

CONSERVATION PLAN OR SCHEDULE OF OPERATIONS

| | | | |
|--------------------------------|------------------|-----------------------------|-----------------|
| PARTICIPANT | COUNTY AND STATE | PROGRAM AND CONTRACT NUMBER | SUBACCOUNT |
| LAND UNITS OR LEGAL DESCRIPTON | WATERSHED | ACRES | EXPIRATION DATE |

Contract Item: _____ **Status:** _____

Fields:

| Contract Item | Planned Conservation Treatment | Planned Amount | Unit Cost | Cost Share Rate/ Method | Completion Schedule and Estimated Cost Share or Payment by Year | | | | | | | | | | |
|---------------|--------------------------------|----------------|-----------|-------------------------|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| | | | | | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | 20xx \$ | |
| | | | | | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ | 999,999 ¹ |

Notes: 1
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| | | | |
|---------------------------------|------------------|-----------------------------|-----------------|
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| LAND UNITS OR LEGAL DESCRIPTION | WATERSHED | ACRES | EXPIRATION DATE |

| Total Cost-Share or Payment by Year | | | | | | | | | | Total Contract Payment |
|-------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------------------|
| 20XX | 20XX | 20XX | 20XX | 20XX | 20XX | 20XX | 20XX | 20XX | 20XX | |
| \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 | \$999,999 |

NOTES: A. All items numbers on form NRCS-CPA-1155 must be carried out as part of this contract to prevent violation.
 B. When established, the conservation practices identified by the numbered items must be maintained by the participant at no cost to the government.
 C. All cost share rates are based on average cost (AC) with the following exceptions:
 AA = Actual cost not to exceed average cost; FR = Flat Rate; NC = Non cost-shared; AM = Actual cost not to exceed the specified maximum.
 D. By signing, the participant acknowledges receipt of this conservation plan including this form NRCS-CPA-1155 and agrees to comply with the terms and conditions here of.

| Certification of Participants | | | | | |
|-------------------------------|------|--------------------|------|--------------------|------|
| Signature | Date | Signature | Date | Signature | Date |
| <Participant name> | | <Participant name> | | <Participant name> | |

| Signatures of Reviewing Officials | | |
|-----------------------------------|---|-----------------------------------|
| NRCS Approving Official Signature | Reviewed by Conservation District Signature | Other Sponsoring Agency Signature |
| Date | Date | Date |
| | | |

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