



Maryland Department of Agriculture
MARYLAND AGRICULTURAL WATER QUALITY COST-SHARE PROGRAM

APPLICATION FORM INSTRUCTIONS
GENERAL GUIDELINES FOR ENROLLING AN APPLICANT INTO THE MACS PROGRAM

After determining the applicant's eligibility, the SCD representative will explain the MACS program and the various compliance components associated with specific BMPs. The cost of the project as well as the eligible cost-share rate will be clearly explained to an applicant. Do not assume that applicants already understand the MACS program requirements, forms or commitments. The applicant should also be made aware that some of the personal information collected by the Maryland Agricultural Water Quality Cost-Share Program is available for public inspection. *No blank forms are to be signed by the applicant.*

Corrections to the application forms should only be made by *crossing through the mistake and writing in the correct information*. If a correction must be made after the original signatures have been received, have all persons who originally signed the form initial and date the changed items. **Under no circumstances should products such as "white out" or correction tapes be used.** This practice is legally unacceptable.

If the farm is owned by a company, corporation, partnership or any other legal entity, the applicant will attach a Certificate of Resolution indicating (a) the person authorized to sign for the entity, and (b) the extent of authority that the person has been given by the entity. The person with such authority will need to sign as Applicant and Landowner and use their Federal Identification Number for Corporations instead of a Social Security number (this is a nine-digit number).

Each project must be built according to the design standards and specification adopted for the particular practice. If the farmer does not agree with the design size that is recommended based on the technical information available, then he or she may want to consider using alternative funding. *It is paramount that MACS grant funds are used in accordance with existing technical guidance available from NRCS.*

WATER QUALITY PROJECT FORM APPLICATION INSTRUCTIONS

SECTION I - APPLICANT INFORMATION

This section must be completed by the applicant in close consultation with an SCD staff member familiar with the MACS Program. Please type or print legibly.

1. *Social Security Number/Federal Identification #* - Enter the social security number of the individual who would receive the grant check for the proposed project. This number **must** correspond to the name of the applicant given and the signature under box 12. A business, corporation or Federal ID number is acceptable.
2. *County* - Enter the name of the county where the proposed farm project is to be installed. This should match the name of the Soil Conservation District in box 46 except in Frederick County, which contains two Soil Conservation Districts.
3. *Telephone Number* - Enter the phone number where the recipient of the cost-share check can be reached during the day. Include the area code.
4. *FSA Farm Number* - Enter the local FSA farm and tract numbers for the farm where the proposed project will be installed. Be sure to list a tract number since this number indicates the specific farm within the operating unit. If the farm receiving the proposed project belongs to a multi-farm owner, please make a note such as "Project located on (name of farm) at (address of farm)" under General Comments. If the applicant has the same FSA number for each farm, please assign a number such as A-166-1 for each separately deeded parcel. This will assist MACS staff members track the maximum cost-share dollars. If the applicant does not participate with FSA, please enter the word "none" in the space provided.
5. *Type of Request* - Check the appropriate box. Pooling agreements are situations where two or more landowners have a common water quality problem that can be corrected with one project. If the proposed project involves a pooling agreement, complete the Pooling Agreement form using the Pooling Agreement Guidelines in Section III and attach it to the Water Quality Project form.
6. *Name and Address, Landowner/Tenant* - This information must correspond to the individual whose social security and telephone numbers are entered in blocks #1 and #3. Indicate whether the applicant is the landowner or tenant. The applicant listed in block 6 must sign as either tenant or landowner. The same person listed as applicant in block 6 will sign the Claim for Payment if the project is approved. A landowner is a person whose name appears on the deed. The name used must be the full legal name, **NO NICKNAMES**. Always refer to your latest District Report to be sure the applicant's full name is being used on all applications and make the MACS office aware of any needed corrections. ***Please ensure the name and address are clearly printed and legible.***
7. *Are you applying for cost-sharing for this project from another program?* - Check the appropriate box. If yes, please enter the name of the program.
8. *Have you ever installed soil conservation practices with SCD assistance on your farm before?* - Check the appropriate box.

