

Urban Conservation Cost-Share Assistance Application

In an effort to enhance urban conservation efforts within our growing community of Cass County, North Dakota, Cass County Soil Conservation District is awarding cost-share grants to a limited number of landowners and organizations per year. These cost-share grants are aimed at improving our local water and soil resources while enhancing well-being within our community.

This program provides 60% of approved costs, up to the maximum dollar amount (see rate table).

Practices already covered under other programs may not be eligible for additional cost-share.

Submit application by mail, email, or in person to Cass County Soil Conservation District
1665 43rd St S, Ste 103, Fargo ND 58103
amy.cole@nd.nacdnet.net

Conservation practices covered:

Please check one of the following,

Water Conservation Irrigation Home System

- Drip irrigation (*home lawns/gardens*)
- Rain Barrel System (please select option below)
 - Adding on/improvements to existing rain barrel system*
 - Community education course and materials for first barrel*
- Compost Tumbler System (please select option below)
 - Improvements to existing home composting system*
 - Community education course and materials for first barrel*

Forestry Conservation Practice

- Arboretum
- Living snow fence
- Urban windbreak

Alternative Landscape Practice

- Rain garden/Bioswale
- Xeriscape
- Pollinator garden or pollinator habitat improvement
- Low mow turf grass planting
- Grass planting using native grass/forb mixes
- Pocket Prairie
- Little Free Garden
- Pervious Paving (*poured-in-place pervious concrete/asphalt; block or concrete modular pavers; grid pavers*)

Urban Riparian Area Improvement Project

- Native Planting for riparian forest improvement (**Red River/Sheyenne River Only*)
- Riverbank stabilization project (**Red River/Sheyenne River Only*)
- Riparian habitat improvement (**Red River/Sheyenne River Only*)

Please briefly explain your project plans:

_____ I own the property on which this practice would be installed or can show proof of right to install on this property.

_____ The property this practice would be installed on is within the limits of Cass County, North Dakota.

_____ If awarded, I could maintain this practice for at least 5 years.

_____ If I cannot maintain this practice, or it is removed prior to the 5-year agreement, I agree to pay a pro-rated portion of the cost share received back to the District within 30 days of contract breach. (1% of the cost share amount received shall be paid per each month short of the 5-year agreement. For Pocket Prairies, 1.25% will be repaid per each month)

_____ I understand that if awarded, it would be my responsibility to contact **North Dakota One Call** prior to any work being completed to source utilities on my property.

_____ If awarded, I will install this practice during the growing season immediately following the cost-share award notice.

_____ If approved, I will fund 100% of the cost of the practice and submit eligible receipts for reimbursement after final site evaluation. **I understand that only those costs incurred after the contract and site photos have been completed will be eligible.**

_____ If awarded, I understand that I am responsible for procurement of materials, installation, labor and maintenance work and all liabilities for this project unless noted otherwise.

_____ I understand that approved cost-share participants are eligible for reimbursement of 60% of approved expenses up to a maximum dollar amount in accordance with the table below.

<u>Practice</u>	<u>Cost Share Rate</u>	<u>Maximum Reimbursement</u>
Rain Barrel or Compost Tumbler	60% cost share	\$100.00 maximum
Pervious Paving	60% cost share	\$1,000.00 maximum
Pocket Prairie	up to 75% cost share	\$500.00 maximum
Little Free Garden	60% cost share	\$50.00 maximum
All other practices listed above	60% cost share	\$500.00 maximum

Contact Name: _____

Signature: _____

Date: _____

All programs and services of the Cass County Soil Conservation District are offered on a non-discriminatory basis, without regard to race, color, national origin, religion, sex, age or handicap. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). USDA is an equal opportunity provider and employer.

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
2	Business name/disregarded entity name, if different from above
3	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> Other (see instructions) ▶ _____
4	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5	Address (number, street, and apt. or suite no.) See instructions.
6	City, state, and ZIP code
7	List account number(s) here (optional)
Requester's name and address (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number					
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	-		-		
OR					
Employer identification number					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 70%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-			
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Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
 Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

* For cost-share payments \$600 or more