



Delaware Nutrient Management

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*****FOR DNMP USE*****	
Form/Control Number	_____
Claim for Payment is:	_____
Approved	_____ Disapproved _____
By	_____ Date _____

Agriculture Nutrient Management Plan COST ASSISTANCE APPLICATION

The purpose of the Delaware Agriculture Nutrient Management Plan Cost Assistance Program is to promote development of nutrient management plans (NMPs) according to standards established by the Delaware Nutrient Management Commission (DNMC). Nutrient management cost assistance funds are available for NMPs developed by private nutrient consultants.

<p>1. APPLICANT INFORMATION</p> <p>Applicant Name: _____</p> <p>Farm or Business Name: _____</p> <p>Mailing Address: _____</p> <p>_____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Certification number/Type: _____</p> <p><input type="checkbox"/> Nutrient Generator <input type="checkbox"/> Private Nutrient Handler</p> <p><input type="checkbox"/> Commercial Nutrient Handler</p>	<p>2. TYPE OF OPERATION</p> <p><input type="checkbox"/> Grain; _____</p> <p><input type="checkbox"/> Poultry; capacity _____</p> <p><input type="checkbox"/> Dairy; capacity _____</p> <p><input type="checkbox"/> Swine; capacity _____</p> <p><input type="checkbox"/> Feeder Cattle; capacity _____</p> <p><input type="checkbox"/> Other; _____</p>
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3. Acres of nutrient applied land to be included in nutrient management plan (within 10%): _____

	Year 1	Year 2	Year 3
4. Crop years covered by this nutrient management plan:	20 __	20 __	20 __

5. Indicate the number of crop years covered by the nutrient management plan: 3 Year Plan 1 Year Plan

6. If you are not certified, list the individual applying your nutrients: _____
 Certification type/number: _____

7. Nutrient consultant name: _____ Company: _____
 Address: _____ Certification number: _____
 _____ Phone: _____

8. The undersigned agrees to indemnify and hold harmless the Delaware Department of Agriculture and the Delaware Nutrient Management Commission (DNMC) from any liability resulting from the utilization of program funds. Failure to comply with the terms of the Delaware Agriculture Nutrient Management Plan Cost Assistance Program or the duplication of any other nutrient management plan funding program may result in exclusion from payment of claims and liability for returning the full amount of claims paid. Funds are dependent on allocation and priorities by the DNMC for any practical reason.

_____ Signature _____ Date

****Claim for payment or request for extension must be submitted by May 1st****