9. *I plan to start on this project by* - Enter the **month and year** the applicant expects to begin work on the proposed project.
10. *Do you have a soil and water conservation plan?* - Enter yes if the farm has a current plan **prepared by the Soil Conservation District**. (A current Soil and Water Conservation Plan is required for all Sediment Control Ponds.)
11. *And complete the project by* - Enter the **month and year** the applicant expects to complete the proposed project.
12. *Applicant's Certification and Signature* - After the applicant has read the certification statement, he or she should sign and date the application section. If the applicant is a tenant, the landowner must also sign and date the application section. The individual who signs here **must** be the same person named in block #6, **and** the same person who will sign the agreement as “applicant,” **and** the same person who would sign the Claim for Payment if the project receives funding.

If a tenant plans to sign on behalf of the landowner, he or she is required to obtain a notarized Special Power of Attorney for MACS (see Sect. III, Page 17). When signing for the landowner on the application and agreement, the tenant **must sign his or her own name** and note that his or her signature is a Power of Attorney for the landowner.

When a corporation, trust, partnership or government agency is listed on a deed, a Certificate of Resolution is required stating the member, trustee, or partner who will be acting on behalf of the organization and their position within the organization. Signature authority must be granted by another member of the organization. When the agent signs any MACS form or document, he or she is to include his or her title (such as vice president, trustee, or general partner) after the signature.

When a trust or partnership applies to MACS, a copy of the Trust Agreement or Partnership Agreement is to be sent along with the deed. If such an Agreement does not exist, then a notarized Certificate of Resolution is acceptable.

SECTION II - TECHNICAL REPORT

Sections II and III must be completed by an SCD technician familiar with the MACS program.

13. *No.* - Enter the MACS/ACP Reference Number for each eligible BMP. This information can be found on the page titled "Eligible Practices and Cost-Share Rates" in Section II of this manual (e.g., enter WP-3 for a Grassed Waterway).
14. *Project or Components* –
 - a. ***A project consists of one or more BMPs working together as a system to prevent or control an agriculturally related nonpoint source water quality problem.*** Therefore, the BMPs would generally be in the same drainage area.
 - b. List the eligible BMPs for this project. Use the same BMP names as are listed in "Eligible Practices and Cost-Share Rates." Please ***do not include*** ACP or NRCS practices that are not listed on the "Eligible Practices and Cost-Share Rates" page in Section II of this manual.
 - c. Confine the number of practices to a maximum of three. A separate Water Quality Project form should be used for each proposed project
15. *NRCS #* - Enter the NRCS practice number for each listed BMP. NRCS practice numbers can be found on the "Eligible Practices and Cost-Share Rates" page in the beginning of Section II of this manual.
16. *Extent Requested* - Enter the extent of the proposed project using the unit of extent as listed on the page titled "Eligible Practices and Cost-Share Rates" found in Section II of this manual.
17. *Needs Statement* - Read the statement and check yes or no. If the answer is no, explain in the space provided. For example, if an applicant requests a Sediment Control Pond when a Grassed Waterway would also correct the problem, check no. Answering no to this question ***does not*** automatically disqualify the applicant. Please provide information to assist MDA in making a decision on eligibility and use the General Comments area at the end of the form if additional space is needed.
18. *Maintenance Life* - Enter the number of years the applicant is required to maintain the project. This information is also found on the "Eligible Practices and Cost-Share Rates" page located in Section II of this manual. ***If the project consists of more than one BMP, the entire project must be maintained for the longest maintenance life of all the BMPs for this project.***
19. *Quantity,*
20. *Unit,*
21. *Materials/Service* - Enter the appropriate information in each of these three columns using only the items included in the flat rate list currently approved for your SCD. For example, if applying for 50 acres of contour strip-cropping, then enter 50, acres, and contour strip-cropping, respectively in columns 19, 20 and 21.

