

## COVER CROP INCENTIVE PROGRAM 2023 APPLICATION

Name and Addre	<u>ess</u>		
		Telephone#	
		Email	
– or please contac	ct the office for		, <u>, , , , , , , , , , , , , , , , , , </u>
		EAGE APPLICATIONS SHOULD	
<u>List farms</u>	for consideration	on (Eligible acres will be based on n	umber of applicants)
1 Farm name:		Tract #:	
		11400111	
field#	acres	current crop	Tier
field#	acres	current crop	Tier
field#	acres	current crop	Tier
field#	acres —	current crop	
		ible acres will be based on number of the first tract #:	
location/address	 S:		
field#	acres	current crop	Tier
field#		current crop	
field#		current crop	
		current crop	
			a 44
List farms for cons	sideration (Elig	ible acres will be based on number	of applicants)
3. Farm name:		Tract #:	
location/address	s:		
field#		current crop	Tier
field#	acres	current crop	Tier
field#	acres	current crop	Tier
field#	acres	current crop	Tier

\*\*If you need more space, attach a separate sheet with required information

## Tier 1 Acreage Total (August 1 - September 15): Tier 2 Acreage Total (September 16 – October 30): Tier 3 Acreage Total (After August 1st): Additional Information How will cover crop be planted? Broadcast Drilled Will any type of tillage be used to plant cover crop? If yes, what type? \_\_\_\_ Watershed (if known) Do you have a Chapter 102 Agricultural Erosion and Sediment Control Plan or a Conservation Plan? Yes No Do you have a Chapter 91 Manure Management Plan or Nutrient Management Plan? Yes \_\_\_\_\_ No\_\_\_\_ Not Applicable\_\_\_\_\_ Have you used cover crops in the past? Yes No # of Years Will manure be applied to cover crop? Yes \_\_\_\_\_ No \_\_\_\_ If so, what type: Liquid \_\_\_\_\_Bedpack \_\_\_\_\_Litter Are you receiving any other funding for planting cover crops? Yes No If so, please explain and how many acres? I certify that I have read the requirements of the Perry County Conservation District Cover Crop Incentive Program and agree to be bound by these requirements if I am selected to receive funding under this program. In addition, I understand that the number of acres eligible for funding per farm will be based on total program acres applied for and available grant funding. Operator signature Date

Please refer to the Planting Timeline & Cover Crop Species Table attached to this application

## This list is provided as a suggestion for overall availability.

\* If there is a species you do not see listed here but would like to plant, please contact the Conservation District to discuss it, we are open to other varieties and species.

Planting Timeline & Cover Crop Species Table

Planting Date	Minimum Number of Species Needed	Suggested Species Available
August 1- September 15	WSG indicates species is a winter small grain.  MUST choose at least 5 species. Minimum of 50% and maximum of 80% of the total mix must be at least 1 winter small grain.	<ul> <li>Rapeseed</li> <li>Sunflower</li> <li>Buckwheat</li> <li>Oats</li> <li>Pea Varieties</li> <li>Millet Varieties</li> <li>Canola</li> <li>Flax</li> <li>Safflower</li> <li>Annual Medic</li> <li>Clover Varieties</li> <li>Woolypod Vetch</li> <li>Annual Ryegrass</li> <li>Forage Radish</li> <li>Turnips</li> <li>Hairy Vetch</li> <li>Sorghum/Sudan Grass</li> <li>Barley - WSG</li> <li>Rye - WSG</li> <li>Triticale - WSG</li> <li>Wheat - WSG</li> </ul>
September 16-October 30	Must choose at least 3 species. Minimum of 50% and maximum of 80% of the total mix must be at least 1 winter small grain.	<ul> <li>Annual Ryegrass</li> <li>Rapeseed</li> <li>Forage Radish</li> <li>Clover Varieties</li> <li>Winter Pea</li> <li>Beet Varieties</li> <li>Canola</li> <li>Flax</li> <li>Turnips</li> <li>Hairy Vetch</li> <li>Barley - WSG</li> <li>Rye -WSG</li> <li>Triticale - WSG</li> <li>Wheat - WSG</li> </ul>
After August 1	Choose at least 1 winter small grain.	<ul> <li>Barley – WSG (only if planted early)</li> <li>Rye - WSG</li> <li>Triticale - WSG</li> <li>Wheat</li> </ul>