

MARYLAND DEPARTMENT OF AGRICULTURE

2020/2021 WINTER COVER CROP PROGRAM - APPLICATION / AGREEMENT



SECTION I – APPLICATION		SCD Use - Date Received		For SCD Use AGREEMENT NUMBER	
		SCD Use - SQL Entry Date		MACS Account Number	
1) SS or FID # - Last Four (4) Digits Only		2) District		3) Telephone Number	
				4) Email Address or Alternate Telephone Number	
5) NAME and ADDRESS of person to receive check. Include farm or corporate name, if any.				6) Nutrient Management Certification - Check (v)	
Name or Farm Name				7) Annual Implementation Report (AIR)	
C/O Name				8) Name on AIR	
Address					
City, State, Zip				9) ATTACHED - Current Nutrient Management Plan Certification Form	
		10) Change in Address (circle) [YES] [NO]			
For Applicant Use SECTION II- TECHNICAL REPORT					
Step 1 - Acres of Traditional Cover Crop		11) ACRES		PAYMENT RATE	
Base Acres - Total Acres of Cover Crop				\$40.00	
Step 2 - Choose Incentives*		13) ACRES		INCENTIVE PAYMENT RATE	
15) All acres aerial seeded by airplane or aerial ground into eligible previous crops by October 10, 2020				\$5.00	
16) Acres aerial seeded by <u>airplane or helicopter</u> into standing corn on or before September 10, 2020.				\$10.00	
17) Tillage and Planting Method Incentive- no-till, broadcast light tillage, minimum tillage, vertical tillage, conventional tillage on or before October 10, 2020				\$10.00	
18) Acres planted in Canola/Rapeseed				Minus \$15 per acre	
				subtract calculated amount from funding request	
19) Step 3 Cost Share for Seed Test (No. of Tests)				\$15.00	
Step 4 - SUBTOTAL AMOUNT** - Base Amount plus Incentive Amount(s)					
* Incentives offered on cover crop acreage for certain management practices. Review the chart in the 2020/2021 Cover Crop Program Requirements and Agreement. ** The subtotal dollar amount above will represent the maximum payment amount that you may receive.					
Extended Season Incentive - For cover crop fields maintained until May 1, 2021. IMPORTANT - The final determination for this incentive will take place February 2021 and is contingent on the State budget and number of acres fall certified. There is a 500 acre maximum cap. <u>If the incentive becomes available</u> the dollar amount calculated below will be combined with the subtotal in (Step 4) to indicate the maximum payment amount that you may receive under your Agreement.					
Step 5 - Extended Season Incentive		20) ACRES 500 maximum		\$10.00 per acre	
				TOTAL	

SECTION III – APPLICANT/AGREEMENT - PAGE 2

Public Information Notice – The principle purpose for which the information on this application is used to identify you as one of those persons whom the agency intends to give State cost-share funds. If you fail to provide the requested information, MDA may not provide you with cost-share funds. You have the right to inspect, amend, or correct personal information collected by the agency. Much of the personal information collected by the agency is available for public inspection. This information is not routinely shared with state, federal, or local government agencies.

CERTIFICATION: I request cost-sharing under this program to address a potential nutrient management/water quality problem. I agree to comply with the requirements as outlined in the 2020/2021 Cover Crop Program Requirements and Agreement. I have read the program guidelines and understand the steps involved for approval. I understand I am not approved for cost-share funds until I have received a letter of approval and a signed and dated copy of my Application/Agreement from the Maryland Department of Agriculture. If at any time program requirements are not met, the Agreement can be cancelled by the Department with no obligation to pay the applicant and any payments already made will be forfeited. I understand this Agreement may be terminated automatically, without liability to the Department or the District, if there are no available public funds under the program supporting this project.

Step 6 - Signature of Applicant

Date

SECTION IV - Spring Payment - 2020

***** Due to COVID-19 and social distancing requirements most cover crop participants were not able to provide a signature for the spring certification process as required. This section of the application provides the opportunity to complete the 2019/2020 Winter Cover Crop Program Spring Certification. In order to participate in the 2020/2021 Winter Cover Crop Program, applicants who have received or expect to receive a 2020 cover crop payment must spring certify by signing this section. *****

Participant's Certification – I certify that the Claim for Payment represents a true and accurate accounting of eligible costs for the installation of the project approved in my 2020 Cover Crop Application/Agreement. I further certify that the provisions of the program as outlined in the Agreement have been/were met. I hereby request or certify receiving a cover crop cost-share payment for the 2019/2020 Winter Cover Crop Program.

Step 7 - Signature of Applicant for Spring 2020 Cover Crop Certification - Required

Date

The _____ Soil Conservation District has reviewed this referral and finds it adequate and appropriate for this program.

Authorized Signature (Designated Technician)

Authorized Signature (Designated Chairman or Designee)

Date