



Wisconsin Dept. of Agriculture, Trade and Consumer Protection
 Agricultural Resource Management Division
 2811 Agriculture Drive, PO Box 8911
 Madison WI 53708-8911
 Phone: (608) 224-4648 or (608) 224-4610

Soil and Water Resource Management Program

DATCP Received:

Use to certify practices and request partial or final reimbursements. Provide DATCP electronic copies of cost-share contracts, addenda, NM checklists, construction cover sheets, calculation sheets and other required documentation

Certification and Cost-Share Reimbursement Request Form

Section 92.14, Wis. Stats.

GENERAL INFORMATION	
COUNTY CENTURY	<input checked="" type="checkbox"/> FINAL PAYMENT [check only if all practice components of this project have been properly installed] <input type="checkbox"/> PARTIAL PAYMENT [check only if installed practice components provide independent conservation benefits see ACTP 50.40(12)]
COST SHARE CONTRACT # 2018-1	
LANDOWNER NAME George & Gina Smith	CHECK APPLICABLE LOCATION OF THE COST-SHARE PROJECT <input type="checkbox"/> Land owned by a local governmental unit, as defined by ATCP 50.01(17), subject to 50% cap in ATCP 50.42(1)(dr) <input checked="" type="checkbox"/> Farm land <input type="checkbox"/> Other
GRANT RECIPIENT NAME (Only if different than landowner) Gregg & Sylvia Wow	

COST-SHARED PRACTICE DESCRIPTION <small>(Practices should be listed exactly as shown on cost-share contract with appropriate reference to ATCP 50 provision)</small>	NR 151 Code #	WATER-SHED CODE <small>(Refer to WS Code table)</small>	ORIGINAL DATCP COST-SHARE AMOUNT	CHANGE ORDER AMOUNT(S) <small>(enter + or -)</small>	DEDUCT PARTIAL PAYMENTS RECEIVED FROM DATCP <small>(enter -)</small>	COST-SHARE PAYMENT FROM DATCP##
ATCP 50.78 Nutrient Management	07	LS03	\$6,000.00	\$2,000.00	\$0.00	\$8,000.00
200 acres	00		\$0.00	\$0.00	\$0.00	\$0.00
	00		\$0.00	\$0.00	\$0.00	\$0.00
	00		\$0.00	\$0.00	\$0.00	\$0.00
	00		\$0.00	\$0.00	\$0.00	\$0.00
Record any changes in quantity here 200 Acres	00		\$0.00	\$0.00	\$0.00	\$0.00

TOTAL REIMBURSEMENT REQUEST: \$8,000.00

Indicate if cost-shared practice achieves compliance with farm performance standard by inserting code that best characterizes NR 151 compliance: 00 (no standard applies), 02 (Sheet, rill and wind erosion), 03 (Tillage Setback), 04 (Phosphorous Index), 05 (Manure storage facilities), 055 (Process Wastewater Handling), 06 (Clean water diversions), 07 (Nutrient management), 08 (Manure management prohibitions)
Note: A 50% maximum cost-share rate applies to the following practices if no NR 151 code is associated with the practice: ATCP 50.65-access roads, ATCP 50.85-roof runoff systems, ATCP 50.88-streambank or shoreline protection, ATCP 50.885-stream crossing, ATCP 50.98-wetland development or restoration.
 ## Calculate by combining original cost-share amount with any change order amounts, and then deducting any partial payments already received

This reimbursement request form, along with technical certification documentation and cost-share contract, should be emailed to: datcpswrms@wisconsin.gov

