

## **CRP Planted Tree Enrollment Form**

Name:		Farm Name:				
Mailing Address:						
City:	State:		Z	Zip:		
				Yes	NO	
1. The land has been planted in trees since January 1 <sup>st</sup> 1990						
2. The land is currently under a CRP contract						
3. I own the land that I want to enroll						
Legal Land Descript	tion:					
Year Planted:						
Total Acres Enrollin	ıg:					
Tree Species In Projects (Please Specify the percentage of each species in the project)						

## **Application Material Checklist**

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1. I have included a copy of my current CRP contract (Form CRP-1 Obtained at your county FSA office)

2. I have included a copy of verification that I planted trees since 1990 (USDA reimbursement approval, receipts, or original CRP contract specifying planting)

3. I have included a copy of the aerial USDA Soil Map (Obtain a copy at your county FSA office)

4. I have included a copy of my annual reporting form FSA 578 (Obtain a copy at your county FSA office)

Submit to Clearwater Forest Consultants, LLC P.O. Box 176 Piedmont, MO 63957 (573) 223-7010

www.clearwaterforestconsultants.com