

Environmental Stewardship and Climate Change Producer Program Application Form: Category B – Manure and Livestock Facilities Management

Environmental Stewardship and Climate Change Program - Application Year 2018 - 2023

Personal information you provide on this form is collected under the authority of s.33 of the Freedom of Information and Protection of Privacy Act. The information is collected by AF to process, administer and manage your grant application for the Canadian Agricultural Partnership – Environmental Stewardship and Climate Change Program. Questions about the collection, use or disclosure of this information can be directed to: Canadian Agricultural Partnership Coordination and Program Policy Director at: 7000 113 Street NW, Edmonton AB T6H 5T6; Telephone (780) 422-9167; toll free dial 310-0000 followed by telephone number.

Please complete all portions of the application. For assistance with completing this application, please call 310-FARM (3276) to be put in contact with a support person.

Part 1: Applicant Information

Applicant Name: (Legal Name or Corporate Name) **ALL RECEIPTS, INVOICES, AND PROOF OF PAYMENTS MUST BE UNDER THIS NAME**

Primary Contact (first name / last name) (if different from above):

Mailing Address:	City/Town:	Prov: AB	Postal Code:
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Telephone Number: () ()	Cell Number: () ()	Fax: () ()	Email address:
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Municipality:	Legal Land Location of HOME YARD: QTR _____ - SEC _____ - TWP _____ - RGE _____ - MER _____
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- A copy of my Alberta Environmental Farm Plan (EFP) letter of completion or certificate is attached with this application
- I will submit a copy of my Alberta Environmental Farm Plan (EFP) letter of completion or certificate with my Reimbursement Claim Form

*Applications will be reviewed without a current EFP, however a current EFP is **required**, the EFP must be completed before the end of the project and a copy of the letter of completion or certificate must be submitted to be eligible for grant reimbursement.

Premises Location (LLD) for the project: QTR _____ - SEC _____ - TWP _____ - RGE _____ - MER _____	Premises ID Number for the project:
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Project Start Date: The date your application was received by the program **Project End Date:** _____

If your project is approved, eligible expenses incurred as of the date your application was received by the program will be considered for funding.

Describe your farming operation as it relates to your project by checking the appropriate boxes and indicate type and number of animals, or acres on your farm:

- oilseed and grain farming _____ acres
- other crop farming: (describe) _____ acres
- cattle ranching _____ Head
- dairy cattle and milk production _____ Head
- cattle feedlot &/or backgrounding operation _____ Head
- hog farming _____ Head
- poultry and egg farming _____ Head
- sheep and goat farming _____ Head
- other animal production: (describe) _____ Head

Cost Share: Cost shares will range from 30% up to 50%, with the specific cost share being determined at the time application is processed. Your application will be reviewed as outlined in s. 5.1 of the Program Terms and Conditions. If your application is approved, the minimum cost share you may receive towards your project will be 30%.

Part 2: Project Information

A. Identify the items that pertain to your project:

- Activity Code 201 – Engineering Investigation and/or Feasibility Assessment
- Activity Code 202 – Construction or upgrade of a surface water management system
- Activity Code 203 – Improved Manure Storage Facilities
- Activity Code 204 – Relocation of a Livestock Facility and Permanent Wintering Site or Confined Feeding Operation
- Activity Code 205 – Improved Land Application of Manure
- Activity Code 206 – Manure and Livestock Facility Management Strategies and/or Innovative Solutions

B. Where is the project site located?

- Native or undisturbed land
- Cultivated land/tame pasture
- Farmyard
- Municipal property
- Other: _____
- N/A

C. Permits, Approvals or Authorizations for the Project

- I have the proper permit from the Natural Resources Conservation Board (NRCB) in place for this project.
- I have contacted the NRCB about this project and the permit process has been started.
- I have not yet contacted the NRCB about this project.
- I do not need a permit from the NRCB for this project.

