received in cost share assistance (see table) from the Grant County Land & Water Conservation Department for the installation of . This conservation practice was installed in . The installation of this conservation practice has enabled the previously described land to comply with certain aspects of Subchapter II of NR 151. The agricultural performance standard(s) with which the described lands are now in compliance with are NR 151.

Wisconsin Administrative Code Section NR 151.09(3)(b) requires that once a landowner complies with a cropland performance standard, said compliance shall continue to be met by the existing landowner or operator, heirs or subsequent owners or operators of the cropland regardless of whether cost sharing is made available. Wisconsin Administrative Code Section NR 151.09(4)(b) requires that once a livestock facility meets a livestock performance standard or prohibition, the livestock performance standard or prohibition must continue to be met by the existing owner or operator, heirs or subsequent owners or operators of the facility regardless of cost share availability.

#### ACKNOWLEDGEMENT AND ACCEPTANCE:

I (We) do hereby acknowledge, accept and agree to comply with all the terms set forth in this notice, as well as the following:

1. This Notification of Compliance and its ongoing legal obligations.
2. That by installing on the above described lands has enabled this land to be in compliance with NR 151.
3. That this compliance must be maintained by me (us) and all subsequent heirs, owners and operators, regardless of the offer of cost sharing.
4. That I (we) must also abide by all aspects of the cost share agreement.
5. That I (we) will not receive any cost share money until all aspects of the cost share agreement are fulfilled and I (we) have signed this Notice of Compliance

- Use DATCP guidelines and other county notices to develop customized notice

**New**

- Ensure that responsibility continues even if NRCS 590 changes
- Must provide DATCP a signed copy of notice when farm cost-shared at less maximum flat rate

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COST-SHARE CONTRACT NO.:

**SECTION 3. PRACTICES, COST, COST-SHARE AMOUNTS, AND INSTALLATION SCHEDULE** PA

The parties agree to the following related to the conservation practices, technical design and specifications, eligible costs, cost-share rates and amounts, and time set forth below:

Name of Person Preparing Technical Design:		Technical Standards Used in the Design: (LIST NAME AND DATE OF NRCS, DNR, OR OTHER STANDARDS EMPLOYED IN THE DESIGN)		USE OF THE 3 BOXES BELOW IS OPTIONAL	
Representing: (COUNTY OR PRIVATE ENGINEERING FIRM)				REPRESENTING:	DATE OF APPROVAL:
				AMOUNT OF COST-SHARE CONTRACT APPROVED: \$	

*	Cost-Shared Item Description (i.e. ATCP 50-62 to 50-98, 50-40 (15) & (18), & 50-88 (2) and (4))	Yrs of CS**	Quantity (Use Standard Units)	Unit Cost or Flat Rate \$	Estimated Total Cost \$	COST-SHARE RATE			ESTIMATED COST-SHARE	
						State %***	Grantee %	County/other %	DATCP \$	Grantee \$
<input checked="" type="checkbox"/>	50.78 Nutrient Management	4	500 acres	\$7/acre	\$14000	100%			\$14000	
<input type="checkbox"/>										
<input type="checkbox"/>										
<b>TOTALS</b>										

Installation of a  
new  
soil nutrient system  
50-88, minimum  
50-98) and the practice does not implement a farm performance standard.

\*\* Enter the number of years the practice is cost-shared only if the contract provides for (i) more than one year of cost-sharing for soil practices (conservation tillage, cover and green manure crop, nutrient management, pest management, residue management, and strip-cropping), (ii) land taken out of production for more than one year, or (iii) CREP equivalent payments for riparian land taken out of production. For "soil practice" payments, the landowner receives the full contract amount after the practice is certified, and has a contractual obligation to maintain the practice for the number of years cost-shared. For "land out of production" payments under ATCP 50-101(2)(c), the landowner receives the sum of the landowner's annual cost for the period specified in the contract. A landowner's annual cost equals the number of affected acres multiplied by the per-acre weighted average soil rental rate in the county on the date of the cost-share contract. For CREP equivalent payments authorized under ATCP 50-101(4), the landowner receives an amount equal to the amount that would be offered under the CREP program if the affected lands were enrolled in that program. To receive a CREP equivalent payment, a landowner must keep riparian land out of production for 15 years, or as appropriate, and must agree to contract terms similar to those imposed by the CREP program. Insert "P" if the land is taken out

ENTER DATCP COST-SHARE AMOUNT ON

List years annual practice cost-shared (must be 4 years)

Use flat rate

100% when using flat rate

## Documenting and tracking more than two changes to a NM practice



- Sign NM cost-share contract for 100 acre at @ 28 per acre
  - #1 change: Add 100 acre @ 28 per acre
  - #2 change: Reduce 50 acres @ 28 per acre
  - #3 change: Increase rate by \$12 per acre for 150 acres previously cost-shared (2015 NRCS standard)

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APM-LWR-166 (Rev. Feb. 2017)

Wisconsin Department of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division

## Change # 3, Step 1

### Check box to indicate combined totals

**Cost-Share Contract Change Order** (Section F2.14, Wis. Stats.; s. ATCP 50.40, Wis. Admin. Code)

Use this form to document each change order, which becomes part of the cost-share contract listed below. This also should be used to track cumulative changes made in cost-sharing and the units cost-shared. If more than two change orders are prepared, combine prior change orders and enter the numbers under columns F and G, and then complete columns H and I to reflect the most current change order. If the amount in column I exceeds \$14,000, s. ATCP 50.40 (14) requires that the cost-share contract and this form be reviewed. If the amount in column I exceeds \$50,000, s. ATCP 50.40(3) requires DATCP's written approval of the project.

