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## Bazile Groundwater Management Area (BGMA) Chemigation Cost-Share Program

LIMITS: 1st Time Chemigator/Pivot

**<u>CONTRACT</u>**: 1 year term

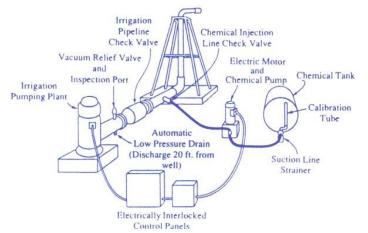
**ELIGIBLE:** Existing cropland within BGMA

**PAYMENT:** \$4.00/ Pivot irrigated acre

SIGNUP: April 1st

FORM: LCNRD 100

## ANTI-POLLUTION PROTECTION



## **PURPOSE**:

The purpose of the program is to encourage split applications of nitrogen fertilizer utilizing Chemigation equipment and approved nutrient management plan. Cooperators are asked to become certified as chemigation applicators, obtain the necessary equipment and permits. Following Deep Soil Testing, crop consultants will make recommendations on a nutrient management plan to guide the cooperators on necessary requirements to determine compliance. Approval must be made prior to May 31 to qualify.

## **VERIFICATION:**

Equipment, permits and inspections by LCNRD. (Chemigation Applicator Certification UNL Cooperative Extension and NDEQ). Nutrient management plan compliance determined by NRD. Payment to be made in fall following concurrence by both parties.

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	Арріі	-To Be Completed		Permi		
Please Type or Print Clearly		-10 Be Completed	By Applicant-		TELEPHONE	
NAME					()	
ADDRESS (STREET, RURAL ROUTE, OR B	KOX NO.)	I CITY	I STATE		ZIP CODE	
LEGAL DESCRIPTION OF INJECTION LOG	ATION:	1	l		COUNTY	
1/4 of	1/4, Sectio	on, Township _	,Range			
TYPE OF PERMIT (Check one)	MAKE FEE PAY	ABLE TO THE NRD		FINJECTION UNIT		□ Stationary
New (\$30)	Renew		y (\$100)	EXPIRATIO		- Stationary
List the names and estimat (Note: This information is r	ted amount equired on	of all chemicals that were all renewal permit applicat	used in the chem tions.)	igation syste	m in the pa	ast year.
Fertilizer Name or Formulation		Total Applied (pounds)	Pesticide Name			Total Applied (pounds)
Total Number of Assoc T	keeted at 7	'his Location -	Acres			
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