Part 2a: Identifying Environmental Risk – All Activity Codes

Manure and Livestock Facility Management Strategy or Innovative Solutions please fill out Part 2a only, if you have supplemental documentation for either code, please attach it with the completed application.

... Environmental risks may occur anywhere on your farmstead where water supplies are located and potential hazards exist. By understanding how your farmstead fits into the landscape, you can identify potential hazards, foresee possible pathways for those hazards to travel and predict where those hazards might end up. Factors that can be managed include water supply, storage locations of potential hazards and run-on and runoff control of surface waters.

A. Describe the details of your project

- Describe your current situation as it relates to the project
- Describe what you are changing to address the current situation
- Reason for pursuing the project and the environmental risk

B. Total acres impacted by your project: _____ acres.

C. Please check the type of receptor(s) (i.e. Water well, creek), or receiver(s) of the hazard (manure contamination). **A receptor is anything that has the potential to be affected by a hazard.**

Surface water (select all that apply):

- Lake
- Stream
- Pond
- River
- Wetland
- Slough
- Reservoir
- Irrigation Canal
- Dugout
- Other: _____

Groundwater (select all that apply)

- Well
- Spring
- Dugout
- Other: _____

Indicate distance from the source of manure (i.e. location of manure catch basin) to the nearest surface water or groundwater source identified above: _____ meters

D. Describe how the manure is moving to the receptor and the impact that the manure is having on the receptor. How does the hazard identified reach the waterbodies and/or environmental areas of concern? (I.e. Drifting, direct application, run-off, run-on, etc.)

E. Explain how the environmental risk will be reduced or eliminated through the completion of the project.

F. Explain the steps and activities that will need to occur to complete the project.

G. Does the current management of the manure impact nearby neighbours, or any surrounding public areas? **Public area** – any place that is generally open and accessible to people, roads, and provincial parks, including towns and villages”

- 0 – 100 meters
- 101 – 200 meters
- 201 – 400 meters
- 401 meters or greater
- Not applicable

H. How often is the site of the proposed activity being used as part of your farming operations?

- Unused
- Used Seasonally
- Used Year round

Answer the following questions if applying for funding under **Activity Code 201: Engineering Investigation and/or Feasibility Assessment**

Is the work being done to address/assess and existing facility or a facility that is to be developed?

- Existing facility
- New Facility (not yet developed)

Answer the following questions if applying for funding under **Activity Code: 203: Improved Manure Storage**

As part of your project, are you increasing the capacity of your storage? Yes No

If yes, answer the following:

Reason for increasing your storage:

Current storage capacity (m ³): _____	New storage capacity (m ³): _____
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**Answer the following questions if applying for funding under Activity Code: 203 and 204:
Improved Manure Storage & Relocation**

Please refer to the following link to 'Relocation of Livestock Facilities Planning Guide' for more information:

[http://agapps16.agric.gov.ab.ca/\\$Department/deptdocs.nsf/all/epw12912/\\$FILE/Relocation_of_Livestock_Facilities_Planning_Guide.pdf](http://agapps16.agric.gov.ab.ca/$Department/deptdocs.nsf/all/epw12912/$FILE/Relocation_of_Livestock_Facilities_Planning_Guide.pdf)

	<input type="checkbox"/> Existing Manure Storage or <input type="checkbox"/> Livestock Facility	<input type="checkbox"/> Proposed Manure Storage or <input type="checkbox"/> Livestock Facility
Legal land description	QTR____ SEC____ TWP____ RNG____ MER____	(if different) QTR____ SEC____ TWP____ RNG____ MER____
Estimate dimensions or land area covered	Length _____ Width _____ &/or _____ acres Depth _____	Length _____ Width _____ &/or _____ acres Depth _____
Describe the closest surface water body (examples: lake, creek, seasonal waterway, wetland, slough)		If it is the same as the old site, write "SAME".
How close is this surface water body to the facility?	_____ meters or _____ feet	_____ meters or _____ feet
Date existing facility was last used		N/A