TECHNICAL CERTIFICATION		
<p>Complete the following as needed to certify that each practice listed on this form has been installed according to technical standards. A separate signature is required on this form to certify the installation of non-engineered practices.</p>		
FOR ENGINEERING PRACTICES		
<p>The county submits one of the following forms of documentation certifying that the engineering practices or practice components listed on the reverse side have been installed according to applicable standards and specifications (check one and attach):</p> <p><input type="checkbox"/> A copy of the page/sheet (or applicable part of the page/sheet if a large size drawing) of the “as-built” plan showing the stamp of the professional engineer or other professional acting within the scope of the professional’s Wisconsin registration; or</p> <p><input type="checkbox"/> A copy of the construction plan coversheet only (WI-001) properly completed by persons with a conservation engineering certification rating sufficient to approve the design of the practice and certify that the practice was installed according to applicable standards.</p>		
FOR WELL CONSTRUCTION AND DECOMMISSIONING ONLY		
<p><input type="checkbox"/> The county has a plan for decommissioning a well (check if applicable).</p> <p><input type="checkbox"/> The county has attached a copy of the appropriate DNR form completed by a well driller or pump installer registered under s. 280.15, Stats. for new well construction, or filling and sealing wells (required).</p>		
FOR NUTRIENT MANAGEMENT PLANNING		
<p>For all nutrient management plans directly funded with cost-share dollars or required as part of another cost-shared practice, the county submits the most current checklist (available at, https://datcp.wi.gov/Documents/NM590Checklist2015.docx) completed and signed by a qualified nutrient management planner as defined in s. ATCP 50.48 certifying that the nutrient management plan complies with NRCS technical guide nutrient management standard 590.</p> <p><input checked="" type="checkbox"/> A copy of the nutrient management plan checklist is attached.</p>		
FOR NON-ENGINEERED PRACTICES		
<p>By electronically signing* and otherwise completing this section, the person listed below certifies that he or she (1) is qualified to provide this certification, and (2) has <u>personally reviewed</u> the installation of the non-engineered practice(s) listed on the first page, and certifies that the practice(s) was installed according to plans, specifications, and standards. <i>Non-engineered practices</i> are limited to stripcropping, cover and green manure crop, contour farming, residue management, intensive grazing management, critical area stabilization, field windbreaks, livestock fencing, or riparian buffer.</p>		
TYPE NAME TO SIGN ELECTRONICALLY	TITLE OF QUALIFIED PERSON	DATE

COUNTY CERTIFICATION AND VERIFICATION		
<p>To request reimbursement, the county, through its authorized representative, must electronically sign* by checking the box indicating agreement with the terms of this request, typing the person's name and official title, and dating the request. By signing and submitting this form, the county through its authorized representative:</p>		
<p>a. Certifies that each of the practices listed on the first page of this form were installed on or before December 31st of the grant year.</p> <p>b. Certifies that it is in possession of all invoices for supplies and services provided by contractors for this project. For landowner installation and maintenance services, it has invoices and cost-estimates.</p> <p>c. Verifies that it (1) obtained landowner or grant recipient consent to changes in the cost-share contract, (2) documented these changes in cost using ARM-LWR-166, and (3) provided copies of ARM-LWR-166 to all parties to the contract.</p> <p>d. Agrees to maintain documentation related to practice installation, proof of payments, and change orders as required by s. ATCP 50.34(7). All documents will be made available to DATCP upon request.</p>		
<p><input checked="" type="checkbox"/> I agree on behalf of the above-referenced county to the terms of this reimbursement request.</p>		
TYPE NAME TO SIGN ELECTRONICALLY	TITLE OF COUNTY REPRESENTATIVE	DATE
LARRY DOWN	COUNTY CONSERVATIONIST	10/15/2018

*This method of completing the form constitutes an electronic signature and has the same force and effect, pursuant to Chapter 137 of the Wisconsin Statutes, as a non-electronic signature



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Division of Agricultural Resource Management
 Bureau of Land and Water Resources
 PO Box 8911, Madison WI 53708-8911, Phone: 608-224-4605

Use this form to check nutrient management (NM) plans for compliance with the WI NRCS 2015-590 Standard.

Nutrient Management Checklist Wis. Stat. §92.05(3) (k), Wis. Admin. Code §ATCP50.04(3) and Ch. 51

COUNTY Century		DATE PLAN SUBMITTED 10/1/2018	GROWING SEASON YEAR PLAN IS WRITTEN FOR 2019 (from harvest to harvest)		
TOWNSHIP: (T. 25 N.)		RANGE: (R. 3 E., W).	CHECK ONE: <input checked="" type="checkbox"/> Initial Plan or <input type="checkbox"/> Updated Plan		
NAME OF FARM OPERATOR RECEIVING NM PLAN Gregg and Sylvia Wow		FARM NAME (OPTIONAL) Wow Farm		BUSINESS PHONE (715) 297 - 5513	
STREET ADDRESS W5566 Red Rover RD			CITY Waggs	STATE WI	ZIP 54999
REASON THE PLAN WAS DEVELOPED: Click and choose. (Ordinance, NR 243 WPDES or NOD, <u>DATCP-FP or cost share (cs)</u> , DNR-cs, USDA-cs, Other)				CROPLAND ACRES (OWNED & RENTED) 200	
RENTED FARM(S) LANDOWNER NAME(S) AND ACREAGE: add sheet(s) if needed					
WAS THE PLAN WRITTEN IN SNAPPLUS?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	If yes, which software version, if known? 17	
CHECK PLANNER'S QUALIFICATION: Click and choose. 1. NAICC-CPCC, 2. ASA-CCA, 3. SSSA-Soil Scientist, 4. DATCP approved training course, 5. Other approved by DATCP					
NAME OF QUALIFIED NUTRIENT MANAGEMENT PLANNER Joe Planner				BUSINESS PHONE (715) 297 - 4000	
STREET ADDRESS 50 Blue Dog RD			CITY Waggs	STATE WI	ZIP 54999

Use header sections to add comments. Mark NA in the shaded sections if no manure is applied.

