

**Application for Fall River County Landowners
Forest Thinning Grant
Fall River Conservation District**

Name of applicant: _____

Mailing address: _____

Phone number: _____ Email: _____

Number of acres applied for this grant: _____

Location of acreage: _____

Contract cost per acre: _____ Cost still pending: Yes No

Date expected: _____

Criteria for Project:

The cost share is a minimum of a 50/50 split, with the Conservation District paying 50% of the cost up to a maximum of \$225/acre (50% of \$450/acre total cost) for thinning only. If the landowner does fuel treatment (i.e., slash disposal) concurrent with thinning, the grant will additionally pay up to \$100/acre (50% of \$200/acre cost). Total payment to landowners for thinning and slash removal is a maximum of \$325/acre (50% of \$650/acre total cost).

- Landowners must have a minimum of five contiguous acres in need of thinning. (Applications from landowners with fewer acres would be considered depending on availability of funds, need, and adjacency to other treatments.)
- The Conservation District reserves the right to limit the number of acres/dollars allocated to an individual landowner.
- Thinning will be defined as thinning in pine stands with an average diameter of six inches breast height or less and/or conifer removal from hardwood stands to improve forest health and increase species diversity and removing conifer encroachment into meadows.
- All thinning slash must be treated to meet the minimum SD Logging Slash Abandonment and Treatment Standards.
- Landowners will be required to maintain project areas for ten years following completion of the project including the control of noxious weeds.

Requirements for grant money are based on the criteria set by the grant and the goals identified in the board-approved Fall River County Conservation District plan, as submitted to the State Department of Agriculture and Natural Resources each year.

If you answer YES to the questions below, please explain when/how. If you answer NO please explain why not, and what you are planning.

1. Does the applicant have a current (no older than 10 years) Thinning plan, or Forest Stewardship Plan approved by South Dakota Resource Conservation & Forestry or a Forest Management Plan approved by NRCS prior to this application?

Yes _____ Date _____ Pending Date expected _____ No _____

Who did the plan? _____

2. The plan identifies that the practice of Forest Stand Improvement will be applied to achieve pre-commercial thinning of a forest stand. For improving tree vigor and health. Will this practice be completed under this application?

Yes ___ No ___

3. The plan identifies Forest Slash Treatment is needed for the treatment area. This is above and beyond lop and scatter and includes pile and burn, removal, or chipping. Forest Slash Treatment will be applied to the thinned acres. Critical Area Seeding will be applied for burn pile areas to discourage noxious weeds. Will these practices be applied under this application?

Yes _____ (which practice) No _____ (what is the plan)

4. Is there a current full time inhabited residence(s) or access to a residential area that thinning in this area would benefit in the case of fire or other emergencies?

Yes _____ No _____

Your signature indicates that you are in agreement with the grant stipulations, and that the applicant will allow authorized personnel to enter the property to verify that the work has been done and is in compliance with the grant specifications. Any Conservation District Representative planning to enter the property will first attempt to contact the landowner. Landowners should notify the district of any phone numbers or contact changes.

Signature of Applicant _____ Date: _____

**Please return to: Fall River Conservation District
341 S. Chicago St.
Hot Springs, SD 57747
Phone: 605-745-5716 Ext. 121**

*****Office use Only:

Points: _____ Acres approved for thinning _____ Acres approved for slash treatment

_____ Not to exceed \$ _____

Denied _____