



Appl # \_\_\_\_\_  
Date Rec'd \_\_\_\_\_

**APPLICATION FOR COST SHARE ASSISTANCE**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ E-Mail Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell/Other): \_\_\_\_\_

Are you a resident of Gallatin County? \_\_\_\_\_ Length of residency in Gallatin County: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Landowner and/or lessee name, address, telephone (if other than applicant):

\_\_\_\_\_

**Project Information**

**Location:** \_\_\_ 1/4 , \_\_\_ 1/4 , \_\_\_ 1/4 , Section \_\_\_\_\_, Township \_\_\_\_\_, Range \_\_\_\_\_ Nearest Town \_\_\_\_\_

Total Acres of Property: \_\_\_\_\_ Acreage in Proposed Project: \_\_\_\_\_

Project Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Which natural resources will be benefited and how will they be benefited?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List other conservation measures that will be employed to complement the project:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Public Benefit:  benefits more than one person  provides fire protection  provides weed control  
 soil and water conservation  energy reduction

Does the project have local support from public organizations, rural groups or agencies? \_\_\_\_ Yes \_\_\_\_ No  
 If yes, who? (Also attach letters of recommendation, if any.)

Describe the consequences to public and private resources if this project is not funded.

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Describe any educational benefits or natural resource awareness this project may bring.

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**Proposed Practices (check all that apply):**

**Stream/Riparian/Irrigation**

- Streambank protection
- Bridge/culvert improvement
- Channel stabilization
- Spring development
- Riparian buffer strips
- Irrigation structure/diversion
- Fish screen or ladder
- Stock water pipeline
- Riparian fencing
- Other \_\_\_\_\_

**Urban**

- Gardening
- Native Landscaping
- Alternative energy
- Other \_\_\_\_\_

**Weed Management**

- Prescribed grazing
- Biological control
- Spraying
- Mowing/Re-seeding
- Professional services
- Other \_\_\_\_\_

**Forestry**

- Forest stand improvement
- Pest control
- Tree planting
- Wildfire rehabilitation
- Fuels reduction
- Other \_\_\_\_\_

**Pastures**

- Fencing
- Water improvement
- Filter strips
- Fertilizing
- Re-seeding native plants
- Trees/shrubbery
- Other \_\_\_\_\_

**Other**

- Wildlife habitat improvement
- Alternative Energy \_\_\_\_\_
- Fire protection
- Equipment \_\_\_\_\_

**COST OF PROJECT (cost breakdown per practice): Applicant MUST attach a detailed budget.**

Practice Description	Unit Amount	Cost per Unit	Total Cost
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____
Amount Requested from District \$ _____		Total Project Cost \$ _____	



Contribution from other sources: \$ \_\_\_\_\_

List other sources: \_\_\_\_\_

In-kind services/products (also list amounts): \_\_\_\_\_

\_\_\_\_\_

**SIGNATURE**

I (we) hereby declare that the information and all statements attached to this application are true, complete, and accurate to the best of my (our) knowledge.

Applicant(s) \_\_\_\_\_

Date \_\_\_\_\_

