



**Maryland Department of Agriculture**  
**MARYLAND AGRICULTURAL WATER QUALITY COST-SHARE PROGRAM**  
**CERTIFICATE OF IMMINENT START-UP OR EXPANSION OF**  
**A POULTRY-GROWING OPERATION**  
*(For 313 and 316 only)*

\*\*\* To be signed by SCD and submitted *with Application*\*\*\*

This is to certify that a new or expanded poultry house will be built on the farm referenced in the accompanying MACS Application, and that construction will be completed according to the schedule indicated below. Based on the expected new, total poultry capacity on my farm, I request MACS cost-share assistance for the following practice(s): \_\_\_\_\_

\_\_\_\_\_

Type of birds (broilers, layers, etc.): \_\_\_\_\_

Name of integrator to provide the birds: \_\_\_\_\_

Current flock size/capacity (number of birds before the expansion): \_\_\_\_\_

Total flock size/capacity after startup or expansion: \_\_\_\_\_

Approximate start date for poultry house construction: \_\_\_\_\_

Projected completion date for poultry house: \_\_\_\_\_

Projected date\* for placement of first flock: \_\_\_\_\_

*(\*Must be within six months of the date when the MACS application is signed.)*

I certify that the above information is complete and accurate. I understand that the Maryland Department of Agriculture will not process a Claim for Payment for this project until the new/extra birds have been placed on the farm and the Soil Conservation District has certified this in writing.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Owner (if different from applicant): \_\_\_\_\_ Date: \_\_\_\_\_

SCD Chairman or Designee: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\* To be signed by SCD and submitted *with Claim for Payment*\*\*\*

I certify that new or additional poultry *have been placed* on the farm as specified above.

SCD Chairman or Designee: \_\_\_\_\_ Date: \_\_\_\_\_