☒ Check the box to indicate that there are more than two prior change orders and enter the combined totals for them in columns F and G.

COUNTY		COST-SHARE CONTRACT NUMBER		LANDOWNER'S NAME				COST-SHARE RECIPIENT'S NAME			
CENTURY		LWRM 08 2017		R. Landowner				G. Steward			
A	B	C	D	E	F	G	H	I	J	K	
Practice Name and Code	Unit of Measurement	Practice Status (Modified, Deleted, New)	Original DATCP Cost-Share Amount	Original Quantity in Units	1st Change Order Change in DATCP Cost-Sharing	1st Change Order Change in Units	2nd Change Order Change in DATCP Cost-Sharing	2nd Change Order Change in Units	Adjusted Cost-Sharing (original + changes)	Adjusted Unit Amount (original + changes)	
NO. 18 Nutrient Management (2005 NRCS Standard)	Acres	Modified	\$ 2,800.00	100.00	\$ 1,400.00	50.00			\$ 4,200.00	150.00	
	AWA								\$ -	0.00	
	AWA								\$ -	0.00	
	AWA								\$ -	0.00	
	AWA								\$ -	0.00	
<b>Total Adjustments to Cost-Sharing:</b>									\$	4,200.00	

By electronically signing and dating this form, the county, through its authorized representative, certifies that the information provided in this form is a complete and accurate record of changes to the above-referenced cost-share contract, that each landowner or cost-share recipient who signed the cost-share contract has consented to the changes documented on this form, and that each landowner or cost-share recipient has received a copy of this form documenting the changes in cost-sharing and units installed. The county further agrees to retain this and other records required under s. ATCP 50.34 (7), and provide DATCP electronic copies of these records if requested.

NAME OF COUNTY REPRESENTATIVE: County Representative  
TITLE OF COUNTY REPRESENTATIVE: County Conservationist  
DATE: 10/10/2017

Personal information you provide may be used for purposes other than that for which it was originally collected, see: 19.34 (1)(b), WIS. Stats.

## Change # 3, Step 1

☐ Check the box to indicate that there are more than two prior change orders and enter the combined totals

COUNTY		COST-SHARE CONTRACT NUMBER		LANDOWNER'S NAME				COST-SHARE RECIPIENT'S NAME			
CENTURY		LWRM 08 2017		R. Landowner				G. Steward			
A	B	C	D	E	F	G	H	I	J	K	
Practice Name and Code	Unit of Measurement	Practice Status (Modified, Deleted, New)	Original DATCP Cost-Share Amount	Original Quantity in Units	1st Change Order Change in DATCP Cost-Sharing	1st Change Order Change in Units	2nd Change Order Change in DATCP Cost-Sharing	2nd Change Order Change in Units	Adjusted Cost-Sharing (original + changes)	Adjusted Unit Amount (original + changes)	
NO. 18 Nutrient Management (2005 NRCS Standard)	Acres	Modified	\$ 2,800.00	100.00	\$ 1,400.00	50.00			\$ 4,200.00	150.00	
	AWA								\$ -	0.00	
	AWA								\$ -	0.00	
	AWA								\$ -	0.00	
	AWA								\$ -	0.00	

Combined changes are correctly entered if the adjusted totals match adjusted totals in the prior change order

By electronically signing and dating this form, the county, through its authorized representative, certifies that the information provided in this form is a complete and accurate record of changes to the above-referenced cost-share contract, that each landowner or cost-share recipient who signed the cost-share contract has consented to the changes documented on this form, and that each landowner or cost-share recipient has received a copy of this form documenting the changes in cost-sharing and units installed. The county further agrees to retain this and other records required under s. ATCP 50.34 (7), and provide DATCP electronic copies of these records if requested.

NAME OF COUNTY REPRESENTATIVE: County Representative  
TITLE OF COUNTY REPRESENTATIVE: County Conservationist  
DATE: 10/10/2017

Personal information you provide may be used for purposes other than that for which it was originally collected, see: 19.34 (1)(b), WIS. Stats.

ARM-LWR-106 (Rev. Feb. 2017)

Wisconsin Department of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division  
Soil and Water Resource Management Program (SWRMP)  
PO Box 8911  
Madison, WI 53708-8911

**Change # 3,  
Step 2**

**Cost-Share Contract Change Order**

Use this form to document each change order, which becomes part of the cost-share contract listed below. This also should be used to track cumulative changes in sharing and the units cost-shared. If more than two changes orders are prepared, combine prior changes orders and enter the numbers under columns F and G, and complete columns H and I to reflect the most current change order. If the amount in column J exceeds \$14,000, s. ATCP 50.40 (14) requires that the cost-share contract be recorded. If the amount in column J exceeds \$50,000, s. ATCP 50.40(5) requires DATCP's written approval of the project.

