

Resource Enhancement and Protection Program



APPLICATION

Fiscal Year 2013-14

(July 1, 2013 – June 30, 2014)

State Conservation Commission
2301 North Cameron Street
Harrisburg, PA 17110

Phone: (717) 787-8821

Fax: (717) 705-3778

www.pda.state.pa.us/REAP



REAP APPLICATION INSTRUCTIONS 2013-14

Remove the cover page and instruction sheet before submitting the application. Submit the Application pages only.

Submission Information

The State Conservation Commission will have two separate application periods for the FY 2013-14 program.

- **The first application period** (beginning August 1, 2013) will accept applications for COMPLETED projects only. The SCC will reserve 75% of the total REAP allocation for this funding round.
- **The second application period** (beginning August 29, 2013) will accept applications for both proposed and completed projects. If there are additional credits that were not awarded from the first application period, those credits will be added to the second application periods allocation. If the amount of completed applications received in the first funding round, exceeds the 75% allocation, those applications will be reviewed as part of the second funding round.

Please see the program guidelines for additional information on application submission.

For those applicants that do not have a current or final and approved Conservation Plan, Agricultural E&S Plan or Nutrient Management Plan or Manure Management Plan (if required by law), the applicant will be restricted to applying for tax credits consistent with the “General Eligibility” provisions established at Section 1704-E of the REAP Statute and defined under the “General Eligibility Criteria” delineated in these guidelines.

Complete the following Application and all supporting documents and applicable attachments, provide appropriate signatures, and submit one hard copy original to the State Conservation Commission at the following address:

State Conservation Commission
REAP Tax Credit Program
2301 North Cameron Street
Harrisburg, PA 17110-9408

Application must be typed or neatly printed. Faxed or emailed applications will not be accepted.

Refer to the Program Guidelines before completing your application. Parts of this Application may require the assistance of your local Conservation District, Natural Resource and Conservation Service (NRCS) office, or a qualified private sector technical service provider or certified specialist. Some sections require a signature of one of these parties for verification. See Attachment 4 of the Guidelines for a list of organizations who are qualified under the REAP tax credit program to provide verification signatures.

Please note, both Section 2A and Section 2B, must be verified by a qualified individual, even if there are is no livestock present on the operation.

If additional space is required to answer any part of this Application, the applicant may provide an attachment.

All applicants must complete each section of the application. If a particular question is not applicable, use “N/A” as the response. Applications which do not have responses to each question will be considered incomplete and returned to the applicant.

For projects which are complete at the time of application, provide the appropriate project completion information or certification, with signatures, and paid receipts which clearly reflect the total cost paid by the applicant.

A map showing the location of the Agricultural Operation must be attached to the application. See Attachment 7 of the Guidelines for map requirements.

Remember to provide all required signatures.

REMINDERS!!

Before you submit the REAP Application, make sure you have....

- √ Provided taxpayer type and only one Social Security Number or EIN number for the applicant. The tax credit will be awarded to only one account at the Department of Revenue. **Please note that the tax credit will be awarded to the Social Security Number or EIN number that you submit.** Please contact your tax preparer/accountant to determine which number is most appropriate.
- √ Provided Information on control of the property. (Do **not** attach the deed or lease).
- √ Identified the preparer if the application was prepared by someone other than the applicant.
- √ Answered all eligibility questions.
- √ Verified the application with an appropriate signature of a qualified person.
- √ Completed the proposed Project Cost/Funding Summary Table.
- √ Provided an adequate map of the agricultural operation, as per the instructions in Attachment 7 of the Guidelines
- √ Signed and dated the application.

For Equipment Purchases, have you attached the following?

- √ Appropriate equipment certification forms of the Application (pages 11 & 12), with the name and signature of an equipment dealer, and the applicant.
- √ A price quote, order, bill of sale, sales agreement or invoice.

If you are submitting an application for a project or projects which are complete, did you include the following?

- √ For BMPs --Paid receipts and the required completion certification information and forms.
- √ For Equipment – Paid receipt(s) showing the delivery date and serial number of the equipment.
- √ For Plans– Paid receipt for the cost of a plan.

