



Clean Water Diversion Nutrient Management Plan

Name	
Project Address (with fire number)	
Legal Address (Twp., Lot, Con.)	
Predominant Soil Type	
# of acres farmed (owned & rented)	

Clean Water Diversion

Distance of present storage or yard from:

Well (m) _____ Watercourse (m) _____ Field Tiles (m) _____

Number and type of livestock: _____

Describe the present situation and how it impacts surface and/or ground water quality: _____

Please indicate the proposed clean water diversion project to be installed:

- Eavestroughs that direct water away from exercise yards and manure storage areas
- Berm or ditch that directs water away from exercise yards and manure storage areas
- Roof on exercise yards
- Any other permanent technique to keep rain or snow from becoming contaminated by manure, or adding to the volume of contaminated runoff.

Estimated Cost: \$ _____

Site Plan: Provide a sketch or aerial photograph of the proposed project site showing slope of the fields, cropping practices, erosion problems, tile drains, catchbasins and watercourses as well as the location of the proposed structures. Include any other information that you feel is important.

Nutrient Management Plan

Indicate who will develop the nutrient management plan for your farm:

Crop Consultant or Self

Estimated Cost: \$ _____

Other Cost Share Funding

Proposed funding from other sources (i.e. Federal, Community/Conservation Group) – confirmed or conditional (i.e., list name of organization and anticipated or in-kind contribution):

Organization	Funding
	\$
	\$

Terms and Conditions

- 1) I/we understand that the information provided within this application is collected by the Grand River Conservation Authority (GRCA) under the authority of the Conservation Authorities Act, R.S.O. 1990, c.27 for the sole purpose of project administration. This information will be used only by the Rural Water Quality Program and its funding partners. Questions regarding the collection of this information should be directed to Tracey Ryan, Manager of Environmental Education and Restoration, GRCA, 400 Clyde Road, Box 729, Cambridge, Ontario, N1R 5W6, Telephone 519-621-2761.
- 2) I/we understand that I/we are responsible for reporting any grant income to Canada Revenue Agency.
- 3) I/we also understand that failure to comply with all the program requirements may delay processing of the application or render me/us ineligible for financial assistance under the Rural Water Quality Program.
- 4) I/we understand that I/we will be responsible for ensuring the technical and structural adequacy and legal requirements of this project.

Declarations

- 1) I/we have read and understood the terms and conditions outlined above and certify that the information contained in this application and any supporting documentation is true and complete to the best of my/our knowledge.
- 2) I/we have or will have a verified Ontario Environmental Farm Plan (EFP).
- 3) I am able to claim an HST refund.

Signature	
Name – Please Print	Date

Should you require this application in an alternate format, please contact the GRCA.