Check the box to indicate that:

COUNTY: CENTURY

COST-SHARE NAME: G. Steward

A	B	C	D	E	F	G	H	I	J
Practice Name and Code	Unit of Measurement	Practice Status (Modified, Deleted, New)	Original DATCP Cost-Share Amount	Original Quantity in Units	1st Change Order Change in DATCP Cost-Share	1st Change Order Change in Units	2nd Change Order Change in DATCP Cost-Share	2nd Change Order Change in Units	Adjusted Cost-Share (original + changes)
50.78 Nutrient Management (2015 NRCS Standard)	Acres	Modified	\$ 2,800.00	100.00	\$ 1,400.00	50.00	\$1,800.00	0.00	\$ 8,000.00
	#REA								\$ -
	#REA								\$ -
	#REA								\$ -
Total Adjustments to Cost-Sharing									\$ -

By electronically signing and dating this form, the county, through its authorized representative, certifies that the information provided in this form is a complete and correct record of changes to the above-referenced cost-share contract, that each landowner or cost-share recipient who signed the cost-share contract has been notified of the changes, and that each landowner or cost-share recipient has received a copy of this form documenting the changes to the contract.

**Annotations:**

- Increase the cost-sharing by \$12/acre multiplied by 150 acres
- Select the pull down that shows the 2015 standard
- Insert a zero since the units remain at 150 acres

ARM-LWR-112 (Rev. July 2014)

Wisconsin Dept. of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division  
2811 Agriculture Drive, PO Box 8911  
Madison WI 53708-8911  
Phone: (608) 224-4648 or (608) 224-4610

**Soil and Water Resource Management Program**

**DATCP Received:**

Use to certify practices and request partial or final reimbursements. Provide DATCP electronic copies of cost-share contracts, addenda, NM checklists (Appendix C).

**Certification and Cost-Share Reimbursement Request Form**

Section 92.14, Wis. Stats.

**GENERAL INFORMATION**

COUNTY: \_\_\_\_\_

COST SHARE CONTRACT #: \_\_\_\_\_

LANDOWNER NAME: William Hawk

GRANT RECIPIENT NAME (Only if different from landowner): A.B. Farmer (Operator)

COST-SHARED PRACTICE DESCRIPTION: (Practices should be listed exactly as shown on cost-share contracts; appropriate reference to ATCP 50 provision)

**NUTRIENT MANAGEMENT PLAN CHECKLIST**

For Wisconsin's NRCS 590 (September 2005) Nutrient Management Standard Requirements

County name: \_\_\_\_\_ Date Plan Submitted: \_\_\_\_\_ Growing season year NM plan is written for: \_\_\_\_\_  
Township (T., N., S.) - (R., E., W.): \_\_\_\_\_ Initial Plan or Updated Plan (circle one) \_\_\_\_\_ (from harvest to harvest)

Name of qualified nutrient management planner: **N.M. Planner**

Planner's business name, address, phone: \_\_\_\_\_

Circle the planner's qualification:  
1. NAIC-CPCC  
2. ASA-CCA  
3. ASA-Professional Agronomist  
4. SSSA-Soil Scientist  
5. DATCP approved training course  
6. Other credentials approved by DATCP

Cropand Acres (owned & rented): **550**

Name of farmer receiving nutrient management plan: \_\_\_\_\_

Circle relevant program requirement or regulation the plan was developed for: Ordinance, USDA, DATCP, DNR, NR 243 - NOD or NPDES

**1. Are the following field features identified on maps or aerial photos in the plan?**

a. Field location, soil survey map unit(s), field boundary, and field identification number

b. Areas prohibited from receiving nutrient applications: Surface water, established concentrated flow

**Bundle all NM reimbursement requests with the applicable checklist**

COST-SHARE CONTRACT NO.: NMP-08-2016

**SOIL AND WATER RESOURCE  
MANAGEMENT GRANT PROGRAM**  
Sec. 92.14, Wis. Stats

ARM-LWR-112 (Rev. July 2014)

Wisconsin Dept. of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division  
2811 Agriculture Drive, PO Box 8911  
Madison WI 53708-8911  
Phone: (608) 224-4648 or (608) 224-4610

**Certification and Cost-Share  
Reimbursement Request Form**  
Section 92.14, Wis. Stats.

**Attach correct checklist for  
2015 standard if higher  
payments provided**

**GENERAL INFORMATION**

COUNTY: \_\_\_\_\_

COST SH: \_\_\_\_\_

LANDOWN: \_\_\_\_\_

GRANT F  
landowner:  
A.B.

CO: \_\_\_\_\_

(Practices sho

**Nutrient Management Checklist** Sec. 92.05(3)(k), Wis. Stats. ATP 50.04(3) & 51 Wis. Admin. Codes

Use this form to check nutrient management (NM) plans for compliance with the WI NRCS 2015-590 Standard.

COUNTY: \_\_\_\_\_ DATE PLAN SUBMITTED: \_\_\_\_\_ GROWING SEASON YEAR PLAN IS WRITTEN FOR: \_\_\_\_\_ (from harvest to harvest)

TOWNSHIP: (T. N.) RANGE: (R. E., W.) CHECK ONE: ☐ Initial Plan or ☐ Updated Plan

NAME OF FARM OPERATOR RECEIVING NUTRIENT MANAGEMENT PLAN: N.M. Planner BUSINESS PHONE: ( ) -

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

RELEVANT REASON THE PLAN WAS DEVELOPED: ☐ Ordinance ☐ NR 243 WPDES or NOD ☐ DATCP-FP or cost share (cs) ☐ DNR-cs ☐ USDA-cs ☐ Other

CROPLAND ACRES (OWNED & RENTED): 550

RENTED FARM(S) LANDOWNER NAME(S) AND ACREAGE: add sheet(s) if required

components listed on the reverse side have been installed according to applicable standards and specifications (check one)

**Check to indicate  
submission of  
complete checklist**

the page/sheet if a large size drawing) of the "as-built" plan or other professional acting within the scope of the

WI-001) properly completed by persons with a conservation the design of the practice and certify that the practice was

**DECOMMISSIONING ONLY**

☐ The county has a plan for decommissioning a well (check if applicable).