Section 1 – Applicant Information

Applicant Information	
Applicant Name:	Total REAP Requested Amount:
Mailing Address:	
Phone Number (during business hours):	Fax Number:
Email Address:	
Type of Taxpayer – CHECK ONE and list either the SSN or EIN number of the account you want the tax credit awarded to.	
Individual SSN ___ - ___ - _____	Bank EIN ___ - _____
S Corporation EIN ___ - _____	Mutual Thrift EIN ___ - _____
LLC EIN ___ - _____	Insurance Company EIN ___ - _____
Partnership EIN ___ - _____	Title Insurance/Trust Company EIN ___ - _____
Corporation EIN ___ - _____	Sole Proprietor SSN ___ - ___ - _____ EIN ___ - _____
If the applicant is other than an individual, please print principal contact person and title:	
Has this applicant or agricultural operation received a tax credit in a previous program year? Yes No	
Program Year 2007-08 Amount? _____	Program Year 2008-09 Amount? _____
Program Year 2009-10 Amount? _____	Program Year 2010-11 Amount? _____
Program Year 2011-12 Amount? _____	

Location of Agricultural Operation

Address:	
County:	Township:
Is the applicant: The owner of the property on which the project will be completed, or The manager/operator of the property on which the project will be completed, or A sponsor of the project?	

Property Owner Information (if different than the applicant)

Name:
Address:
Telephone Number (during business hours):

Control of the property under this application is through: Deed or other evidence of land ownership Written lease agreement Other agreement or legal conveyance (list) _____	Years of control are _____ through _____ Years of control are _____ through _____
Do NOT attach a copy of the deed or written lease agreement	

For projects where the applicant is a sponsor, a signed written agreement between the sponsor (applicant) and the owner of the property on which the project is located must be completed, attesting that the property owner will comply with all the requirement associated with the awarded of the REAP tax credit, including the obligation to maintain the sponsored BMP(s). Both the sponsor's and the property owner's signature must appear in the appropriate sections of this application.

Section 2 – REAP Eligibility

A. Conservation and Agricultural E&S (Ag E&S) Plans

Refer to Attachment 2 of the REAP Program Guidelines to complete this Section.

1. Do you have a current Conservation Plan for all acres plowed and tilled, owned and operated, addressing all the relevant resource concerns, consistent with the list contained in Attachment 2 of the REAP Program Guidelines?

Yes If you answered Yes, proceed to Question A.3
No If you answered No, proceed to Question A.2

2. Do you have a current Ag E&S Plan that addresses erosion and sedimentation for all plowing and tilling, on all acres plowed and tilled, owned and operated, and meets the requirement of DEP regulations Chapter 102.4(a)?

Yes If you answered Yes to Question A.2, proceed to Question A.3
No If you answered No to Question A.2, then you must include the development of such plans in your initial application for REAP tax credits before applying for tax credits for any other REAP eligible BMP. Only BMPs that are part of a final and approved Conservation Plan, Ag E&S Plan, Manure Management Plan, or Nutrient Management Plan may be included in such submission and will be considered for approval.

These requirements are:

- Cropland must be treated to eliminate gullies (ephemeral or classic)
- Cropland must be treated to tolerable soil loss (T) over the crop rotation
- Cropland with less than 25% cover and within 100 feet of rivers, streams, lakes and ponds must be treated with additional BMPs
- Earthen Animal Heavy Use Areas (AHUAs) must be treated to minimize accelerated erosion and sedimentation
- If you do no plowing or tilling, a Prescribed Grazing (528) Plan (where appropriate) or Mushroom Management Plan (where appropriate) meet the requirement of bullets 1-3 above

3. If you answered Yes to Question A.1 or A.2 above, is your plan fully implemented?

Yes
No If you answered No to Question A.3, list BMPs yet to be completed and an implementation schedule below:

B. Nutrient Management Plan and Animal Concentration Areas

Refer to Attachment 3 of the REAP Program Guidelines when completing this Section.

1. Do you have any livestock, poultry or equine on your operation or do you utilize or handle manure?

Yes If you answered Yes, proceed to Question B.2
No If you answered No, proceed to page 4 (Verification Page)

2. Is your operation a Concentrated Animal Operation (CAO) or Concentrated Animal Feeding Operation (CAFO)?

Yes If you answered Yes, proceed to Question B.3
No If you answered No, proceed to Question B.4

3. Do you have a current Act 38 Nutrient Management Plan for your CAO or CAFO operation?

Yes If you answered Yes, proceed to Question B.5
No If you answered No to Question B.3, then you must include the development of such plans in your initial

application for REAP tax credits before applying for tax credits for any other REAP eligible BMP. Only BMPs that are part of a final and approved Conservation Plan, Ag E&S Plan, Manure Management Plan, or Nutrient Management Plan may be included in such submission and will be considered for approval.

