APPLICATION

Please fill out the following information to apply to the Vermont Farmer Ecosystem Stewardship Program for supplemental state payments to support your Conservation Stewardship Program planning and enrollment:

| Please c | confirm which of the following applies: |
|-----------|---|
| | We have submitted/intend to submit a CSP application to USDA NRCS THIS SPRING (between October 21, 2022 and April 21, 2023) which includes our agricultural land. |
| | We submitted a CSP application to USDA NRCS LAST FALL (between August 1, 2022 and October |
| | 21, 2022) and have/are working towards a CSP contract on our agricultural land. We are currently enrolled in the CSP program and have an active CSP contract with USDA NRCS on our agricultural land. |
| | None of the above |
| Business | s Name (as listed with FSA): |
| Complet | te Business Mailing Address: |
| Business | s Contact Phone Number: |
| Legal Sig | gnatory of Business: |
| Signator | ry Email Address: |
| Alternat | tive Grant Contact(s): |

If individuals other than the signatory (e.g. family members, staff, conservation districts, TSPs) help your business complete grant paperwork, list their email(s) here