1. Does the plan include the following nutrient application requirements to protect surface and groundwater? Well Setbacks will not flag in SNAPPlus17 unless they are winter spread within 300'. The winter spreading plan reports 4,000 tons are produced in the winter. <i>This section applies to fields and pastures. If no manure is applied, check NA for 1.c., 1.h., 1.i., 1.n., 1.o., 1.q., 1.s.</i>				Yes	No	NA
a. Determine field nutrient levels from soil samples analyzed by a DATCP certified laboratory .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b. For fields or pastures with mechanical nutrient applications, determine field nutrient levels from soil samples collected within the last 4 years according to 590 Standard (590) and UWEX Pub. A2809, <i>Nutrient Application Guidelines for Field, Vegetable, and Fruit Crops in Wisconsin</i> (A2809) typically collecting 1 sample per 5 acres of 10 cores. Soil tests are not required on pastures that do not receive mechanical applications of nutrients if either of the following applies: 1. The pasture average stocking rate is one animal unit per acre or less at all times during the grazing season. 2. The pasture is winter grazed or stocked at an average stocking rate of more than one animal unit per acre during the grazing season, and a nutrient management plan for the pasture complies with 590 using an assumed soil test phosphorus level of 150 PPM and organic matter content of 6%.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c. For livestock siting permit approval , collect and analyze soil samples meeting the requirements above in 1. b., excluding pastures, within 12 months of approval and revise the nutrient management plan accordingly. Until then, either option below maybe used: 1. Assume soil test phosphorus levels are greater than 100 ppm soil test P, OR 2. Use preliminary estimates analyzed by a certified DATCP laboratory with soil samples representing > 5 ac/sample.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
d. Identify all fields' name, boundary, acres, and location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
e. Use the field's previous year's legume credit and/or applications, predominant soil series, and realistic yield goals to determine the crop's nutrient application rates consistent with A2809 for ALL forms of N, P, and K .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
f. Make no winter applications of N and P fertilizer, except on grass pastures and winter grains.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
g. Document method used to determine application rates . Nutrients shall not runoff during or immediately after application.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
h. Identify in the plan that adequate acreage is available for manure produced and/or applied.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
i. Apply a single phosphorus (P) assessment using either the P Index or soil test P management strategy to all fields within a tract when fields receive manure or organic by-products during the crop rotation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
j. Use complete crop rotations and the field's critical soil series to determine that sheet and rill erosion estimates will not exceed tolerable soil loss (T) rates on fields that receive nutrients.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
k. Use contours; reduce tillage; adjust the crop rotation; or implement other practices to prevent ephemeral erosion ; and maintain perennial vegetative cover to prevent reoccurring gullies in areas of concentrated flow.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
l. Make no nutrient applications within 8' of irrigation wells or where vegetation is not removed .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
m. Make no nutrient applications within 50' of all direct conduits to groundwater , unless directly deposited by gleaning/pasturing animals or applied as starter fertilizer to corn.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