A. List the project activities that you will hire a contractor for and the activities you will do on your own.

Hired contractor	Work to be done by applicant
Example: earthwork	Example: prep and lay concrete

B. What requirements will you have to build the new facility? (check all applicable)

- | | | |
|--|--|--|
| <input type="checkbox"/> will use an existing water source
<input type="checkbox"/> will reuse waterers
<input type="checkbox"/> will reuse feed bins or bunks
<input type="checkbox"/> have adequate power supply
<input type="checkbox"/> will use fence materials and gates have on-hand
<input type="checkbox"/> need to move dirt to establish grade or level site | <input type="checkbox"/> need a new water source
<input type="checkbox"/> new waterers
<input type="checkbox"/> new feeding area/system
<input type="checkbox"/> new power line/pole
<input type="checkbox"/> trench new water line
<input type="checkbox"/> trench electrical
<input type="checkbox"/> purchase new fence materials and gates | List any other requirements:
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____ |
|--|--|--|

Part 3: Aerial Photo or Sketch of your Project

Mandatory for all project types, except Activity Code 201, 205

Supply an Aerial photo or Sketch of your CURRENT Facility and NEW Facility. Current facility aerial must show the existing facility unchanged and the new facility aerial must show all the proposed changes. Clearing indicate on both maps the following information (as applicable):

- Water sources; such as a well or dugout
- All surface water bodies; such as creeks, sloughs or wetlands, seasonal drainage channels etc.
- Runoff patterns and natural drainage flow (shown with arrows)
- Direction of slope
- Location and dimensions of:
 - ditches, berms, culverts
 - manure storage facilities
 - barns and other livestock buildings
- Existing and new fence lines
- Gates, lights, shelters
- Anything else relevant to explaining your project

Remember to include:

- Standard map features (North arrow, scale and legend)
- Legal land description(s)

Municipal District / County Name	QUARTER	SECTION	TOWNSHIP	RANGE	MERIDIAN

Aerial photos can be attained using the Alberta Soil Information Viewer - <https://soil.agric.gov.ab.ca/agrasidviewer/>. If you require assistance attaining an aerial photo, please email CAP.ESandCCProgram@gov.ab.ca.

Part 4: Decommission Plans Activity Codes: 203 and 204

PLEASE NOTE: As you have identified the location of the old facility to be a risk to water quality due to manure accumulation, the decommissioning plan must NOT allow for any further manure build-up (e.g. holding/sorting pens)

A. Please explain your plan for the removal of infrastructure, re-establishment of permanent ground cover and clean-up.

B. What do you intend to use the land area of the old facility for once it is cleaned up?

Tips for Completing Part 5: Estimated Project Budget

- Any items or services you expect to receive an invoice, sales agreement, receipt or similar type of document should be included as an Estimated Expense.
- All project activities (labour, construction, purchases, invoice dates, etc.) must occur *between* the date your application was received by the program and end date as written on page 1.
- Estimated Completion Date means the date you expect to have that activity completed or that item purchased. All Estimated Completion Dates must be before your project end date (on page 1).
- Any work hours and/or equipment you are going to use to complete the project must be estimated under In-Kind Labour and In-Kind Equipment. Refer to the Funding List APPENDIX 1: In-Kind Contributions for the program rates of various equipment. If In-Kind Contribution (Labour + Equipment) exceeds \$10,000 for an Eligible Project, the Minister may require the Applicant to submit a quote from an independent contractor for the work required to complete the Eligible Project. **(Terms & Conditions s. 5.7) In-kind total (labour & equipment) cannot exceed 25% of the total expenditure cost (Terms & Conditions s. 7.3(b)).**
- A more detailed breakdown of eligible expenses and **copies of dealership or contractor quotes can be attached.** Quotes help clarify your project details and the nature of your funding request. Do not send original quotes or invoices – copies only please.

If approved for grant funding, final reimbursement claims are expected within 30 days of your final project end date.