22. *Flat Rate* - For each cost item, enter the flat rate from the list currently approved for your SCD. Please make sure there are no discrepancies between the entries in columns 19 through 22 and your district's currently approved list of flat rates, as this delays processing of applications. If a flat rate does not exist for the necessary material, please provide documentation to support cost.
23. *Total Cost* - Calculate the total cost of each item by multiplying the quantity by the flat rate (block 19 x block 22).
24. *Rate %* - Enter the appropriate percentage rate at the top of the column. If the project consists of two or more BMPs with different cost-share rates, list cost items for each BMP separately and calculate the State cost-share amounts (Column 25) separately.
25. *State Cost-Shares* - If there is only one BMP or if all BMPs listed for this project have the same cost-share rate, it is not necessary to calculate the State cost-shares for each material item. Multiply the total cost by the appropriate percentage figure to obtain the State cost-share total.
26. *Estimate of Co-Cost Sharing Amount* - Enter the estimated amount of co-cost share funds. If the applicant is not applying for co-cost share funds from another source, enter a zero or the word "none."
27. *Estimate of eligible State Cost-Share Amount* - Subtract the estimated co-cost share funds to be received (block 26) from the Total State Cost-Share Amount and enter that amount in this block. The eligible cost-share amount must exceed \$200.00.

SECTION III - TECHNICAL DETERMINATION

28. **Acres** - For all sediment control practices, enter the number of affected acres from which the amount of soil loss is calculated. This may be all or part of a drainage area.
29. *Before*
30. *After*
31. *Difference* - This data is related to soil loss or sediment transport. Enter the number of tons per year of soil loss before and after installation of the proposed project. Calculate the difference and enter that number in block 31. For Sediment Control Ponds, enter the amount of sediment entering the pond in block 29, the amount of sediment leaving the pond in block 30, and the amount of sediment trapped in the pond in block 31. Since BMPs control only agriculturally induced erosion, the amount of soil loss after project installation should not be zero.
32. *Circle Type(s) of Erosion* - More than one type may be circled.
33. *Watershed Segment Number* - Locate the proposed project on a DNR sub-basin topographic map and **enter all eight digits** of the appropriate watershed segment number. This enables MDA to monitor sub areas of activity within a geographic area.

34. *Geographic Area* - Enter the appropriate two-letter watershed code from the following table:

If the Watershed Segment # is ...	then, the Geographic Area is ...	If the Watershed Segment # is ...	then, the Geographic area is ...
02-12-02-02	"LS" (Lower Susquehanna)	02-13-08-05 -08-06 -09-07 -11-07 -11-08	"RS" (Reservoirs)
02-13-02-02 -03 -04 -05 -08	"PR" (Pocomoke)	02-13-09-08	"PB" (Patapsco River)
02-13-03-01 -03 -05 -06 -08	"NW" (Nanticoke/ Wicomico)	02-13-11-01 -02 -03 -04 -05 -06	"PA" Patuxent
02-13-04-03 -04 05	"CR" (Choptank)	02-14-02-08	"WM" (Washington Metro)
02-13-05-02 -03 -09 -10	"CH" Chester River	02-14-03-01 -02 -03 -04 -05	"MP" (Middle Potomac)
		02-14-05-02 -04	"UP" (Upper Potomac)
02-13-06-10	"SA" (Sassafras River)	all other numbers	"AT" (At Large)

35. *Distance to Waters of the State* - Enter the number of feet from the project site to the closest point where pollutants from the project site could enter the waters of the State.

The phrase "waters of the State" means ***both surface and underground*** waters within the boundaries of the State subject to its jurisdiction, including that portion of the Atlantic Ocean within the boundaries of the State, the Chesapeake Bay and its tributaries, and all ponds, lakes, rivers, streams, public ditches, tax ditches and public drainage systems within the State other than those designed and used to collect, convey or dispose of sanitary sewage.

Any project beyond 1,000 feet from the surface waters of the State must be proposed to solve an existing (not potential) severe water quality problem. Please provide a brief, yet detailed explanation for projects beyond 1,000 feet under General Comments or on an attached memo. Explain how often or for how long during each year, pollutants run off into the surface waters of the State. If there is an existing groundwater quality problem, explain this under General Comments.