	Yes	No	NA
n. Make no untreated manure applications to areas within 1000' of a community potable water well or within 100' of a non-community potable water well (ex. church, school, restaurant) unless manure is treated to substantially eliminate pathogens.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
o. Make no manure applications to areas locally delineated by the Land Conservation Committee or in a conservation plan as areas contributing runoff to direct conduits to groundwater unless manure is substantially buried within 24 hours of application.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Make no applications of late summer or fall commercial N fertilizer to the following areas UNLESS needed for establishment of fall seeded crops OR to meet A2809 with a blended commercial fertilizer. Commercial fertilizer N applications shall not exceed 36 lbs. N/acre on: <ul style="list-style-type: none"> • Sites vulnerable to N leaching PRW Soils (P=high permeability, R= bedrock < 20 inches, or W= wet < 12 inches to apparent water table); • Soils with depths of 5 feet or less to bedrock; • Area within 1,000 feet of a community potable water well. On P soils, when commercial N is applied for full season crops in spring and summer , follow A2809 and apply one of the following: <ol style="list-style-type: none"> 1. A split or delayed N application to apply a majority of crop N requirement after crop establishment. 2. Use a nitrification inhibitor with ammonium forms of N. 3. Use slow and controlled release fertilizers for a majority of the crop N requirement applied near the time of planting. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Limit manure applications in late summer or fall using the lesser of A2809 or the following 590 rates on PRW Soils . <u>Use ≤ 120 lbs. available N/acre on:</u> P and R soils on <i>all crops, except annual crops</i>. Additionally, manure with ≤ 4% dry matter (DM) wait until after soil temp. < 50°F or Oct. 1, and use either a nitrification inhibitor OR surface apply and do not incorporate for at least 3 days. W soils or combo. W soils on <i>all crops</i>. Additionally, manure with ≤ 4% DM on <i>all crops</i> use at least one of the following: <ol style="list-style-type: none"> 1. Use a nitrification inhibitor; 2. Apply on an established cover crop, an overwintering annual, or perennial crop; 3. Establish a cover crop within 14 days of application; 4. Surface apply & don't incorporate for at least 3 days; 5. Wait until after soil temp. < 50°F or Oct. 1. <u>Use ≤ 90 lbs. available N/acre on:</u> P and R soils on <i>annual crops</i> wait until after soil temp. < 50°F or Oct. 1. Additionally, manure with ≤ 4% DM use either a nitrification inhibitor OR surface apply and do not incorporate for at least 3 days. W soils or combination W soils receiving manure with ≤ 4% DM on <i>all crops</i> .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Use at least one of the following practices on non-frozen soils for all nutrient applications within Surface Water Quality Management Area (SWQMA) = 1000' of lakes/ponds or 300' of rivers: <ol style="list-style-type: none"> 1. Maintain > 30% cover after nutrient application; 2. Effective incorporation within 72 hours of application; 3. Establish crops prior to, at, or promptly following application; 4. Install/maintain vegetative buffers or filter strips; 5. Have at least 3 consecutive years no till for applications to fields with < 30% residue (silage) and apply nutrients within 7 days of planting. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Limit mechanical applications to 12,000 gals/acre of unincorporated liquid manure or organic by-products with 11% or less dry matter where subsurface drainage is present OR within SWQMA . Wait a minimum of 7 days between sequential applications AND use one or more of the practice options on non-frozen soils listed in 1.r.1. through 1.r.5.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. When frozen or snow-covered soils prevent effective incorporation, does the plan follow these requirements for winter applications of all mechanically applied manure or organic by-products? *This section doesn't apply to winter gleaning/pasturing meeting 590 N and P requirements.*

If no manure is applied, check NA for 2.a. through 2.g..

	Yes	No	NA
a. Identify manure quantities planned to be spread during the winter , or the amount of manure generated in 14 days, whichever is greater. <i>For daily haul systems, assume 1/3 of the manure produced annually will need to be winter applied.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Identify manure storage capacity for each type applied and stacking capacity for manure ≥ 16% DM if permanent storage does not exist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Show on map and make no applications within the SWQMA .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Show on map and make no surface applications of liquid manure during February and March where Silurian dolomite is within 60 inches of the soils surface OR where DNR Well Compensation funds provided replacement water supplies for wells contaminated with livestock manure.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Show on map and make no applications of manure within 300 feet of direct conduits to groundwater .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Do not exceed the P removal of the following growing season's crop when applying manure. Liquid manure applications are limited to 7,000 g/acre . All winter manure applications are not to exceed 60 lbs. of P2O5/acre .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Make no applications of manure to fields with concentrated flow channels unless using two of the following: <ol style="list-style-type: none"> 1. Contour buffer strips or contour strip cropping; 2. Leave all crop residue and no fall tillage; 3. Apply manure in intermittent strips on no more than 50% of field; 4. Apply manure on no more than 25% of the field waiting a minimum of 14 days between applications; 5. Reduce manure app. rate to 3,500 gal. or 30 lbs. P2O5, whichever is less; 6. No manure application within 200 feet of all concentrated flow channels; 7. Fall tillage is on the contour and slopes are lower than 6%. Make no applications to slopes greater than 6% (soil map units with C, D, E, and F slopes) unless the plan documents that no other accessible fields are available for winter spreading AND two of the options 2.g.1. through 2.g.5. are used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the plan represented by the answers on this checklist complies with Wisconsin's NRCS 2015-590 NM Standard or is otherwise noted.