4. If your operation is not a CAO or CAFO, do you have a voluntary Act 38 Nutrient Management Plan or Manure Management Plan under DEP's Chapter 91?

Yes If you answered Yes, proceed to Question B.5

No If you answered No to Question B.4, then you must include the development of such plans in your initial application for REAP tax credits before applying for tax credits for any other REAP eligible BMP. Only BMPs that are part of a final and approved Conservation Plan, Ag E&S Plan, Manure Management Plan, or Nutrient Management Plan may be included in such submission and will be considered for approval.

5. If you answered Yes to Question B.3 or B.4, is the nutrient or other manure management plan fully implemented?

Yes

No If you answered No to Question B.5, list the BMPs yet to be completed and an implementation schedule below:

6. Does this application cover REAP Eligible BMPs necessary to implement the nutrient or other manure management plan?

Yes

No

7. Does your operation have any Animal Concentration Areas (ACAs) as defined below?

Yes

No

- Livestock confinement areas other than indoor facilities and true pastures:
- Barnyards, feedlots, loafing areas, exercise lots and similar animal confinement areas that will not maintain a growing crop
- Heavily stocked livestock areas where nutrient are applied by animals in excess of crop removal requirements
- Animal congregation areas within pastures that meet the above requirements, such as: supplemental feeding, shade and watering areas

8. Does your operation have any untreated ACAs?

Yes

No

- Use the evaluation information below to determine whether there is a negative impact to surface water and groundwater.
- Does untreated, unfiltered runoff from area enter the surface water?
- Does runoff from the areas present a significant negative impact to groundwater?
- Is the areas within 50 feet of an active well, spring or sinkhole?

9. Does this application cover planning costs or cost to install REAP Eligible BMPs to address the ACAs?

Yes

No

Verification Page

See Attachment 4 of the Guidelines for information on individuals who are qualified to provide this verification

Please note, both Section 2.A and Section 2.B, must be verified by a qualified individual, even if there is no livestock present on the operation.

A. Conservation and Agricultural E & S Plans

I affirm that I have reviewed the responses made by the applicant in Section 2A, page 2, (relating to conservation and agricultural E&S plans) and after due diligence and inquiry I hereby affirm the foregoing to be true and correct to the best of my knowledge, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

NAME OF PERSON VERIFYING THIS APPLICATION: (printed)

TITLE:

NAME OF ORGANIZATION OR BUSINESS:

PHONE NUMBER:

VERIFICATION SIGNATURE:

DATE:

B. Nutrient Management Plan and Animal Concentration Areas

I affirm that I have reviewed the responses made by the applicant in Section 2B, pages 2-3, (relating to nutrient management and animal concentration areas) and after due diligence and inquiry I hereby affirm the foregoing to be true and correct to the best of my knowledge, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

NAME OF PERSON VERIFYING THIS APPLICATION: (printed)

TITLE:

NAME OF ORGANIZATION OR BUSINESS:

PHONE NUMBER:

VERIFICATION SIGNATURE:

DATE:

Section 3 – Project Information

See Attachment 1 of the Guidelines for a list of REAP eligible BMPs

This application is for a project(s) which include(s): (check all that apply)

Planning (Conservation Plan, Ag E & S Plan, Nutrient Management Plan, Manure Management Plan)

Best Management Practices (BMPs)

Purchase of Equipment

Project Cost/Public Funding Table

Each eligible Best Management Practice, including the purchase of equipment, will receive a separate REAP Tax Credit upon completion of the practice.

Complete the Summary table on pages 6-9, indicating each component of the proposed REAP eligible project. The costs to be listed are reasonable estimates or contracted costs for implementation of the project(s) based on a current site Inventory and Evaluation (I&E). (Please refer to information on proposed project in the REAP Guidelines on page 5.) Indicate whether the cost is estimated or the actual cost. Actual costs for BMP projects should be supported by attaching paid bills or invoices. Indicate whether the project is complete or proposed and the date or proposed date of completion.

If you are including eligible costs for one year of interest on funds borrowed for any component of the project, include the portion of interest on each individual BMP listed on the summary table. Attach documentation from a bank or other lending institution showing the amount borrowed and the amount of interest for the first year.