☐ The county has attached a copy of the appropriate DNR form completed by a well driller or pump installer registered under s. 280.15, Stats. for new well construction, or filling and sealing wells (required).

**FOR NUTRIENT MANAGEMENT PLANNING**

For all nutrient management plans directly funded with cost-share dollars or required as part of another cost-shared practice, the county submits a current checklist certifying that the nutrient management plan complies with NRCS technical guide nutrient management standard 590, and the checklist is signed by a qualified nutrient management planner as defined in s. ATP 50.48. (check and attach):

☒ A copy of the nutrient management plan checklist (ATCP 50, Appendix C)

**FOR NON-ENGINEERING PRACTICES** SIGNATURE OF PERSON CERTIFYING

The person signing this section of the non-engineering practice(s) was installed standards. Qualifying practices green manure crop, contour farm grazing management, critical area livestock fencing, or riparian bu

**No need to identify  
planner or sign as a  
county representative**

**COUNTY CERTIFICATION AND VERIFICATION**

By signing this form, the county through its authorized representative:

a. Certifies that each of the practices listed on this form was installed on or before December 31st of the grant year.

b. Certifies that it is in possession of statements, invoices, canceled checks with vendor contract, or written receipts with vendor contract for all supplies and services provided by contractors for this project. For landowner installation and maintenance services, it has invoices and cost-estimates.



## Annual NM maintenance requirements based on NRCS 590



- Require annual updates of NM checklist
- Verify NRCS 590 compliance from updated checklist
- Submit updated checklists to Sue Porter at DATCP

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## Section 6: Engineered Project Examples

### Forms Discussed in this Section:

- DATCP over \$50,000 Approval Form
- NRCS Construction Coversheet
- Change Orders
- Reimbursement Request (Partial Payment)

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## Manure Storage Example



- Original contract for \$49,000 in DATCP funds
- Change orders for cost overruns and new practices
- DATCP \$50,000 approval for project
- Seek a \$1,400 transfer
- Extension to complete project
- Partial and full payment requests

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## Manure storage cost-sharing eligibility



- Fund storage only if needed to accomplish nutrient management
- Cannot cost-share
  - If nutrient management plan alone can resolve water quality problems
  - For expansion of facility

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## Select cost-share approach for problem



- SWRM: Lower cost projects that address LWRM priorities but may combine with other funding (e.g. EQIP) for higher cost projects
- TRM: More costly projects up to \$150,000 to address high priority resource problems
- NOD/NOI: Projects that resolve feedlot and other discharges

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## Cultural resource assessments for cost-shared projects



- Required for all projects that disturb ground
  - Storage but not NM plans
- Start by completing form for NRCS review
- Detailed process in <http://datcp.wi.gov/uploads/Environment/pdf/InterimCulturalResourcesProcedure.pdf>



This is how the Change Order Form should look to reflect the \$3,500 increase

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ARM-LWR-106 (Rev. Feb. 2017)

Wisconsin Department of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division  
Soil and Water Resource Management Program (SWRMP)  
PO Box 8911  
Madison, WI 53708-8911

**Cost-Share Contract Change Order** (Section 92.14, Wis. Stat.; s. ATCP 92.42, Wis. Admin. Code)

Use this form to document each change order, which becomes part of the cost-share contract listed below. This also should be used to track cumulative changes made in cost-sharing and the units cost-shared. If more than two changes orders are prepared, combine prior changes orders and enter the numbers under columns F and G, and then complete columns H and I to reflect the most current change order. If the amount in column J exceeds \$14,000, s. ATCP 92.42 (34) requires that the cost-share contract and this form be recorded. If the amount in column J exceeds \$50,000, s. ATCP 92.42(3) requires DATCP's written approval of the project.

☐ Check the box to indicate that there are more than two prior changes orders and enter the combined totals for them in columns F and G.

COUNTY		COST-SHARE CONTRACT NUMBER		LANDOWNER'S NAME				COST-SHARE RECIPIENT'S NAME		
CENTURY	CONTRACT NUMBER	R. Landowner								
A	B	C	D	E	F	G	H	I	J	K
Practice Name and Code	Unit of Measurement	Practice Status (Modified, Deleted, New)	Original DATCP Cost-Share Amount	Original Quantity in Units	1st Change Order Change in DATCP Cost-Sharing	1st Change Order Change in Units	2nd Change Order Change in DATCP Cost-Sharing	2nd Change Order Change in Units	Adjusted Cost Sharing (original + changes)	Adjusted Unit Amount (original + changes)
NO 82 Manure storage systems	Number	Modified	\$ 49,000.00	1.00	\$ 3,500.00	0.00			\$ 52,500.00	1.00
	#/EA									
	#/EA									
	#/EA									
	#/EA									
Total Adjustments to Cost-Sharing									\$ -	0.00
Total Adjustments to Cost-Sharing									\$ 52,500.00	

By electronically signing and dating this form, the county, through its authorized representative, certifies that the information provided in this form is a complete and accurate record of changes to the above-referenced cost-share contract, that each landowner or cost-share recipient who signed the cost-share contract has consented to the changes documented on this form, and that each landowner or cost-share recipient has received a copy of this form documenting the changes in cost-sharing and units installed. The county further agrees to retain this and other records required under s. ATCP 92.34 (7), and provide DATCP electronic copies of these records if requested.