Joe Planner		10/1/2018	
Qualified NM planner signature	NAICC-Certified Professional Crop Consultant, ASA-Certified Crop Adviser, or SSSA-Soil Scientist	Date	
NA		Date	Signature if reviewed for quality assurance
Qualified NM farmer-planner or Authorized farm operator signature receiving and understanding the plan		Date	Date

COST-SHARE CONTRACT NO.: 2018-1



SOIL AND WATER RESOURCE MANAGEMENT GRANT PROGRAM Sec. 92.14, Wis. Stats

COST-SHARE CONTRACT

(DATCP approval required for cost-share amounts over \$50,000)

This contract is made and entered into by and between Century County Land Conservation Committee, and landowner(s) Smith George & Gina Smith and grant recipient(s) Gregg & Sylvia Wow. This contract is complete and valid as of the date signed by the county representative.

In consideration of the terms and conditions herein, the parties agree to this contract as set forth in the following Sections 1, 2, and 3, and any addenda that are annexed and made a part hereof.

NOTE 1: It is not necessary to notarize signatures unless this contract will be recorded. If there are additional landowners or any grant recipients, check here [X] and attach Exhibit A1. NOTE 2: Only properly authorized person(s) can sign in a representative capacity and must sign in such capacity if the landowner is a corporation, trust, estate, partnership, limited partnership, or limited liability company.

Recording Area

Agency Name & Return Address

Parcel Identification Number

GEORGE SMITH 5/14/18 LANDOWNER/REPRESENTATIVE DATE PRINT OR TYPE NAME: George Smith

GINA SMITH 5/14/18 LANDOWNER/REPRESENTATIVE DATE PRINT OR TYPE NAME: Gina Smith

Notary Public section for George Smith, State of Wisconsin, County, signed on 5/14/18.

Notary Public section for Gina Smith, State of Wisconsin, County, signed on 5/14/18.

LARRY DOWN 5/14/18 SIGNATURE OF COUNTY REPRESENTATIVE DATE PRINT OR TYPE NAME: Larry Down

Notary Public section for Larry Down, State of Wisconsin, County, signed on 5/14/18.

No notarization required since the contract will not be recorded

This document was drafted by the Wisconsin Department of Agriculture, Trade and Consumer Protection.

Personal information you provide may be used for purposes other than that for which it was originally collected (Sec. 15.04(1) (m), Wis. Stats.)

A. The landowner/grant recipient agrees:

1. To install and maintain cost-shared practice(s) listed in Section 3, consistent with the plans and specifications referenced in Section 3, during periods identified in Section 3.
2. To make all payments for which the landowner/grant recipient (hereinafter referred to as "landowner") is obligated under this contract, as specified in Section 3. Landowners are responsible for all payments for state or local administrative permit fees.
3. To provide the county with evidence of payment, as applicable, for services, supplies, and practices performed or installed pursuant to this contract. Proof of payment may be in the form of a statement or invoice, or receipts or cancelled checks with the related vendor contract. For services provided by the landowner, the landowner shall submit a detailed invoice or cost-estimate for those services.
4. To maintain the cost-shared practice for at least 10 years from the date of installation, except for these "soft" practices: contour farming, cover and green manure crop, nutrient management, pest management, residue management, and strip-cropping. Soft practices must be maintained for each year cost-share funds are provided, as specified in Section 3. Extended maintenance periods apply if land is taken out of production for more than 10 years, as specified in Section 3.
5. To operate and maintain each cost-shared practice for the required maintenance period following the certification of installation or replace it with an equally effective practice. To refrain, during the maintenance period, from actions that may reduce a practice's effectiveness, or result in water quality problems. The landowner agrees to follow an operation and maintenance (O&M) plan or other maintenance requirements including those in ATCP 50.62, Wis. Admin. Code. All nutrient management plans must comply with s. ATCP 50.04(3), Wis. Admin. Code.
6. To repay cost-share funds immediately, upon demand by the county, if the landowner fails to operate and maintain the cost-shared practice according to the contract. Repayment of grant funds shall not be required if a practice(s) is rendered ineffective during the required maintenance period due to circumstances beyond the control of the landowner.
7. To the recording of this contract, including the legal description of the subject property, with the deed to the subject property, if cost-sharing exceeds \$14,000 unless this contract cost-shares only practices listed in s. ATCP 50.08 (5) (b). This contract shall be recorded before the county makes any cost-share payment to the landowner. Upon recording, this contract constitutes a covenant running with the land described in Section 1B, and is binding on subsequent owners, heirs, executors, administrators, successors, trustees, and assigns, and users of the land for the period set forth in Section 3.
8. To comply with (i) the performance standards, prohibitions, conservation practices and technical standards under s. 281.16, Stats., (ii) plans approved under ss. 92.14, 92.15 (1985 Stats.), 92.10 and 281.65, Stats., and (iii) the practices necessary to meet the requirements of this contract, and to continue such compliance after the term of this contract, without further cost-sharing, if the landowner has received cost-sharing for compliance at least equal to the cost-sharing required under s. ATCP 50.08, Wis. Admin. Code. There is no requirement for continuing compliance for land that is taken out of production unless cost-sharing is provided.
9. To acknowledge receipt of a notice provided by the county explaining continuing compliance requirements arising out of the installation of specific cost-shared practices. (Initial here gs, gs, GW, SW.)
10. Not to discriminate against contractors because of age, race, religion, color, handicap, gender, physical condition, developmental disability, or national origin, in the performance of responsibilities under this contract.
11. To make any changes to this contract, including changes in project components and costs, according to the procedures set forth in Section 2.C.3.
12. To the county's right to stop work, or withhold cost-share grant funds, if it is found that the landowner, grant recipient, or construction contractor in their employ has violated ch. 92, Wis. Stats., ch. ATCP 50, Wis. Admin. Code, or has breached this contract.

