



Dufferin - Cover Crops

Name		
Mailing Address		
Project Address (with fire number)		
Project Legal Address: Township	Lot	Con
Home Number	Cell Number	
Email		

Cover Crops

Field 1	# acres	Field 2	# acres
Soil Type	_____	Soil Type	_____
	_____		_____
Year	Crop Rotation	Year	Crop Rotation
	Cover Crop (if applicable)		Cover Crop (if applicable)
2017	_____	2017	_____
2018	_____	2018	_____
2019	_____	2019	_____
2020	_____	2020	_____

Check all that apply:

- Field 1 borders a watercourse
- Field 1 borders a wetland
- Field 1 is systematically tiled

Check all that apply:

- Field 2 borders a watercourse
- Field 2 borders a wetland
- Field 2 is systematically tiled

	Field 1	Field 2
When and how will the cover crop be destroyed?		
Tillage method used (e.g., soil saver, no till)		
Width of buffer along watercourse or wetland (if applicable)		
Is there an existing erosion issue? Please describe and list any other methods you employ to address erosion.		

Please attach additional information if applying for additional fields.

Site Plan: Provide a sketch or aerial photograph (e.g., GoogleMap) of the proposed project site(s) showing slope of the fields, cropping practices, erosion problems, tile drains (mains), catchbasins, wetlands and watercourses. Include any other information that you feel is important.



The maximum acreage is 40 acres per applicant. Only cover crops used exclusively for cover are eligible for grants. The cover crop will be verified by program staff before spring planting to ensure that it is providing at least 50% residue.

Total acreage for operation _____ acres

Total acres of cover crops grown _____ acres

Total acres enrolled in program _____ acres

Estimated Incentive = \$40/acre x enrolled acres = \$ _____

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 Environment 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 deemed appropriate Ontario Environmental Farm Plan (EFP).

Signature	
Name – Please Print	Date

Should you require this application in an alternate format, please contact the Grand River Conservation Authority.