Indicate public sources of funding for each BMP. These sources may include but are not limited to: Environmental Quality Incentive Program (EQIP); Conservation Reserve Enhancement Program (CREP), Chesapeake Bay Program; Growing Greener Environmental Stewardship & Watershed Protection Act; Nutrient Management Grant (Act 38 of 2005); or others (list).

For projects contained in this application which are proposed and incomplete:

- If your application includes the purchase of No-Till Equipment, see Attachment 5 of the REAP guidelines for requirements and complete the REAP No-Till Equipment Purchase Certification on page 11 of this application.
- If your application includes the purchase of Low-Disturbance Manure Incorporation Equipment, see Attachment 6 of the REAP guidelines for requirements and complete the “REAP Low-Disturbance Manure Incorporation Equipment Purchase Certification” on page 12 of this application.

For projects contained in this application which are complete at the time of application:

- If equipment purchases are complete, provide the completion information on pages 11-12 of this application, along with a paid receipt which shows the **equipment serial number and a delivery date.**
- If your BMP project(s) is/are complete, submit the properly signed “Project Completion Certification” on page 13 of this application, the REAP Project completion summary on pages 14 of this application and paid receipts which indicate the amount actually paid for each BMP.
- If your planning project is complete, submit a paid receipt from the planner, indicating that the plan is complete and paid for, and the date of completion.

REAP Project Cost/Public Funding Summary Table

Eligible Best Management Practice	Units Planned / Installed	Total Cost	Public Funds	Source (NRCS, Growing Greener, etc.)	Total Cost Minus Public Funds	50% or 75%	REAP Request	Practice Used in ACA Treatment? (circle one)	Complete or Proposed	Date/ Proposed date of Completion
Additional Expenses for BMPs Previously Credited			N/A	N/A	N/A					
EQUIPMENT BMPs										
Composting Equipment	no.					50%				
Manure Incineration	no.					50%				
Manure Incorporation Equip./ Low-disturbance	no.					50%				
Manure Separation	no.					50%				
No-Till Planting Equipment (planter)	no.					50%				
No-Till Planting Equipment (drill)	no.					50%				
PLANNING BMPs										
Agriculture E& S Plan	no.					75%				
Conservation Plan	no.					75%				
Comprehensive Nutrient Management Plan -102	no.					75%				
Manure Management Plan - DEP Chapter 91	no.					75%				
Nutrient Management Plan - (ACT 38)	no.					75%				
BMPs										
Access Road - 560	ft.					50%				
Animal Mortality Facility - 316	no.					50%				
Brush Management - 314	ac.					50%				

REAP Project Cost/Public Funding Summary Table

Eligible Best Management Practice	Units Planned / Installed	Total Cost	Public Funds	Source (NRCS, Growing Greener, etc.)	Total Cost Minus Public Funds	50% or 75%	REAP Request	Practice Used in ACA Treatment? (circle one)		Complete or Proposed	Date/ Proposed date of Completion
								Yes	No		
Channel Stabilization -584	ft.					50%					
Channel Vegetation -322	ac.					50%					
Closure of Waste Impoundments -360	no.					50%					
Composting Facility -317	ft ²					50%					
Constructed Wetland -656	no.					50%					
Contour Farming - 330	ac.					50%					
Cover Crop -340	ac.					50%					
Critical Area Planting -342	ac.							Yes	No		
Diversion - 362	ft.							Yes	No		
Filter Strip -393	ac.					50%					
Grade Stabilization Structure – 410	no.					50%					
Grassed Waterway -412	ac.							Yes	No		
Heavy Use Area Protection - 561	ac.							Yes	No		
Lined Waterway or Outlet – 468	ft.							Yes	No		
Mulching -484	ac.					50%					
Obstruction Removal – 500	ac.					50%					
Pond Sealing or Lining – 521	no.					50%					

