

## Livestock Manure Analysis Program Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

### Livestock Waste Control Facility

Legal Description: \_\_\_\_\_  
Livestock: \_\_\_\_\_  
Animal Units: \_\_\_\_\_

### Manure Utilization

Spreading Location:

Legal Description	Acres	Crop
_____	_____	_____
_____	_____	_____
_____	_____	_____

### Expenses

Lab analysis: \_\_\_\_\_  
Shipping: \_\_\_\_\_  
Total: \_\_\_\_\_

I certify that to the best of my knowledge, the above information is accurate and correct. I also agree to all the requirements and responsibilities stated in the *Livestock Manure Analysis Program* description.

Signature of Cooperator: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of NRD Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Final Amount Approved: _____ Date: _____ Signature of NRD Representative: _____
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Date Paid: _____ Check #: _____ Amount: _____
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**COST SHARE PAYMENT WILL BE BASED ON AVAILABILITY OF WATER QUALITY FUNDING.**  
The Lower Niobrara Natural Resources District is an Equal Opportunity Provider and Employer