### CONSERVATION PROGRAM CONTRACT

Participant	Program and Contract Number
<decision maker="" name="" participant=""></decision>	<contract program=""> <contract tier=""> <contract number=""></contract></contract></contract>
State and County	Fund Code
<contract contract="" county,="" state=""></contract>	<contract code="" fund=""></contract>
Watershed	This agreement is effective on the date signed by the
<watershed name=""></watershed>	Natural Resources Conservation Service approving official
	and extends through <expiration date="">.</expiration>

- The undersigned participants enter into this contract with the Natural Resources Conservation Service (NRCS) to
  implement and or maintain specific conservation practices, as set forth in the Conservation Plan Schedule of
  Operations (NRCS-CPA-1155), on the property as identified on the plan map. In consideration for the
  implementation and or maintenance of the practices, the NRCS will make payments to the participant(s) in the
  amount(s) described in the Schedule of Operations as outlined in the appendix.
- This agreement is comprised of this Conservation Program Contract form NRCS-CPA-1202, NRCS-CPA-1202
   Appendix; NRCS-CPA-1155 Plan Schedule of Operations and plan map which are fully incorporated by reference
   into this document and are binding upon the participant(s). The NRCS-CPA-1155 may be modified (NRCS-CPA 1156) upon agreement of NRCS and the participant and becomes a part of the contract when signed by the
   NRCS approval official.
- 3. The participant(s) agree: A) to implement and maintain conservation practices for the life of this agreement on the plan map in compliance with the plan or schedule of operations and in accordance with the standards, specifications, and other special program criteria obtained from the local field office of the NRCS;
  B) to forfeit further payments under this agreement and refund the United States, in amounts determined by (3 A) NRCS, payments received hereunder upon NRCS determination that participant(s) have violated the material terms of this agreement or accept such payment adjustments as NRCS may deem appropriate if NRCS decides that the participant's violation does not warrant termination of the agreement; and C) to forfeit all rights to further payments under the agreement and refund to the United States, in amounts determined by NRCS, payments received hereunder if the subject land is transferred to a non-participant during the term of this agreement, unless the third party agrees to assume this agreement, and (3 B) the NRCS consents to the modification.

## 4. CONTRACT PARTICIPANTS

Name, Address, Telephone	SSN or TAX ID if applicable			
<decision contract="" maker="" name="" participant=""></decision>	<decisionmaker contract="" id<="" participant="" ssn="" tax="" td=""></decisionmaker>			
<decision address="" contract="" maker="" participant=""></decision>				
<decision city,="" contract="" maker="" participant="" state,="" zip=""></decision>				
<decision contract="" maker="" participant="" telephone=""></decision>				
Signature	Payment Shares			
	<decision contract="" maker="" participant="" payment="" share=""></decision>			
Date				
Signature required for modifications ☐ yes ☐ no	Signature required for payments ☐ yes ☐ no			

# 5. CONTRACT OBLIGATIONS

20	20	20	20	20	20	20	20	20	20	Total
\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999
\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999	\$999,999
										\$450,000

#### 6. NRCS APPROVING OFFICIALS

Contract Approval	Contract Obligation
Date	Date

#### CONSERVATION PROGRAM CONTRACT

Participant	Program and Contract Number
<decision maker="" name="" participant=""></decision>	<contract program=""> <contract tier=""> <contract number=""></contract></contract></contract>

#### **OMB DISCLOSURE STATEMENT**

According to the Paper Work Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0578-0013. The time required to complete this information collection is estimated to average 0.69 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

#### PRIVACY ACT STATEMENT

The above statements are made in accordance with the Privacy Act of 1974 (U.S.C. 522a). Furnishing this information is voluntary; however, failure to furnish correct, complete information will result in the withholding or withdrawal of such technical or financial assistance. The information may be furnished to other USDA agencies, the Internal Revenue Service, the Department of Justice, or other state or federal law enforcement agencies, or in response to orders of a court, magistrate, or administrative tribunal.

#### NONDISCRIMINATION STATEMENT

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# **CONSERVATION PROGRAM CONTRACT**

Participant	Program and Contract Number			
<decision maker="" name="" participant=""></decision>	ontract program> <contract tier=""> <contract number=""></contract></contract>			
4. CONTRACT PARTICIPANTS (Continued)				
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<decision city,="" contract="" maker="" participant="" state,="" zip=""></decision>				
<decision contract="" maker="" participant="" telephone=""></decision>				
Signature	Payment Shares			
	<decision contract="" maker="" participant="" payment="" share=""></decision>			
Date				
Signature required for modifications ☐ yes ☐ no	Signature required for payments $\square$ yes $\square$ no			
Name, Address, Telephone	SSN or TAX ID if applicable			
<decision contract="" maker="" name="" participant=""></decision>	<decisionmaker contract="" id<="" participant="" ssn="" tax="" td=""></decisionmaker>			
<pre><decision address="" contract="" maker="" participant=""></decision></pre>				
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<pre><decision contract="" maker="" participant="" telephone=""></decision></pre>				
Signature	Payment Shares <decision contract="" maker="" participant="" payment="" share=""></decision>			
Date				
Signature required for modifications ☐ yes ☐ no	Signature required for payments ☐ yes ☐ no			
Name, Address, Telephone	SSN or TAX ID if applicable			
<decision contract="" maker="" name="" participant=""></decision>	<decisionmaker contract="" id<="" participant="" ssn="" tax="" td=""></decisionmaker>			
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<decision city,="" contract="" maker="" participant="" state,="" zip=""></decision>				
<decision contract="" maker="" participant="" telephone=""></decision>				
Signature	Payment Shares			
	<decision contract="" maker="" participant="" payment="" share=""></decision>			
Date				
Signature required for modifications	Signature required for payments ☐ yes ☐ no			
Name, Address, Telephone	SSN or TAX ID if applicable			
<decision contract="" maker="" name="" participant=""></decision>	<decisionmaker contract="" id<="" participant="" ssn="" tax="" td=""></decisionmaker>			
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<decision contract="" maker="" participant="" telephone=""></decision>				
Signature	Payment Shares			
	<decision contract="" maker="" participant="" payment="" share=""></decision>			
Date				
Signature required for modifications	Signature required for payments $\square$ yes $\square$ no			