2011 Irrigation Season

REQUEST FOR REIMBURSEMENT
And Certification of BMP Implementation
for _____
(print landowner's name)

Date: _____

Detailed Description of Work:
Application of Polyacrylamide for control of irrigation induced erosion.

Dates Work was Performed:
2010 Irrigation Season

Invoices included in this request*

Date	Vendor	Amount	BMP Implemented (From Section 4 of Application and Agreement for Cost Share Assistance)
			PAM
			PAM
			PAM
			PAM
			PAM
			PAM

*Attach copies of all invoices

Landowner Signature

_____ _____ _____
Name Signature Date

----------*Boxes below are completed by KCCD*----------

Technical Certification
I hereby certify that implementation of the above described BMPs have been completed as of the date shown below, and that they meet the established NRCS specification, or alternate practice designs approved by a professional engineer.

_____ _____ _____
Name Signature Date

KCCD Certification
I have reviewed this request and certify that it is consistent with KCCD cost share policy and this landowner's signed Application and Agreement for Cost Share Assistance.

_____ _____ _____
Name Signature Date