Landowner Initials	Date	Spouse Initials	Date	Grant Recipient Initials	Date	Spouse Initials	Date	County Reps. Initials	Date
<u>gs</u>	5/14/18	<u>gs</u>	5/14/18	<u>GW</u>	5/14/18	<u>SW</u>	5/14/18	<u>LD</u>	5/14/18

B. The county agency agrees:

1. To enter this cost-share contract only after the Land Conservation Committee has authorized the cost-sharing of this project.
2. To provide technical assistance for the design, construction, and installation of cost-shared practice(s) according to applicable standards in ch. ATCP 50, Wis. Admin. Code. The county agrees to provide written notice, when applicable, to inform each landowner and grant recipient of the full ramifications of a cost-share contract, including future compliance obligations. The county further agrees to ensure that cost-shared practices are maintained as required in II. A. 4 by securing O&M plans and performing site checks as needed.
3. To use the most cost-effective methods to address the water quality concerns of this project, and apply cost containment procedures, consistent with ch. ATCP 50, Wis. Admin. Code, when estimating and paying for cost-shared practice(s).
4. To provide cost-share funds to the landowner, in the amounts specified in Section 3 and any amendments, upon proof that (i) the landowner has made all payments for which the landowner is responsible under the contract, (ii) the practice(s) are designed and installed according to standards in ch. ATCP 50, Wis. Admin. Code and this contract, including compliance with applicable construction site erosion control standards, and (iii) nutrient management plans comply with s. ATCP 50.04(3) Wis. Admin. Code. The county may make payments to third parties as provided in s. ATCP 50.40(13), Wis. Admin. Code.
5. To collect and retain all contract-related documents regarding operation and maintenance, proof of certification of design and installation, change orders, receipts and payments, and other referenced materials for a minimum of three years after making the last cost-share payment to the landowner, or for the duration of the maintenance period of this contract, whichever is longer. Records may be retained longer to demonstrate that a landowner meets the cost-sharing exemption under s. ATCP 50.08(5), Wis. Admin Code. Payment records from the landowner and county must provide proof of payment in full for all cost-shared practices installed. Copies of records shall be made available to DATCP upon request.
6. To record this contract, including the legal description of the subject property, with the deed to the subject property, as required under Section 2.A.7. Contracts may be recorded if not required under Section 2.A.7.
7. To coordinate eligibility for DATCP cost-share funding, and to follow required reimbursement procedures to facilitate timely cost-share payment(s) to the landowner, including the submission of certification forms to DATCP documenting that cost-shared practice(s) have been properly installed in accordance with this contract and paid for.

