

Green County Farmer Led Fund- Farmers of the Sugar River Cover Crop Application

● **Applicant Information**

Entity Name (LLC, Trust, etc. what FSA shows exactly): _____

Name : _____

Address : _____

_____ ZIP Code : _____

Phone No : _____ Email : _____

● Farm #: _____ Tract #: _____

Tract #s:	Field #s:	Acres:	Current crop in field?	Has NRCS cost-shared for cover crops before?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total acres planned for cover cropping 2026: _____

If cover crops will be bin run, they will need to be tested for germination. Ask Tonya for more information.

● **Cover crop plans**

Fields	cover crop- mix/species	Pick planned plant by dates: Aug 20, Sep 15 or Oct 31
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

● **Cover crop details.. do you have plans?** _____

contact or company	ordered?	how will it be planted?
_____	_____	_____
_____	_____	_____

● I understand that funding is limited (capped at \$10,000 per farm), will be awarded on a first come, first served basis and contingent on planting cover crops to WI NRCS Specifications.

sign here

date