Part 5: Project Budget

Activity Code: 201: Estimated Project Budget

****PLEASE NOTE:** Expenses incurred prior to the date the Application is received by the Minister are *ineligible***

Complete the budget tables below. *Tips to completing this section are provided on page 8.*

Estimated Expenditures	Activity Description/ Item Description	Estimated Completion Date	Quote attached?	Estimated Expense
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Sub-total Estimated Expenditures:				\$

A

201 TOTAL (A) = _____

Activity Code: 202: Estimated Project Budget

****PLEASE NOTE:** Expenses incurred prior to the date the Application is received by the Minister are *ineligible***

Complete the budget tables below. *Tips to completing this section are provided on page 8.*

Estimated Expenditures	Activity Description/ Item Description	Estimated Completion Date	Quote attached?	Estimated Expense
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Sub-total Estimated Expenditures:				\$

A

In-Kind Labour	Activity Description	Estimated Completion Date	Total Estimated Man Hours	Rate / hr*	Estimated Value	
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
Sub-total In Kind Labour:					\$	

B

In-Kind Equipment	Activity Description	Make / Model	Horse power	Estimated Completion Date	Estimated hours	Rate / hr	Estimated Value	
								\$
								\$
								\$
								\$
Sub-total In Kind Equipment:							\$	

C

202 TOTAL (A+B+C) = _____

Activity Code: 203: Estimated Project Budget

****PLEASE NOTE:** Expenses incurred prior to the date the Application is received by the Minister are *ineligible***

Complete the budget tables below. *Tips to completing this section are provided on page 8.*

Estimated Expenditures	Activity Description/ Item Description	Estimated Completion Date	Quote attached?	Estimated Expense
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Sub-total Estimated Expenditures:				\$

A

In-Kind Labour	Activity Description	Estimated Completion Date	Total Estimated Man Hours	Rate / hr*	Estimated Value	
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
Sub-total In Kind Labour:					\$	

B

* In kind labour rate is set at \$25/hour

In-Kind Equipment	Activity Description	Make / Model	Horse power	Estimated Completion Date	Estimated hours	Rate / hr	Estimated Value
							\$
							\$
							\$
							\$
Sub-total In Kind Equipment:							\$

C

203 - TOTAL (A+B+C) = _____

Activity Code: 204: Estimated Project Budget

****PLEASE NOTE:** Expenses incurred prior to the date the Application is received by the Minister are *ineligible***

Complete the budget tables below. *Tips to completing this section are provided on page 8.*

Estimated Expenditures	Activity Description/ Item Description	Estimated Completion Date	Quote attached?	Estimated Expense
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Sub-total Estimated Expenditures:				\$

A

In-Kind Labour	Activity Description	Estimated Completion Date	Total Estimated Man Hours	Rate / hr*	Estimated Value	
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
Sub-total In Kind Labour:					\$	

B

* In kind labour rate is set at \$25/hour

In-Kind Equipment	Activity Description	Make / Model	Horse power	Estimated Completion Date	Estimated hours	Rate / hr	Estimated Value	
								\$
								\$
								\$
								\$
Sub-total In Kind Equipment:							\$	

C

204 - TOTAL (A+B+C) = _____

Activity Code: 205: Estimated Project Budget

****PLEASE NOTE:** Expenses incurred prior to the date the Application is received by the Minister are *ineligible***

Complete the budget tables below. *Tips to completing this section are provided on page 8.*

Estimated Expenditures	Activity Description/ Item Description	Estimated Completion Date	Quote attached?	Estimated Expense
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Sub-total Estimated Expenditures:				\$

A

In-Kind Labour	Activity Description	Estimated Completion Date	Total Estimated Man Hours	Rate / hr*	Estimated Value	
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
Sub-total In Kind Labour:					\$	

B

* In kind labour rate is set at \$25/hour

In-Kind Equipment	Activity Description	Make / Model	Horse power	Estimated Completion Date	Estimated hours	Rate / hr	Estimated Value
							\$
							\$
							\$
							\$
Sub-total In Kind Equipment:							\$