NAME OF COUNTY REPRESENTATIVE: County Representative  
TITLE OF COUNTY REPRESENTATIVE: County Conservationist  
DATE: mm/dd/yyyy

Personal information you provide may be used for purposes other than that for which it was originally collected, sec. 19.04 (1)(b), Wis. Stats.

This is the form counties  
should complete when cost-  
share project exceeds  
\$50,000

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ARM-LWR-385 (Feb. 2006)

Wisconsin Dept. of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division  
2811 Agriculture Drive, PO Box 8911  
Madison WI 53708-8911  
Phone: (608) 224-4611 or 608-224-4610

*Soil and Water Resource  
Management Program*

**APPROVAL OF DATCP COST-SHARE GRANT  
OVER \$50,000**

Obtain DATCP approval  
once cost-share exceeds  
\$50,000

Criteria

- Address an identified water quality problem?
- Provide cost-effective response to the problem?
- Resolve most critical compliance concern?
- Consistent with LWRM plan?
- Has LCC approval

APPLICANT NAME AND ADDRESS		<input type="checkbox"/> LANDOWNER <input type="checkbox"/> GRANT RECIPIENT
LOCATION		
COST-SHARE AMOUNT		\$ <u>\$52,500</u>
APPROVAL CRITERIA		
county must:	DATCP will not approve a contract unless the county: 1. Identifies the water quality problem addressed by the project. 2. Demonstrates that the project is a cost-effective response to the water quality problem. 3. Provides evidence showing that the landowner receiving the cost-sharing will not have a more critical compliance concern after the project is completed. 4. Establishes that the project is consistent with the objectives and priorities in the county's land and water resource management plan.	
DATCP DETERMINATION OF APPROVAL (OFFICE USE ONLY)		
The cost-share contract is :		

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This is the **SECOND**  
Change Order Form  
should look when a new  
practice is added

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ARM-LWR-166 (Rev. Feb. 2017)

Wisconsin Department of Agriculture, Trade and Consumer Protection  
Agricultural Resource Management Division  
Soil and Water Resource Management Program (SWRM)  
PO Box 8911  
Madison, WI 53708-8911

**Cost-Share Contract Change Order** (Section F2.14, WIS. Stats.; s. ATCP 30.40, WIS. Admin. Code)

Use this form to document each change order, which becomes part of the cost-share contract listed below. This also should be used to track cumulative changes made to cost-sharing and the units cost-shared. If more than two change orders are prepared, combine prior change orders and enter the numbers under columns F and G, and then complete columns H and I to reflect the most current change order. If the amount in column J exceeds \$14,000, s. ATCP 30.40 (34) requires that the cost-share contract and this form be recorded. If the amount in column J exceeds \$50,000, s. ATCP 30.40(3) requires DATCP's written approval of the project.

There are more than two prior change orders and enter the combined totals for them in columns F and G.

**Status is new**

CENTURY		COST-SHARE CONTRACT NUMBER		LANDOWNER'S NAME		COST-SHARE RECIPIENT'S NAME				
LWRM 00 2017		R. Landowner								
A	B	C	D	E	F	G	H	I	J	K
Practice Name and Code	Unit of Measure - Acre	Practice Status (Modified, Deleted, New)	Original DATCP Cost-Share Amount	Original Quantity in Units	1st Change Order Change in DATCP Cost-Sharing	1st Change Order Change in Units	2nd Change Order Change in DATCP Cost-Sharing	2nd Change Order Change in Units	Adjusted Cost Sharing (original + changes)	Adjusted Unit Amount (original + changes)
00.02 Manure storage systems	Number	Modified	\$ 40,000.00	1.00	\$ - 3,500.00	0.00			\$ 52,500.00	1.00
00.04 Barnyard runoff control systems	Number	New					\$1,400.00	1.00	\$ 1,400.00	1.00
	#N/A								\$ -	0.00
	#N/A								\$ -	0.00
	#N/A								\$ -	0.00
	#N/A								\$ -	0.00
									\$ 53,900.00	

**Add as a 2<sup>nd</sup> change order**

- Do not list under original cost-share amount

Consent to Cost-Sharing

I certify that the information provided in this form is a complete and accurate representation of the information provided to me by the landowner who signed the cost-share contract and has consented to the changes in this form documenting the changes in cost-sharing and units. I provide DATCP electronic copies of these records if requested.

REPRESENTATIVE  
Conservationist

DATE  
mm/dd/yyyy

Personal information you provide may be used for purposes other than that for which it was originally collected, sec. 19.04 (1)(b), WIS. Stats.