36. *Will this project benefit land devoted to an agricultural activity?* - Check the appropriate answer. This is a specific eligibility criterion for the MACS program. The Department will rely on the SCDs judgment of what constitutes an agricultural activity. If the answer is no or a qualified yes, include additional information under the General Comments section or on an attachment. List specific reasons to which the MDA could refer in the event the applicant is turned down for cost-sharing assistance and he or she appeals the decision.

37. *Will this project reduce pollutants from being delivered to the waters of the State?* - Check the appropriate answer. This is also a qualifying eligibility criterion. If, in your judgment, pollutants generated by the water quality problem will ***not*** be transported by runoff to the surface waters of the State nor to groundwater, enter "No". Provide additional information under General Comments.

38. *Acres Benefited* - Enter the ***total*** number of acres benefited by the project. This includes the area affected by the project installation and adjacent land that is protected from erosion or siltation as a result of the installation.

39. *Predominant Land Use Capability Class* - Enter the ***one*** land use capability class that best describes ***the majority of the land area*** served by the project. This information is also used as a qualifying criterion for determining eligibility.

40. *No. of Animal Units and type Served* - For all animal waste facility projects, enter the ***current*** total number of animal units on which the project capacity is based. The total number should be verified by the SCD. Also, please indicate the type of animal unit (e.g., dairy cattle, poultry broilers).

If applying for an expansion, please use certification startup or expansion (page 26 or 27). In the general comments section indicate that the application is based on expansion.

41. *Animal Wastes Generated Daily* - Calculate and enter the tons of waste generated daily.

42. *Pasture Acres* - Calculate and enter the number of acres of pasture supporting the proposed BMP.

43. *Description of Water Quality Problem* - Briefly describe the water quality problem. Indicate if pollutants or sediments are reaching the waters of the State or if there is a potential for pollutants to reach State waters. Please be sure to include the waterway name. Examples: a) Gully erosion from concentrated flow. Sediment delivered to Western Run; or b) Excessive sheet erosion. Sediment, nutrients and chemicals delivered to an unnamed tributary of the Patuxent River. Include in this block the specific type of animal contributing to the water quality problem whenever applicable.

44. *Cost-Effectiveness* -

A. Soil Loss - In addition to other eligibility criteria, all proposed sediment-reducing projects will be reviewed for cost-effectiveness. The maximum cost-effectiveness figure for the MACS program is \$40 per ton of soil saved. Using the formula shown below, calculate the cost-effectiveness of the proposed project and enter the figure in block 43.

Total dollar amount rec'd by applicant from
State, Federal and local cost-share programs x Amortization Factor = Cost-Effectiveness
 Tons of Soil Saved

a. Amortization Factors:

- i. 0.24782 for a project with a five-year maintenance life
- ii. 0.14635 for a project with a ten-year maintenance life
- iii. 0.11399 for a project with a fifteen-year maintenance life

Example: The cost-effective of a project which saves 20 tons of soil per year, has a maintenance life of fifteen years, and for which the applicant would receive a total of \$3,746.02 is \$21.35 per ton of soil. ($\$3,746.02/20 \times 0.11399 = \21.35)

If the cost-effectiveness of the proposed project exceeds \$40 per ton of soil saved, use the formula below to determine the maximum amount the applicant can receive in cost-share funds from all sources.

$$\frac{\$40.00 \times \text{Tons of Soil Saved per Year}}{\text{Amortization Factor}} = \text{Maximum \$ in cost-share funds available to applicant}$$

If the applicant is applying for co-cost share funds from another source, subtract the amount of co-cost share funds from the maximum to determine the amount of eligible State cost-share funds.

- B. In addition to other eligibility criteria, all applications for water quality purposes will be eligible based on the number of animal units that regularly use or occupy the area being addressed.

A minimum of fifteen (15) animal units (AU) must be present. The eligible cost share for these practices will be based on the flat rates and the project and farm limits.

Operations with eight (8) to fourteen (14) animal units may be eligible based on the animal unit cost-eligibility. The maximum cost-eligibility figure for the MACS program is determined by the formula below. Using this formula, for all practices requiring animal unit justification except for Waste Storage Structures (see below), calculate the maximum cost-share funds the proposed project can receive and enter the figure in block 43.

