

**South Dakota Tree Farm Management Plan Initiative
COST SHARE APPLICATION FORM**

Return forms to:
Parks Brigman (SD RC & F)
3305 West South St
Rapid City, SD, 57702
John.brigman@state.sd.us

Contract Number _____

Applicant Information

First Name _____ MI _____ Last _____

Company _____

Address _____

City _____ ST _____ ZIP+4 _____

Phone _____ e-mail _____

Location

County _____ QTR1 _____ QTR2 _____

SEC _____ TNSP _____ RNG _____

Acres Requested _____ Acres Approved _____

Estimate C/S Value _____ Agreement Expiration _____

The undersigned owner of private forestlands hereby requests cost-share assistance from the South Dakota Tree Farm Management Plan Initiative as administered by the South Dakota Tree Farm Committee and co-sponsored by the South Dakota State Forester and the Black Hills Forest Products Association. The owner acknowledges that the assistance provided is limited to the development of a forest management plan and enrollment in the South Dakota Tree Farm Program.

Upon completion of the development of a written forest management plan, owner agrees to provide the South Dakota Tree Farm Committee proof of expenses by submitting a copy of receipt, invoice, or other written document itemizing costs incurred. Owner agrees there will be no payment to the owner until such proof, along with a signed "Certificate of Completion" has been received by Tree Farm, and the practice has been certified complete by a certified Tree Farm Inspector. Owner hereby authorizes a certified Tree Farm Inspector to enter, after reasonable notice, at reasonable times, and in a reasonable manner, to review the adequacy of the Forest Management Plan developed under this cost share program.

Signature of Applicant _____ Date _____

Office Use Only

Approved C/S Value _____ Expiration Date _____

Approved by _____ Date Approved _____