This is the Transfer Form  
a county must complete  
to secure unspent funds  
from another county

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Phone: (800) 221-1010 or (800) 221-1010

### Cost-Share Funds Transfer Agreement

Submit transfer requests no later than  
**December 1st of the grant year**

Grant Year: \_\_\_\_\_ Fund Type: \_\_\_\_\_ **TOTAL AMOUNT OF TRANSFER: \$ \_\_\_\_\_ (whole dollars only)**

County Transferring Cost-Share Funds: \_\_\_\_\_ County Receiving Cost-Share Funds: \_\_\_\_\_

It is understood and agreed that:

- Bond and SEG revenue funds for conservation practices allocated to counties for the grant year indicated above are transferred from, or to, any county consistent with the terms in the annual grant contracts and ss. ATCP 50.28 (as amended by department rule), 50.34 and 50.36. A county may not transfer redirected cost-share funds originally awarded under an annual staffing grant.
- The county transferring the cost-share funds ("Transferring County") certifies that it has an uncommitted portion of its funds available for transfer, and that it has made a commitment to use the funds transferred above to the Receiving County to be used to:

**Extended deadline: Dec 1**

- Only one signature from each county required

- The transfer must be approved by DATCP, consistent with the recommendation of the Land and Water Conservation Board. DATCP will not approve a transfer that exceeds the Transferring County's current available cost-share grant allocation as shown in DATCP's records for the grant year indicated above.
- DATCP is authorized to modify the allocation plan and amend the grant contracts for the Transferring and Receiving Counties to carry out the terms of this AGREEMENT.
- The counties signing this AGREEMENT are responsible for tracking their cost-share balances and accurately calculating transfer amounts. Reimbursement requests submitted to DATCP will be processed in accordance with the revised cost-share amounts authorized by this AGREEMENT. Reimbursement request(s) submitted by either the Transferring County or Receiving County that would create an overage of the revised cost-share grant allocation will not be paid.
- Funds transferred by this Agreement to the Receiving County may be extended into the subsequent grant year for the project, subject to s. ATCP 50.34(6).

**Scan and submit PDF electronically**

\_\_\_\_\_  
JCC Chair, County Board Chair, Executive, or Administrator from Transferring County Date

\_\_\_\_\_  
JCC Chair, or County Board Chair, Executive, or Administrator from Receiving County Date

For both the transferring county and receiving county have signed this agreement, the receiving county should e-mail it to: [datcp@perc.state.wisconsin.gov](mailto:datcp@perc.state.wisconsin.gov)

For DATCP use:  
The LWCB recommended approval of this transfer of funds on \_\_\_\_\_, 20\_\_\_\_, (through its delegated representative \_\_\_\_\_) (Strike if this does not apply)

Approval of cost-share funds transfer of \$ \_\_\_\_\_ from \_\_\_\_\_ County to \_\_\_\_\_ County to be allocated in the Final Allocation Plan for the grant year indicated above. This Agreement becomes a fully executed agreement when signed by both parties.

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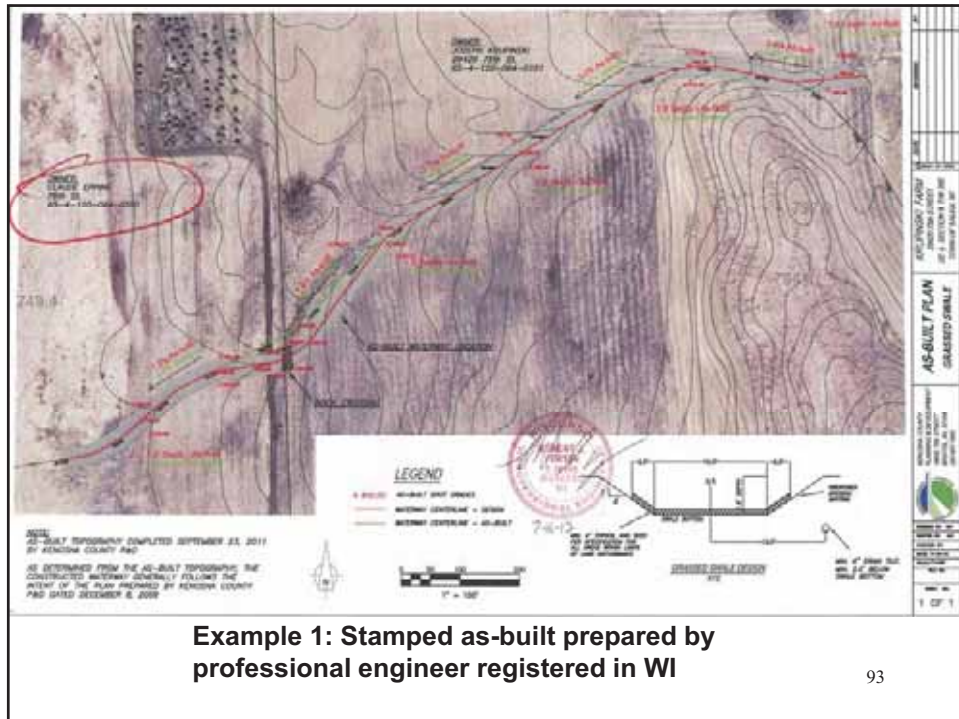


This is how Page 1 of your  
**PARTIAL PAYMENT**  
 Reimbursement Form  
 should look.

