

KACD WRAPS Partnership Cost-Share Policies

- Eligible fields need to be physically located within the targeted areas identified in the WRAPS priority area project.
- Applicants planting cover crops are eligible for up to three years of payments on any eligible field
- To be eligible for a 1st year cover crop payment, field cannot have had a cover in the past 4 years.
- If the field has not had more than one cover planted in past 4 years, the applicant is eligible for a 2nd year cover crop payment.
- If the field has not had more than two covers planted in the past 4 years, the applicant is eligible for a 3rd year cover crop payment.
- Cover crop payments are based on the Partnership Load Reduction Tool found on the WRAPS partnership webpage. Maximum per acre payments are: 1st year - \$45; 2nd year - \$30; 3rd year - \$15, not to exceed 100% of the actual cost of the practice.
- Fields with 3 or more covers planted in the last 4 years are not eligible for the cover crop practice.
- Applications will be taken on the specified application form provided by KACD.
- Applications should be submitted to **Amanda Scott** on the spreadsheet provided by KACD.
- KACD will forward approved cost-share applications to the DOC.
- DOC will allocate funds to the conservation districts with approved projects in CSIMS.
- DOC will contact conservation districts with approved projects when funds have been allocated.
- Projects that need additional funds after completion will need approval from KACD.
- Uncommitted funds can only be used for KACD pre-approved projects.
- First signup cutoff will be June 30, 2025 with all target areas allocated at least \$15,000 for funding. After June 30 all applications will be funded on a first come basis or as determined by KACD.
- Contracts for KACD WRAPS Partnership projects will not be encumbered. Approved contracts will need to be completed or cancelled by May 1st, 2026 or as determined by KACD.
- Recommended filing checklist for approved projects is found on the next page.
- KACD will be asking each county to submit a quarterly Detail Report sent to Amanda so that she can keep her spreadsheet updated throughout the year. Instructions will be sent via email regarding how to generate those reports.

Contract No. _____

**KACD WRAPS Partnership Cost-Share
Contract Status/File Information Cover Sheet**

Producer(s) Name _____

Approved Practice(s) _____

Date Approved By KACD _____

Date Staked Out _____

Date Checked Out _____

Date Received Contractor's Bill _____

Date CS-4 Payment Submitted _____

FILE CHECK-LIST

| | |
|--|--|
| | Aerial Photo of Property |
| | Obtain W-9 Form |
| | Ranking Worksheet |
| | Original signed CS-3 Contract for Financial Assistance |
| | Copies of any correspondence to or from landowner |
| | Amended CS-3 Contract for Financial Assistance, when applicable |
| | Cancelled CS-3 Contract for Financial Assistance, when applicable |
| | Copy of signed and dated NRCS check-out field sheet verifying installed quantities |
| | Copy of bill(s) |
| | Original signed CS-4 Certification of Completion/Request for Payment |