

The Morris County Conservation District will be accepting applications for State Cost Share Assistance for FY2025 through June 1, 2024 for round one ranking. Applications received after June 1, 2024 will be considered for a second round of rankings if additional funds become available. Funds will not be available until July 1, 2024. If you have questions or concerns or wish to apply for cost share programs contact us by phone at: 620-767-5111 Ext 101 or via email at tisha.richardson@ks.nacdnet.net.

Applications receiving approval from Morris County CD and the Division of Conservation (DOC) applicants may start implementation after July 1, 2023. Cost share assistance is not available on any project(s) completed to prior to DOC approval. Practice must comply with USDA, NRCS Field Office Technical Guide Standards and Specifications or other specifications approved by the DOC. Application approval will be subject to a ranking process using specific criteria established by the Conservation Districts, NRCS, and the DOC.

Potential Practices may include:

- Critical Area Seeding,
- Cross & Pond Fencing,
 - Diversion,
- Erosion Control Structures,
- Failing Septic System Outside City Limits,
 - Gradient Terraces
 - Grass Seeding,
- Grassed Waterway,
- Heavy Use Area Protection,
- Livestock Waste Systems,
- Livestock Watering Systems,
 - Spring Development,
 - Stream Crossing,
- Pumping Plant Solar,
- Pumping Plant Electric,
- Watering Facility or Tank,
- Water & Sediment Control Basin,
 - Water Well,
 - Well Plugging,
- Windbreak Establishment,

Contact us for all your seed needs and drill rentals!

***Funding provided by the Division of Conservation (DOC), Kansas Department of Agriculture through appropriation from the Kansas Water Plan Fund.**

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.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <p>2 Business name/disregarded entity name, if different from above</p> <p>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.</p> <p><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</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>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.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><i>(Applies to accounts maintained outside the U.S.)</i></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <p>6 City, state, and ZIP code</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

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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Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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-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.

**Morris County Conservation District
State Cost-Share Financial Assistance
Request Form | FY2024 | FY2025 | FY2026 (circle one)**

Please complete ALL lines for cost-share financial assistance consideration:

For District Use Only

Date Received _____

Eligible Practice? _____

HUC _____

C-S Program _____

Please mark an X next to the practice(s) you are interested in completing.

Applicant Information Person Paying for Installed Practice	X	Conservation Practice(s)
Landowner's Name (as appearing on Deed):		Critical Area Seeding (342) Cross & Pond Fencing (382)
Mailing Address:		Diversion (362)
City State Zip		Erosion Control Structures (410)
Phone number:		Failing Septic System Outside City Limits
W-9 (Please complete and return with the application-attached.)		Grade Stabilization Structure or Erosion Control Structures (410)
Email:		Gradient Terraces (600)
Multiple Landowners (circle)? Yes No		Grassed Waterways (412) Heavy Use Area Protection (561)
If yes, please add additional landowners' information on next page with percent share and have them complete a W-9 and turn in with the application.		Livestock Pipeline (516)
Legal Description: Tract #:		Pumping Plant (533) Electric
Field #: Farm #: Number of Acres:		Pumping Plant (533) Solar
Operator's Name:		Range Planting Grass Seeding (550)
Mailing Address:		Spring Development (574)
City State Zip		Stream Crossing (578)
Phone #:		Watering Facility or Tank (614)
Email:		Water & Sediment Control Basin (638)
What is the current land use (circle one)? Crop Ground or Livestock		Water Well (642)
What is the resource concern?		Well Decommissioning Plugging (351)
Do you contour farm (circle)? Yes No		Windbreak Establishment (380)
What is your tillage practice?		Other:

NOTE:

- Completing this form does **not** guarantee cost-share financial assistance.
- ***Construction/installation/implementation of this practice(s) started prior to contract approval will result in ineligibility*** for cost-share financial assistance.
- Each proposed project will be evaluated and ranked based on established criteria. A point value system is used to determine the ranking of applications.
- An on-site evaluation of proposed projects may be conducted by the conservation District/NRCS Staff to determine eligibility of the project.
- If approved for cost-share financial assistance, the landowner(s) must sign a contract agreeing to the terms set forth in the contract. Certain projects have additional requirements. Cost Share Payment is 70% of the actual cost and is based on the County Average Costs as determined by the District Board. (***District inputs optional policies and additional requirements here.***)
- You will be notified of the status of your request for cost-share financial assistance by a letter from the Morris County Conservation District that will be mailed (***July 1st***).
- **I understand that this is an APPLICATION only, and that no work may begin on this project prior to the issuance of a contract by the Conservation District.**

Signature: _____

Date _____

Printed Name _____

**Funding for state cost-share programs is provided by the Division of Conservation,
Kansas Department of Agriculture through appropriation
from the Kansas Water Plan Fund.
Morris County Conservation District
State Cost-Share Financial Assistance
Request Form (Continued)**

Multiple Landowner's:

Landowner's Name (as appearing on Deed):

SSN/FEIN: _____ | Need to include W-9 (attached)

Mailing Address: _____

Telephone Number(s): _____

Percent Share: _____

Landowner's Name (as appearing on Deed):

SSN/FEIN: _____ | Need to include W-9 (attached)

Mailing Address: _____

Telephone Number(s): _____

Percent Share: _____

Landowner's Name (as appearing on Deed):

SSN/FEIN: _____ | Need to include W-9 (attached)

Mailing Address: _____

Telephone Number(s): _____

Percent Share: _____

Pasture and Rangeland Benchmark Inventory and Assessment Reduced

The purpose of this document is to record past and current management that has been applied to the specific land unit. This information will be utilized to assist in making recommendations for adjustments in management.

Forage Inventory: Provide a map of property with correct field boundary, point of access, and acres.

1. This field is used for: Hay Grazing Other: _____
2. List the dominant forage in the field (for example: native, brome, fescue, mixed) _____
3. Is prescribed burning currently used as a management practice? YES NO
 If YES, frequency of burning: _____ Last time burned (month/year): _____
 Purpose of the burn: _____
4. Are there additional fields (included in the grazing system) other than the unit of concern? YES NO
 (If yes, please attach a map showing the field boundaries.)
 If grazed, is the field cross fenced or using a multi-paddock grazing rotation?
5. If the field is hayed, when is it typically cut (month/day): _____ Not Applicable

Animal Inventory:

1. Provide the types and number of livestock that are grazed on this land unit and the dates these animals are present on the land unit.

Animal Type Cattle, Goats, Horses, Sheep	Number of Head	Average Lbs Weight In	Average Lbs Weight Out	Date Livestock Arrive in Field	Date Livestock Leave the Field	Notes (cow/calf, stockers, dry cows)

2. Describe cow/calf operation: Not Applicable
 Average Calving Date (month/day): _____ Average Weaning Date (month/day): _____
 Bulls are Present with Cows for _____ days starting on (month/day): _____

3. Grazing Management:

Describe the grazing management (early intensive, rotation, set stocked, season of use):

Water Inventory: Include the location of watering points on the map.

1. The main livestock water supply for the field is: _____ (Ex.: pond, spring, well, rural water)
 Is it dependable? YES NO
 Power is generated by: _____ (Ex.: windmill, solar, electric)
2. Is livestock access controlled to surface water supplies? YES NO How? _____
 (Ex.: fenced pond with tank below, access ramp into pond, etc.)