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GENERAL INFORMATION						
COUNTY		<input type="checkbox"/> <b>FINAL PAYMENT</b> [check only if all practice components of this project have been properly installed]				
COST SHARE CONTRACT #		<input checked="" type="checkbox"/> <b>PARTIAL PAYMENT</b> [check only if installed practice components provide independent conservation benefits see ACTP 50.40(12)]				
LANDOWNER NAME		<b>CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT</b> <input type="checkbox"/> Land owned by a local governmental unit, as defined by ATCP 50.01(17), subject to 50% cap in ATCP 50.42(1)(dr)				
GRANT RECIPIENT NAME (Only if different than landowner)		<input type="checkbox"/> Farm land <input type="checkbox"/> Other				
<div style="background-color: blue; color: white; padding: 5px; text-align: center;">             Sum change order amounts and partial payments of practice           </div>						
DATE	INTER- D CODE (or to WS Code table)	ORIGINAL DATCP COST- SHARE AMOUNT	CHANGE ORDER AMOUNT(S) (enter + or -)	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP	COST-SHARE PAYMENT FROM DATCP#	
50.62 Manure Storage	05	BR12	49,000	3,500	0	52,500
50.78 Nut. Management	07	BR12	0			0
	00					
	00					
	00					
	00					
<b>TOTAL REIMBURSEMENT REQUEST:</b>						56,000





**CERTIFICATE OF CONFORMANCE**

The undersigned manufacturer/supplier has furnished to:  
**Smith Brothers Farm LLC**  
 Somewhere, Wis.  
 One Skurystone Manure Storage System

and hereby states that the quality of work and materials meets the requirements set for in the project no. 6072017

Supplier: Genex Farm Systems  
 58 Interstate Drive NW  
 Melrose, MN 55052

Signature: *[Signature]* Date: 12/14/11  
 Matt  
 Sales Manager - Genex Farm Systems

Manufacturer/Supplier: CST Storage, DeKalb, Illinois

The CST Storage licensed engineer who certified the design will also certify that the completed installation meets the manufacturer's plans and specifications, based on the certification of the trained dealer who performed the installation. The following statement will suffice to document the verification of the Skurystone tank installation, along with the stamp of the Wis. licensed engineer.

"To the best of my professional knowledge, judgment, and belief, the storage tank has been installed in accordance with the construction drawings and specifications.

Signature: *[Signature]* REL 2  
 Date: 12/10/2013

DEAL

*[Professional Engineer Seal]*

Example 2: Stamped as-built prepared by professional engineer registered in WI

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[illegible]

95

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GENERAL INFORMATION					
COUNTY		<input checked="" type="checkbox"/> <b>FINAL PAYMENT</b> [check only if all practice components of this project have been properly installed] <input type="checkbox"/> <b>PARTIAL PAYMENT</b> [check only if installed practice components provide independent conservation benefits see ACP 50.40(12)]			
LANDOWNER NAME		CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT			
GRANT RECIPIENT NAME (Only if different than landowner)		<input type="checkbox"/> Land owned by a local governmental unit, as defined by ACP 50.01(17), subject to 50% cap in ACP 50.42(1)(d) <input checked="" type="checkbox"/> Farm land <input type="checkbox"/> Other			
COST-SHARE (Practices should be listed as appropriate)	ATCP CODE (refer to WS table)	ORIGINAL DATCP COST-SHARE AMOUNT	CHANGE ORDER AMOUNT(S) (enter + or -)	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP	COST-SHARE PAYMENT FROM DATCP#
50.62 Manure Storage	05	BR12	49,000	3,500	52,500
50.78 Nut. Management	07	BR12	0		0
50.64 Barnyard controls	08	BR12	0	1,400	1,400
Sum of requests by practice					
TOTAL REIMBURSEMENT REQUEST:					1,400

# Indicate if cost-shared practice achieves compliance with farm performance standard by inserting code that best characterizes NR 151 compliance:

## General maintenance requirements including NM plans



- Reduce to writing in addendum or O&M plan
- Include requirements from
  - ATCP 50 (e.g. s. 50.62 for manure storage)
  - NRCS technical standard
- Define period required
  - 10 years for storage and NM
- Inform of any compliance beyond the contract period

## Specific maintenance requirement from s. 50.62



- Update and follow a NM plan for 10 years
- Apply manure to non-frozen soils following a NMP meeting ATCP 50.04
- Do not spread stored manure on frozen or snow-covered ground

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## New O&M requirement for cost-shared manure storage



Maintain manure management capacity if animals added in 10-year maintenance period by:

- Expanding storage capacity to handle the greater volume of manure, or
- Revising NMP to spread the additional manure, which may require increased land

100



## Cost-sharing on government-owned land example



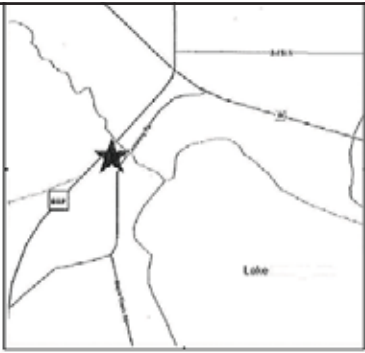
- All practices subject to 50% maximum rate
- Shoreline practice in town park at 47%
- Add \$5000 cost-sharing to increase rip-rap along shoreline