REAP Project Cost/Public Funding Summary Table

Eligible Best Management Practice	Units Planned / Installed	Total Cost	Public Funds	Source (NRCS, Growing Greener, etc.)	Total Cost Minus Public Funds	50% or 75%	REAP Request	Practice Used in ACA Treatment? (circle one)		Complete or Proposed	Date/ Proposed date of Completion
								Yes	No		
Prescribed Grazing -528	ac.							Yes	No		
Pumping Plant for Waste Water Control - 533	no.					50%					
Riparian Forest Buffer – 391	ac.										
Riparian Herbaceous Cover-390	ac.					50%					
Roof Runoff Structure -558	ft.							Yes	No		
Roofs and Covers – 367	ft ²							Yes	No		
Sediment Basin -350	no.					50%					
Silage Leachate Management	no.					50%					
Sinkhole and Sinkhole Area Treatment -527	ac.					50%					
Solid/Liquid Waste Separation Facility- 632	no.					50%					
Streambank and Shoreline Protection - 580	ft.					50%					
Stripcropping -585	ac.					50%					
Structure for Water Control – 587	no.							Yes	No		
Subsurface Drain -606	ft.					50%					
Terrace – 600	ft.					50%					
Tree/Shrub Establishment – 612	ac.										
Underground Outlet - 620	ft.							Yes	No		
Vegetated Buffer	ac.					50%					

REAP Project Cost/Public Funding Summary Table

Eligible Best Management Practice	Units Planned / Installed	Total Cost	Public Funds	Source (NRCS, Growing Greener, etc.)	Total Cost Minus Public Funds	50% or 75%	REAP Request	Practice Used in ACA Treatment? (circle one)		Complete or Proposed	Date/ Proposed date of Completion
								Yes	No		
Vegetated Treatment Area – 635	ac.							Yes	No		
Waste Storage Facility -313	ft ³							Yes	No		
Waste Transfer -634	no.							Yes	No		
Waste Treatment -629	no.					50%					
Waste Treatment Lagoon – 359	ft ³					50%					
Water and Sediment Control Basin – 638	no.					50%					
Well Decommissioning – 351	no.					50%					
BMPs ONLY Eligible in Conjunction with Prescribed Grazing (528)											
Animal Trails and Walkways - 575	ft.					50%					
Fence -382	ft.							Yes	No		
Forage and Biomass Planting - 512	ac.					50%					
Pipeline -516	ft.					50%					
Pond -378	no.					50%					
Spring Development - 574	no.					50%					
Stream Crossing – 578	no.					50%					
Water Well – 642	no.					50%					
Watering Facility – 614	no.					50%					

Section 4 – Signature Page

Applicant Signature

I affirm the information provided in this application is true and correct, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

I affirm that I am authorized to legally bind the company, corporation, partnership or other legal entity whose name appears as the applicant, sponsor or property owner.

I hereby give permission for the State Conservation Commission, its staff and/or its agents to review my Conservation Plan, Ag E&S plan and/or my Nutrient or Manure Management Plan, and all relevant records pertaining to these plans, as required as part of the application review process.

I understand that all projects are subject to inspection and I acknowledge that any tax credit received under the REAP program must be returned for a violation of any provision of the Act or if the practice is not maintained or managed for the life span of the practice, as defined in the REAP program guidelines. I understand that if I provide prior written notification to the Commission that I am unable to maintain the BMP due to the sale of the property, cessation of an agricultural operation or other factors, the Commission may direct the Department to prorate the amount of tax credit that shall be returned.

I agree to permit the State Conservation Commission, its staff and/or its agents to conduct site visits of the project location and to monitor the project for the lifespan of the project.

I understand that if I do not complete the projects listed in this application within the specified timeframe (one year for equipment purchase and two years for installation of BMPs), my projects may be removed from the program, unless I provide a written request for an extension.

I understand and acknowledge that approved REAP applications are a “public record” under the Pennsylvania Right-To-Know Law (65 P.S. §§ 66.1 et seq., as amended).

Print Name(s) of Applicant

Printed Title or Affiliation to a Business (if applicable)

Applicant Signature

Date

For Projects Involving a Sponsor

I hereby affirm that there is a signed written agreement certifying that the property owner will comply with all of the requirements associated with the award of the REAP tax credit. I make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

Print Name(s) of Property Owner

Print name of Applicant

Property Owner(s) Signature

Date

Applicant Signature

Date

If this application is prepared by someone other than the applicant, please provide the following:

NAME/ADDRESS/COMPANY OF THE APPLICATION PREPARER:

PHONE:

May the Commission staff contact the preparer regarding your application? Yes No



REAP No-Till Equipment Purchase Certification

To be completed for each piece of No-Till Equipment Purchased - Make additional copies as necessary

Dealer Certification

I certify that the no-till planting equipment described below is sold under the following conditions:

1. The equipment is capable of placing seeds at the optimum depth for germination and growth in untilled soil with plant residue cover.
2. The purchase agreement includes field setup by a qualified representative of the dealership.
3. For used equipment, all wear items meet or exceed manufacturer's guidelines for replacement parts.
4. I certify that I have no conflict of interest as defined by the REAP Guidelines.