C. General conditions of the contract

1. State cost-share reimbursement amounts in Section 3 are contingent on receiving DATCP funding. The county may cancel this contract, in whole or in part, due to non-availability of DATCP funds. A county is responsible for contract grant amounts when the county makes cost-share commitments beyond the amount of its DATCP annual allocation or the county fails to obtain DATCP approval required under 2.C.2.
2. Written approval from DATCP shall be obtained before this contract is executed or amended if the DATCP cost-share amount exceeds \$50,000, and such approval shall be attached to, and made part of, this contract.
3. This contract may be amended, by mutual written agreement of the parties, during the installation or maintenance periods, if the proposed changes will provide equal or greater control of water pollution. For any changes in practice components or costs, the county will determine eligibility and whether to approve such changes. Counties must use a "Cost-Share Contract Change Order" form (ARM-LR-166) for changes prior to or during the installation and maintenance periods. Except as otherwise provided in the "Change Order" form, any completed "Change Order" form must be attached to, and made part of, this contract. Changes to this contract that increase the DATCP cost-share amount over \$14,000 or \$50,000 are subject to requirements in Sections 2.A.7., regarding recording and 2.C.2., regarding DATCP approval, respectively.
4. This contract is void if, prior to installation, the county determines that due to a material change in circumstances the proposed practices will not provide cost-effective water quality benefits.

Landowner Initials	Date	Spouse Initials	Date	Grant Recipient Initials	Date	Spouse Initials	Date	County Reps. Initials	Date
gs	5/14/18	gs	5/14/18	GW	5/14/18	SW	5/14/18	LD	5/14/18

SECTION 3. PRACTICES, COST, COST-SHARE AMOUNTS, AND INSTALLATION SCHEDULE **PAGE 5 of 5**

The parties agree to the following related to the conservation practices, technical design and specifications, eligible costs, cost-share rates and amounts, and rate set forth below.

Name of Person Preparing Technical Design: Joe Planner Representing: (COUNTY OR PRIVATE ENGINEERING FIRM) Private Sector Co-op	Technical Standards Used in the Design: (LIST NAME AND DATE OF NRCS, DNR OR OTHER STANDARDS EMPLOYED IN THE DESIGN)	USE OF THE 3 BOXES BELOW IS OPTIONAL	
		REPRESENTING:	DATE OF APPROVAL:
		AMOUNT OF COST-SHARE CONTRACT APPROVED: \$	

*	Cost-Shared Item Description ss. ATCP 50.62 to 50.98, 50.40 (15) & (18), & 50.08 (3) and (4)	Yrs of CS**	Quantity (Use Standard Units)	Unit Cost or Flat Rate \$	Estimated Total Cost \$	COST-SHARE RATE			ESTIMATED COST-SHARE AMOUNTS		
						State %***	Grantee %	County/other %	DATCP \$	Grantee \$	County/other \$
<input type="checkbox"/>	50.78 Nutrient Management	4	150 acres	\$10 per ac	\$6,000	100			\$6,000		
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
<input type="checkbox"/>											
TOTALS					\$6,000				\$6,000		

* Must check if the 50% maximum rate applies based on the installation of a practice after January 1, 2014 under one of these two conditions:
 a. The practice is installed on land owned by a local governments
 b. Cost-sharing is provided for access roads (ATCP 50.65) , roof runoff system (ATCP 50.85), stream bank or shoreline protection (ATCP 50.88), stream crossing (s. ATCP 50.885), or wetland development or restoration (ATCP 50.98) and the practice does not implement a farm performance standard.
 ** Enter the number of years the practice is cost-shared only if the contract provides for (a) more than one year of cost-sharing for soft practices (contour farming, cover and green manure crop, nutrient management, pest management, residue management, and strip-cropping), (b) land taken out of production for more than one year, or (c) CREP equivalent payments for riparian land taken out of production. For "soft practice" payments, the landowner receives the full contract amount after the practice is certified, and has a contractual obligation to maintain the practice for the number of years cost-shared. For "land out of production" payments under ATCP 50.08(3) (d), the landowner receives the sum of the landowner's annual cost for the period specified in the contract. A landowner's annual cost equals the number of affected acres multiplied by the per-acre weighted average soil rental rate in the county on the date of the cost-share contract. For CREP equivalent payments authorized under ATCP 50.08(4), the landowner receives an amount equal to the amount that would be offered under the CREP program if the affected lands were enrolled in that program. To receive a CREP- equivalent payment, a landowner must keep riparian land out of production for 15 years, or in perpetuity, and must agree to contract terms similar to those imposed by the CREP program. Insert "P" if the land is taken out of production in perpetuity. Cost-share practices must be operated and maintained in accordance with O&M plans and other requirements that may apply
 *** May exceed 70 percent only if the farm landowner qualifies for economic hardship.

