

# Cedar Creek Farmers

## *Improving Land for Cleaner Waters*

### 2020 Practice Incentive Contract & Payment Form

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Practice Location/Description: Township: \_\_\_\_\_, Section(s): \_\_\_\_\_

Conservation Practice(s)	Quantity	PRACTICE INCENTIVES		
		Payment Rate	Payment Amount	Maximum Payment

**Payment Total: \$** \_\_\_\_\_ (lesser of amount or maximum from above)

**Terms & Conditions:**

I, \_\_\_\_\_ (signature), will install the above listed practices and request the incentive payment as indicated above. I understand and agree to the following conditions as they relate to cover crops:

1. The practice has been timely installed to provide substantial growth or ground cover and provide the intended benefit.
2. The practice will not be removed or otherwise disturbed/destroyed prior to its intended purpose and projected lifespan.
3. The harvesting of cover crops is allowed the following growing season.  
(provided it is only used for animal feed)

**Signatures of Approval:**

\_\_\_\_\_  
Al Schmidt  
Cedar Creek Farmers Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
Paul Sebo  
Washington Co. Land & Water Conservation

\_\_\_\_\_  
Date

Process Payment Approval:	
Initials	Date
Initials	Date

Date Paid: \_\_\_\_\_ Initials: \_\_\_\_\_