Note: Used equipment sold privately must also be certified by a dealer representative or other persons approved by the Commission.

Dealer Representative Printed Name	for	Company Name
Dealer Representative Signature		Phone Number

Equipment Information

Equipment Make, Model and Year:	
Drill	Planter
Equipment Serial Number:	Check if serial number is not yet available
The equipment being purchased is: New Used	Purchase Price: \$
Order Date:	Expected Delivery (completion) Date:
<input type="checkbox"/> Check here if equipment has already been delivered. Date of Delivery: _____ <input type="checkbox"/> Paid receipt/invoice is attached.	

Applicant Certification

I certify that the no-till equipment described above will be:

1. Utilized by the applicant in untilled soil consistent with the provisions of a current conservation plan or agricultural E&S plan.
2. Maintained by the applicant for the designated lifespan of the equipment, which is 7 years for new equipment and 3 years for used equipment.
3. Utilized by the applicant on an agricultural operation that is identified in this application.

I agree to allow inspections by an agent of the State Conservation Commission to ensure that my operation is utilizing this equipment for no till crop production. I affirm the foregoing to be true and correct, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

Applicant Name	Applicant Signature	date
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For reporting purposes, provide the following:

Number of NEW no-till acres on which this equipment will be used annually:	_____	acres
Number of EXISTING no-till acres on which this equipment will be used annually:	_____	acres



REAP Project Completion Certification for BMPs

APPLICANT NAME:	REAP ID #:
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ADDRESS:

List approved eligible BMP(s) certified as complete for the REAP Program:
 For reporting purposes, for each BMP Certified, estimate approximate "units" of measure. (i.e. linear, square, cubic feet, acres of BMPs installed, etc.)

REAP ID #:	BMP:	Number/Unit:	REAP ID #:	BMP:	Number/Unit:
<i>Example:</i>					
13-001-01	Animal Trails and Walkways	1,000 square feet	_____	_____	_____
13-001-02	Waste Storage Facility	10,000 cubic feet	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List additional BMPs, if necessary, on a separate sheet.

Certification: Complete the appropriate certification below:

Project Designer/Engineer Certification of BMPs

I certify that the BMP(s) listed above have been installed to meet the requirements of REAP program guidelines, and that the project design meets or exceeds the design standards and specifications of the NRCS "Pennsylvania Technical Guide." I certify that I have the appropriate job approval authority from NRCS to certify this project. I affirm the foregoing to be true and correct, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

Name (printed)	Title/Organization	
Signature	Date	Address

~OR~

Registered Professional Engineer Certification

I certify that the BMP(s) listed above have been installed to meet the requirements of REAP program guidelines, and that the project design meets or exceeds the design standards and specifications of the "Pennsylvania Technical Guide." I affirm the foregoing to be true and correct, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

Name (printed)	<div style="border: 1px solid black; width: 100%; height: 100%; margin-bottom: 5px;"></div> Registered Professional Engineer's Seal
Title/Organization	
Address	
Signature	
Date	

REAP Intended Purpose

1. I understand that a roofed BMP under the REAP Tax Credit Program may only be used for their intended purpose as defined by the Commission.

Applicant Initials _____

2. I understand a roofed waste storage facility may only be used to store manure or manure related farm waste (i.e. spent mushroom compost). It may not be used to store hay, feed, equipment, or other materials, nor may it be converted to any other use for the entire lifespan (10 years) of the practice.

Applicant Initials _____

3. A roofed Animal Concentration Area may only be used as a sacrifice, loafing or exercise area. It may not be converted into animal housing (by adding sides, walls, stalls, curtains, etc.) for the entire lifespan (10 years) of the practice.

Applicant Initials _____

4. I understand that roofed BMPs are subject to annual inspections for the lifetime (10 years) of the project to assure that they are being managed for their intended purpose.

Applicant Initials _____

5. I understand that if an inspection reveals that BMPs are being misused, the Commission may revoke all or a portion of the allocated tax credits.

Applicant Initials _____

I have read and understand the information on this worksheet. I affirm the foregoing to be true and correct, and make these statements subject to the penalties of 18 PA.C.S.A §4904, relating to unsworn falsification to authorities.

Applicant Name (Print) _____

Applicant Signature _____

Date _____

Consultant's Name (print) _____

Phone # (____) _____

Consultant Signature _____

Date _____