

SECTION 2 – Application for Assistance

Please submit completed application, with all support documentation to the VSWCD at one of the following:

Mailing address: PO Box 170, Belen, NM 87002

Email: AssistancePrograms@ValenciaSWCD.org

In-person drop-off: Whitfield Wildlife Conservation Area, 2424 Hwy 47, Belen, NM 87002

If you have any questions, please contact our office in person, by phone at 505-864-8914 or by email at AssistancePrograms@ValenciaSWCD.org.

Name of Applicant: _____ Date Submitted to VSWCD: _____

1) Phone Number: _____

2) Email: _____

3) Mailing address of Applicant: _____

4) What do you want to accomplish? What are your goals? (Please see Conservation Practices Ranking Sheet) * *VSWCD also encourages attaching drawings, designs or maps to help describe the project.*

5) Are you applying as an individual or as part of a group? Yes No

* If applying as a group, describe the group? _____

6) Are you the Landowner or Lessee? _____

** If you are the lessee, please have the landowner sign their consent on the application below.*

7) Address or closest crossroads of land to which application applies (if different from mailing address). Only one application will be accepted per location per year.

8) What is the total area of project (acreage or square footage)? _____

9) How is the land currently being used?

10) Does the property have any legal obstacles? Yes or No. If any encumbrances exist, state what those are (e.g., severed water rights, liens for collateral, access, etc.).

11) Does the property have an existing Site Conservation Plan or design that have been created?
 Yes or No. **If Yes, please attach any plans or designs to this application.*

12) If awarded, are you willing to work with VSWCD to share the story of your conservation project with the public? Yes or No.
** If yes, you receive an extra 10 points, see Conservation Practices Ranking Sheet.*

13) Please let us know how you heard about this program. Check all that apply:
 word of mouth friend newsletter newspaper radio seminar or workshop
 other (explain) _____

14) Budget: Please estimate the costs. Attach separately if space provided is not enough.

Conservation Practice	Estimated Cost
<i>Example: Drip irrigation system for 1+ acre</i>	<i>Example: \$1,000</i>

* VSWCD requires that a soil test be done for all funded projects, unless recently tests. *****We perform these soil tests for FREE*****. Soil testing is a critical component for determining the success of your conservation practices.

Application Guidelines

- i. Applications must be submitted to VSWCD via email, mail or in person by **September 30th**.
- ii. Applicant can expect written notice of acceptance or rejection by the end of November. If an application is rejected, the applicant may resubmit it the following year. VSWCD reserves the right to partially fund projects.
- iii. VSWCD will work with applicant to finalize a site conservation plan and budget that may modify original cost estimates and will serve as the project agreement for the applicant's approval. Applicant's signature of the agreement is required prior to the start of any practice(s) or project (electronic signatures are acceptable).
- iv. By law, no work can commence on any reimbursement before an applicant has received approval and a notice to proceed. All receipts must be dated after the project's approval date.
- v. Projects are expected to be completed within the current VSWCD fiscal year, by **June 30th**. In extenuating circumstances, project extensions will be considered at the sole discretion of VSWCD. If an extension is not granted prior to June 30th, the agreement will become void and a new application may be submitted for the following fiscal year (which starts July 1st).
- vi. To receive reimbursements, awardees must:
 - Contact VSWCD prior to June 15th to complete a site visit to verify completion;
 - Provide receipts with full and detailed accounting of all expenses to the VSWCD. Any contractor invoicing is considered summarized, but all other receipts must be submitted with a summary page, including all charges and their explanation, for the project to be deemed completed;
 - Typically, an awardee will be reimbursed within 30 days of completing this process.
- vii. If an awardee is receiving more than \$600 in assistance, they must provide an IRS W-9 form to VSWCD upon receiving receipts (to be issued a subsequent 1099 miscellaneous income notice in the January following project completion). VSWCD is required to report this funding to the IRS.
- viii. Practices in the approved plan are expected to be established for a minimum of 5 years for conservation benefit. If the practice is not maintained on the land for 5 years due to reasons beyond the applicant's control (e.g., flood, fire) the VSWCD may consider requests for replacing a practice in the same location prior to 5 years if it provides restored or greater conservation benefit.
- ix. VSWCD will request site visits for all financial assistance requests, before start of project, following completion of the project, and during the life of the practice (depending on the scope of the project). Applicants must agree to site visits, or applications will not be approved. This VSWCD oversight of public funds allows evaluation of the effectiveness of financial assistance programs in supporting best conservation practices within the District.
- x. If applicant is awarded public funds for assistance the awardee's name and award amount is part of the public record.

Applicants must submit the following to be considered for an award (please check):

- A. _____ Completed and signed application.
- B. _____ A copy VSWCD mil-levy assessment (property tax bill) with proof of mil-levy payment.
- C. _____ Groups must provide a signed affidavit that the majority of the participants reside within the District, and at least one of the participants must provide proof of VSWCD mil-levy payment.
- D. _____ Drawings, Designs and/or Maps describing the project.
- E. _____ A budget with cost estimates per conservation practice.

Statement of Applicant: *I have reviewed and understand the guidelines and process for this application. My signature following is to attest to my review and understanding and is required for submittal of my request for assistance.*

Applicant Signature

Printed Full Name

Date

Landowner Signature (if applicable)

Printed Full Name

Date

Contact Information for the **Valencia Soil and Water Conservation District:**

Mailing Address:

PO Box 170
Belen, NM 87002

Main Office Address:

Whitfield Wildlife Conservation Area
2424 Hwy 47
Belen, NM 87002

AssistancePrograms@ValenciaSWCD.org
505-864-8914