Cost-Eligibility = (Number of Animal Units) x (\$25/year) x (Maintenance Life)

Example: The cost eligibility for a farm that has 10 AU and is proposing a Stream Crossing (10 year Maintenance life) is eligible for a maximum of \$2,500.00 (10 AU x \$25.00 x 10 Years = \$2500).

For Waste Storage Structure (Code 313) practices use the formula below and enter the figure in block 43.

Cost Eligibility = (Number of Animal Units) x (\$50/year) x (Maintenance Life)

Example: The cost eligibility for a farm that has 12 AU and is proposing a Waste Storage Structure is eligible for a maximum of \$9,000.00 (12 x \$50 x 15 = \$9000).

If the applicant is applying for co-cost share funds from another source, subtract the amount from the cost eligibility to determine the estimate of eligible state cost share amount.

- C. When the proposed width of a riparian buffer exceeds the width eligible under MACS guidelines, the additional width must be justified. Use the Extended Buffer Worksheet (Section III, page 16).

1. If the width of the buffer is eligible based on soil loss cost-effectiveness use the formula above for cost effectiveness and enter the figure in block 43.
2. If the additional width of the buffer is eligible based on 50% of the area being hydric soils, please list the soil types in block 43.
3. If the additional buffer width is eligible based on 50% of the area being in a flood plain, indicate this in box 43.

45. *Operation and Maintenance Plan* - Check the appropriate response. An operation and maintenance plan is required for all projects prior to approval.

46. *Project Location (State Coordinates)* - Locate the site of the proposed project on a State coordinate map and enter both the east and north coordinates.

47. *SCD Certification* - Enter the name of Soil Conservation District and indicate whether the SCD finds or does not find the project adequate and appropriate for the MACS program. If the SCD does not find the project adequate or appropriate, please provide an explanation under General Comments.
48. *Authorized Signature (Designated Technician)* - Only the NRCS designated technician may sign in this space. By signing off on the Application Form, the Designated Technician is stating that the design of the specified BMP meets NRCS Standards and Specifications, that the components (along with their quantities) listed on the Application Form are appropriate, and that the practice meets *all* MACS Program regulations and guidelines.
49. *Authorized Signature (Chairman or Designee)* - Only the SCD Chairman or Designee may sign in this space. The Designee (usually the District Manager) may *not* designate signatory authority to anyone else. By signing off on the Application Form, the Chairman/Designee is stating that the Application Form has been filled out correctly, the necessary attachments have been obtained, farm funding maximums have not been exceeded, and the proposed practice meets *all* MACS Program regulations and guidelines.

SECTION IV - DETERMINATION OF ELIGIBILITY

For MDA use only.

After review of the proposed project, an MDA representative indicates whether or not the project is eligible for State cost-share funds. If the project is eligible, the applicant will receive an Agreement package for signature via the SCD. If the project is not eligible, the applicant will receive a letter outlining the reason(s). A copy of this letter will be sent to the District.

SECTION V - AGREEMENT APPROVAL

After a project has been approved for cost-share assistance using either State or Federal funds, the top part of this section is completed by an MDA representative. A copy is then sent to the SCD.

GENERAL COMMENTS SECTION

Each application for a project must be tied to a specific parcel of land. The Maryland Property View Account I.D. must be entered in this Section. A copy of the recorded deed *must* accompany the application. The Liber and Folio numbers (also referred to as Book and Page) *must* be recorded in the General Comments section. If an applicant has already applied for MACS funding on the *same parcel of land* and the SCD has already sent a copy of the deed, then a second copy need not be sent. The SCD *must still* record the Liber and Folio numbers under the General Comment section along with the Agreement number of the file where the deed is located.

In addition to the preceding paragraph, the General Comments section should *always* be used to provide some insight about the proposed project. Please use this section to assist the MACS staff in visualizing the nature and extent of the water quality problem. Provide a few concise sentences to describe the site and the proposed solution.

If applying for an expansion, indicate this in the general comments section and submit the Certificate of Imminent Start Up or Expansion (page 26 or 27).