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COST-SHARE CONTRACT NO. SWRM-01-14									
SECTION 3. PRACTICES, COST, COST-SHARE AMOUNTS, AND INSTALLATION SCHEDULE									
The parties agree to the following related to the conservation practices, technical design and specifications, eligible costs, cost-share rates and amounts, and rate set forth below:									
Name of Person Preparing Technical Design: Ed Tech Representing: (COUNTY OR PRIVATE ENGINEERING FIRM)		Technical Standards Used in the Design: (LIST NAME AND DATE OF NRCS, DNR OR OTHER STANDARD EMPLOYED IN THE DESIGN)			USE OF THE 3 BOXES BE REPRESENTING: DATE OF				
					AMOUNT OF COST-SHARE CONTRACT APPROVED: \$				
*	Cost-Shared Item Description xx. ATCP 50.62 to 50.98, 50.40 (15) & (18), & 50.08 (3) and (4)	Yrs of CS**	Quantity (Use Standard Units)	Unit Cost or Flat Rate \$	Estimated Total Cost \$	COST-SHARE RATE			ESTIMATED DATE
						State %***	Grantee %	County/other %	
<input checked="" type="checkbox"/>	50.88 Streambank & Shoreline Prot.		80 feet	\$130.94	\$10,475	47%	53%		\$5,000
<input type="checkbox"/>									
<input type="checkbox"/>									
<input type="checkbox"/>									
<input type="checkbox"/>									
					TOTALS	\$10,475			\$5,000

\* Must check if the 50% maximum rate applies based on the installation of a practice after January 1, 2014 under one of these two conditions:  
a. The practice is installed on land owned by a local government.  
b. Cost-sharing is provided for access roads (ATCP 50.61), root guard system (ATCP 50.83), stream bank or shoreline protection (ATCP 50.88), stream crossing (x. ATCP 50.08(3)) and the practice does not implement a farm performance standard.  
\*\* Enter the number of years the practice is cost-shared only if the contract provides for (a) more than one year of cost-sharing for soil practices (contour farming, cover and crop management, residue management, and strip-cropping), (b) land taken out of production for more than one year, or (c) CREP equivalent payments for riparian land taken out of production. For (a) and (b), the landowner receives the full contract amount after the practice is certified, and has a contractual obligation to maintain the practice for the number of years cost-shared. For (c) and (d), the landowner receives the sum of the landowner's annual cost for the period specified in the contract. A landowner's annual cost equals the number of affected acres multiplied by the average soil rental rate in the county on the date of the cost-share contract. For CREP equivalent payments authorized under ATCP 50.08(4), the landowner receives an amount under the CREP program if the affected lands were enrolled in that program. To receive a CREP equivalent payment, a landowner must keep riparian land out of production for contract terms similar to those imposed by the CREP program. Insert "F" if the land is taken out of production in perpetuity. Cost-share practices must be operated and maintained in accordance with requirements that may apply.

**DIGGERS HOTLINE**  
 Call 3 Work Days Before You Dig!  
 Nationwide 811  
 Toll Free 1-800-242-8511  
 TDD 1-800-542-2289  
 Website: www.diggershotline.com



LOCATION MAP

**NOTICE TO LANDOWNERS AND EXCAVATORS**  
 made by the USDA, Natural Resources Conservation Service, or the \_\_\_\_\_  
 the approximate location or nonexistence of above or under ground hazards does not  
 the property or the excavator that is hired to complete construction, from notifying  
 pending construction. You will be liable for damages resulting from construction  
 Diggers Hotline) Ticket # \_\_\_\_\_

\_\_\_\_\_  
 Date: May 15, 2014  
 \_\_\_\_\_  
 Date: May 15, 2014  
 \_\_\_\_\_  
 Date: May 15, 2014

The installed practices comply with applicable NRCS technical standards and specifications. The "revised" construction plans (as-built drawings) reflect changes made during construction.

Construction Approved by: \_\_\_\_\_ Date: September 15, 2014

Job Approval Class: \_\_\_\_\_ Sheet \_\_\_\_\_ of \_\_\_\_\_

Same person can review design and approve installation for job class I and II

Section 92.14, Wis. Stats. calculation sheets and other required documentation

**GENERAL INFORMATION**

**CHECK the location of project**

**LANDOWNER NAME**  
 Village of Lake

**GRANT RECIPIENT NAME (Only if different than landowner)**

**CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT**  
☒ Land owned by a local governmental unit, as defined by ATCP 50.01(17), subject to 50% cap in ATCP 50.42(1)(d)  
☐ Farm land  
☐ Other

COST-SHARED PRACTICE DESCRIPTION (Practices should be listed exactly as shown on cost-share contract with appropriate reference to ATCP 50 provision)	NR 151 Code <sup>a</sup>	WATER-SHED CODE (Refer to WS Code table)	ORIGINAL DATCP COST-SHARE AMOUNT	CHANGE ORDER AMOUNT(S) (enter + or -)	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP	COST-SHARE PAYMENT FROM DATCP <sup>##</sup>
ATCP 50.88 Streambank/Shoreline Protection	00	LS03	5,000	2,500		7,500
120 Linear Feet	00					
	00					

**List feet added by change order but do not provide change order**

# Section 7: Wells

## Topics Discussed in this Section:

- Decommissioning
- Construction

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## Special cost-share requirements for Well Closure/Decommissioning

- Prepare, but do not submit a closure plan and NRCS coversheet
- Submit a **filling and sealing report** (DNR form, <http://dnr.wi.gov/topic/DrinkingWater/documents/forms/300005.pdf> signed by a registered well driller or pump installer with Reimbursement Form

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## Special cost-share requirements for well construction



- Only livestock watering facilities cost-shareable, not private wells
  - List s. 50.76 separately on cost-share contract and reimbursement form
- Submit a well construction report, (DNR form, [http://prodoasext.dnr.wi.gov/inter1/watr\\$.startup](http://prodoasext.dnr.wi.gov/inter1/watr$.startup))

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