

**2017 SPRING COST-SHARE
APPLICATION FOR LEAFY SPURGE CONTROL**

NAME: _____ TELEPHONE: _____

ADDRESS: _____ Email: _____

SEND PAYMENT TO: _____ ADDRESS: _____

CHEMICAL USED	GALLONS/POUNDS	RATE/ACRE	APPLICATION HOURS
TORDON 22K	_____	_____	NON-COMMERCIAL LABOR _____
2,4-D	_____	_____	TRUCK OR TRACTOR SPRAYER _____
BANVEL/STERLING	_____	_____	ATV SPRAYER HOURS _____
PLATEAU	_____	_____	COMMERCIAL RATE PAID _____
OVERDRIVE	_____	_____	DATES SPRAYED _____
BRASH/RANGESTAR	_____	_____	
MSO/NIS	_____	_____	

COST-SHARE PAYMENTS

Expense reimbursement @ 80% up to \$2760 (80% of \$3450) for the **2017 season** is possible for those enrolled in **both** the Spring and Fall cost-share programs. If spring expenses go over the \$1725 limit the extra expense can be added to fall program expenses; up to the annual limit \$3450. Likewise, if your spring expense is less than \$1725, the balance can also be added to fall program expense; not to exceed \$3450. Participation in both the Spring and Fall Program is necessary to combine expenses for maximum annual reimbursement. Credit is given for landowner labor and sprayer equipment use. Labor - \$22/hr, Truck/Tractor - \$15/hr, ATV - \$6/hr.

If cost-share requests exceed available funds, payments will be made in a fair and equitable manner at a rate less than 80% and/or less than the \$2760 combined program limit.

HOW TO APPLY FOR COST-SHARE

1. Fill out both sides of this application. On the back, list the township, range, section and quarter locations. Name the owner and operator. List how many acres of leafy spurge are in **C**-cropland, **NC** - non-cropland and **GVT**- government leased land (CRP, etc.)
2. Applicants must be owners or operators of the land.
3. Send in current year receipts for herbicides purchased and a FSA map with leafy spurge infestations marked with the application.

I understand fraudulent use of this program may cancel my eligibility to enroll in future programs. Any improperly obtained funds must be returned immediately upon notice.

DATED: _____ SIGNATURE: _____
(Applicant)

MAIL RECEIPTS, APPLICATION AND MAPS TO:
Postmark Deadline: July 15, 2017
For more information call: 1-701-228-2555
Website address: www.botcoweeds.homestead.com

BOTTINEAU COUNTY WEED CONTROL OFFICE
COURTHOUSE
314 5TH STREET WEST
BOTTINEAU, ND 58318

LEAFY SPURGE LOCATION AND ACREAGE INFORMATION					
TWP		TWP		TWP	
RG		RG		RG	
SEC		SEC		SEC	
QTR		QTR		QTR	
OWNER		OWNER		OWNER	
OPERATOR		OPERATOR		OPERATOR	
SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN	
CROPLAND		CROPLAND		CROPLAND	
NON-CROP		NON-CROP		NON-CROP	
CRP		CRP		CRP	
LEAFY SPURGE LOCATION AND ACREAGE INFORMATION					
TWP		TWP		TWP	
RG		RG		RG	
SEC		SEC		SEC	
QTR		QTR		QTR	
OWNER		OWNER		OWNER	
OPERATOR		OPERATOR		OPERATOR	
SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN	
CROPLAND		CROPLAND		CROPLAND	
NON-CROP		NON-CROP		NON-CROP	
CRP		CRP		CRP	
LEAFY SPURGE LOCATION AND ACREAGE INFORMATION					
TWP		TWP		TWP	
RG		RG		RG	
SEC		SEC		SEC	
QTR		QTR		QTR	
OWNER		OWNER		OWNER	
OPERATOR		OPERATOR		OPERATOR	
SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN	
CROPLAND		CROPLAND		CROPLAND	
NON-CROP		NON-CROP		NON-CROP	
CRP		CRP		CRP	
LEAFY SPURGE LOCATION AND ACREAGE INFORMATION				<u>SAMPLE INFESTATION RECORD</u>	
TWP		TWP		<u>TOWNSHIP</u>	<u>163N</u>
RG		RG		<u>RANGE</u>	<u>80W</u>
SEC		SEC		<u>SECTION</u>	<u>32</u>
QTR		QTR		<u>QUARTER</u>	<u>NW</u>
OWNER		OWNER		<u>OWNER</u>	<u>JOHN SMITH</u>
OPERATOR		OPERATOR		<u>OPERATOR</u>	<u>JOE SMITH</u>
SPURGE INFESTED ACRES IN		SPURGE INFESTED ACRES IN		<u>SPURGE INFESTED ACRES IN</u>	
CROPLAND		CROPLAND		<u>CROPLAND</u>	<u>10</u>
NON-CROP		NON-CROP		<u>NON-CROP</u>	<u>25</u>
CRP		CRP		<u>CRP</u>	<u>4</u>