Cornell Cooperative Extension Delaware County

## **APPLICANT CHECKLIST:**

## Delaware County Farm Enhancement Grant Program

## **Application Completeness**

Project Category selection made (see Appendix A)				
Description of COVID Pandemic impact				
$\Box$ Need for proposed project				
□ Farm vision detailed				
Project budget detail (separate document) completed and attached with application (see Appendix A)				
□ Total Project Cost indicated (see Appendix A)				
Proof of Delivery/Payment Attached Copies of 2022 Cropping Inputs (proof of delivery/payment)				
Letter of Agreement Signed and dated and attached with application, if submitted via email.				
$\Box$ Amount of Funds requested indicated (see Appendix A)				
Applicant Eligibility				

Attached: Documentation that applicant is a resident of Delaware County, NY and that applicant is over 18 years of age (e.g. copy of driver's license).

□ Attached: Documentation that project is located on an eligible farm operation as defined in section 301 of the Agriculture and Markets Law, to include the following:

□ Last two years of Schedule F tax form, <u>AND</u>

Documentation that the farm owner is receiving NYS Ag Value Assessment for the farm operation on their property.

Attached: Letter from farm property	owner indicating conse	nt to project
implementation on their property (if	f farm is not owned by a	pplicant).