



# AGRI-ENVIRONMENTAL INCENTIVE PROGRAM PROGRAM EXPENSE FORM

Name (Last, First)	Farm Name	
Mailing Address	City/Town	Postal Code
Phone	Fax	
Email		

**PLEASE CHECK OFF THE BOX FOR THE PROJECT(S) THAT YOU HAVE APPLIED, AND BEEN APPROVED FOR.**

- Off-setting the cost of building a pasture sprayer **or** of the purchase and use of a nozzle to spray headlands (up to \$500).
- Off-setting the rental charge for using the County's pasture sprayer (up to \$500).
- Off-setting the cost of identifying and decommissioning old water wells (up to \$2,000).
- Off-setting the cost of range and riparian health assessments conducted by Cows and Fish (up to \$1,000).

**DATE PROJECT WAS COMPLETED:** \_\_\_\_\_



**ACTUAL PROJECT EXPENSES:**

Please list all expenses required to complete this project (in-kind labour cannot be claimed)	Cost of expenses (please attach copies of all your receipts for this project)
<b>Total sum of expenses</b>	<b>\$</b>

**APPLICANT DECLARATION:**

I declare that:

- I am the applicant or am authorized to complete this application on behalf of the applicant.
- I have read, understand, and agree to signing this declaration with respect to all projects described and outlined in this application.
- I understand that funding for eligible expenses is subject to verification by Agricultural Services staff to ensure the project is complete.
- I understand that funding for the projects will be processed on a first-come, first-served basis, until funds are depleted in each calendar year.
- I certify that the information provided in this application is, to the best of my knowledge, complete, and true.

Equitable arrangement with landowner (select ONE of the following):

- I am the owner** of the land on which the project is to be implemented.
- I am not the owner** of the land on which the project is to be implemented; however, I have discussed the project with the person who owns the land, and have obtained permission to complete this project.

Name of landowner (if you are not the landowner): \_\_\_\_\_



The information collected on this form will be used to process your application. This information is collected under the authority of and is subject to the *Freedom of Information and Protection of Privacy Act*. Any questions about the collection, use or disclosure of this information can be directed to the public information officer, Rocky View County, 403-230-1401.

\_\_\_\_\_  
Applicant print name

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Rocky View County representative signature

\_\_\_\_\_  
Date

**SUBMIT COMPLETED EXPENSE FORM BY:**

**Mail**

Rocky View County – Agri-Environmental Incentive Program  
Attn: Agricultural Services  
262075 Rocky View Point  
Rocky View County, AB T4A 0X2

**Fax**

403-277-5977

**Email**

agservices@rockyview.ca

**OFFICE USE ONLY:**

This project was verified by \_\_\_\_\_ on \_\_\_\_\_,  
*Rocky View County employee* *day/month/year*

and it was confirmed that the applicant used the above expenses for the intended project as identified on page one. The applicant is approved to receive \$ \_\_\_\_\_ as a funding incentive for completing an Agri-Environmental project.

Date application received \_\_\_\_\_ Application number assigned \_\_\_\_\_

Approval to begin date \_\_\_\_\_ Approved by \_\_\_\_\_

Expense form approval date \_\_\_\_\_ Authorized amount to pay \_\_\_\_\_