C

205 - TOTAL (A+B+C) = _____

Activity Code: 206: Estimated Project Budget

****PLEASE NOTE:** Expenses incurred prior to the date the Application is received by the Minister are *ineligible***

Complete the budget tables below. *Tips to completing this section are provided on page 8.*

Estimated Expenditures	Activity Description/ Item Description	Estimated Completion Date	Quote attached?	Estimated Expense
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Sub-total Estimated Expenditures:				\$

A

In-Kind Labour	Activity Description	Estimated Completion Date	Total Estimated Man Hours	Rate / hr*	Estimated Value	
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
					\$25 /hr	\$
Sub-total In Kind Labour:					\$	

B

* In kind labour rate is set at \$25/hour

In-Kind Equipment	Activity Description	Make / Model	Horse power	Estimated Completion Date	Estimated hours	Rate / hr	Estimated Value	
								\$
								\$
								\$
								\$
Sub-total In Kind Equipment:							\$	

C

206 TOTAL (A+B+C) = _____

Part 6: Grant Funding Request Summary

Activity Code	Estimated Project Budget (Sum A+B+C)	Category Maximum
201 – Site Investigation or Feasibility	\$	\$15,000
202 – Surface Water Management	\$	-
203 – Manure Storage Facilities	\$	-
204 – Relocation of a Livestock, Wintering site, CFO	\$	-
205 – Improved Land Application	\$	\$70,000
206 – Manure and Livestock Management Strategies/ Innovative Solutions	\$	-
Total Requested Amount:	\$	Program Maximum \$100,000

a. I have applied for CAP - ENVIRONMENTAL STEWARDSHIP and CLIMATE CHANGE PROGRAM funding in other project categories N/A

List the project categories and amounts you have either requested, received or been approved for under the Environmental Stewardship and Climate Change Program (since April 1, 2018):

(category) _____ \$ _____ (amount)

(category) _____ \$ _____ (amount)

b. Have you received technical support for completing this application? Yes No

Is your proposed project associated with an applied research project? Yes No

If yes, list the organization/staff _____

c. Equitable arrangement with Landowner (select ONE of the following):

- My project does not directly impact any land.
- 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 gotten permission to complete this project.

Name of land owner (please print): _____

Part 7: Applicant Declaration

NOTE: PLEASE READ THIS CAREFULLY BEFORE SIGNING

Statement of Certification:

I, _____ certify the following:
Legal name of applicant or authorized representative of applicant

- I am the applicant or authorized to complete this application on behalf of the applicant;
- I understand and agree to the Terms and Conditions of the Canadian Agricultural Partnership Environmental Stewardship and Climate Change Producer Program (the "Program");
- I make all of the representations and warranties stated in section 18.1 of the Program Terms and Conditions;
- I understand that if this application is accepted for grant funding of \$50,000 or less, any grant the applicant receives under the Program shall be governed by this Statement of Certification, the Program Terms and Conditions, and the Approval Letter;
- I understand that if this application is accepted for grant funding of more than \$50,000, the applicant will be required to enter into an executed agreement with the Minister of Agriculture and Forestry that sets out the terms and conditions for funding;
- I understand that not all of the activities and expenses included in this application may be approved as being eligible for funding, and that the approval letter or executed agreement will list the approved activities and expenses that the grant may be used for;
- I understand that funding for the Program is limited;
- I understand that applications under the Program will be processed as outlined in s. 5.1 of the Program Terms and Conditions;

AND I certify that the information provided in this application is, to the best of my knowledge, true, complete and correct.

Legal Name of Applicant: _____

Signature of Applicant or Authorized Representative of Applicant: _____

Date: _____

When complete, mail (do not fax) to:

**Environmental Stewardship and Climate Change Producer Program
Suite 302, 7000-113 Street NW
Edmonton, AB, T6H 5T6**

Emails are accepted **in PDF format ONLY** to:

CAP.ESandCCProgram@gov.ab.ca