Landowner Initials <i>gs</i>	Date <i>5/14/18</i>	Spouse Initials <i>gs</i>	Date <i>5/14/18</i>	Grant Recipient Initials <i>GW</i>	Date <i>5/14/18</i>	Spouse Initials <i>SW</i>	Date <i>5/14/18</i>	County Rep. Initials <i>LD</i>	Date <i>5/14/18</i>
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Exhibit A1

**ACKNOWLEDGEMENT
ADDITIONAL LANDOWNERS AND GRANT RECIPIENTS**

COST-SHARE CONTRACT NO.
2018-1

NOTE 1: It is not necessary to notarize these signatures unless this contract will be recorded. Strike titles that do not apply and insert "not applicable" for each line not completed.

NOTE 2: Only properly authorized person(s) can sign in a representative capacity and must sign in such capacity if the landowner is a corporation, trust, estate, partnership, limited partnership, or limited liability company.

Greg Wow 5/14/2018

**Signature of landowner/grant recipient/
authorized representative** **Date**
Print Name: Gregg Wow

Sylvia Wow 5/14/2018

Signature of spouse **Date**
Print Name: Sylvia Wow

State of Wisconsin)
) ss.
____ County)

This instrument was acknowledged before me on _____, 20
(date)

by _____
[name of person(s)]

as _____
(representative's position or type of authority, if applicable)

for _____.
(name of entity on behalf of whom instrument was executed, if applicable)

SIGNATURE
PRINT NAME: _____
Notary Public, State of Wisconsin
My commission expires _____ (is permanent).

**Signature of landowner/grant recipient/
authorized representative** **Date**
Print Name: _____

Signature of spouse **Date**
Print Name: _____

State of Wisconsin)
) ss.
____ County)

This instrument was acknowledged before me on _____, 20
(date)

by _____
[name of person(s)]

as _____
(representative's position or type of authority, if applicable)

for _____.
(name of entity on behalf of whom instrument was executed, if applicable)

SIGNATURE
PRINT NAME: _____
Notary Public, State of Wisconsin
My commission expires _____ (is permanent).

This document was drafted by the Wisconsin Department of Agriculture, Trade and Consumer Protection.

This document must be attached to the cost-share contract and must be recorded when required



Cost-Share Contract Change Order

(Section 92.14, Wis. Stats.; s. ATPC 50.40, Wis. Admin. Code)

Use this form to document each change order, which becomes part of the cost-share contract listed below. This also should be used to track cumulative changes made in cost-sharing and the units cost-shared. If more than two change orders are prepared, combine prior change orders and enter the numbers under columns F and G, and then complete columns H and I to reflect the most current change order. If the amount in column J exceeds \$14,000, s. ATPC 50.40 (14) requires that the cost-share contract and this form be recorded. If the amount in column J exceeds \$50,000, s. ATPC 50.40(8) requires DATCP's written approval of the project.

Change Order Number		1								
COUNTY		COST-SHARE CONTRACT NUMBER			LANDOWNER'S NAME			COST-SHARE RECIPIENT'S NAME		
Century		2018-1			Smith			Wow		
A	B	C	D	E	F	G	H	I	J	K
Practice Name and Code	Unit of Measurement	Practice Status (Modified, Deleted, New)	Original DATCP Cost-Share Amount	Original Quantity in Units	1st Change Order Change in DATCP Cost-Sharing	1st Change Order Change in Units	2nd Change Order Change in DATCP Cost-Sharing	2nd Change Order Change in Units	Adjusted Cost-Sharing (original + changes)	Adjusted Unit Amount (original + changes)
50.78 Nutrient mgmt (2015 NRCS Standard)	Acres	Modified	\$ 6,000.00	150.00	\$ 2,000.00	50.00			\$ 8,000.00	200.00
	#N/A								\$ -	0.00
	#N/A								\$ -	0.00
	#N/A								\$ -	0.00
	#N/A								\$ -	0.00
Total Adjustments to Cost-Sharing									\$	8,000.00

Type name to electronically sign

Provide parties a copy but no signature needed

By electronically signing and dating this form, the county, through its authorized representative, certifies that the information provided in this form is a complete and accurate record of changes to the above-referenced cost-share contract, that each landowner or cost-share recipient who signed the cost-share contract has consented to the changes documented on this form, and that each landowner or cost-share recipient has received a copy of this form documenting the changes in cost-sharing and units installed. The county further agrees to retain this and other records required under s. ATPC 50.34 (7), and provide DATCP electronic copies of these records if requested.

TYPE NAME TO ELECTRONICALLY SIGN

Larry Down

TITLE OF COUNTY REPRESENTATIVE

County Conservationist

DATE

9/15/2018