### *\\edc1adminfs01.admin.state.mn.us\BWSR\Main\Org Effectiveness\Comms\Branding\2017-BWSR-Branding-Templates\Logos\BWSR Logos for Staff Use\Vertical\RGB (for Web)\BWSR Acronym Logo RGB.jpg*Conservation Easement

###  Application Form

|  |  |
| --- | --- |
|  | Bank Service Area:  |
| Landowner or Entity’s Full Name | County/Field Office |
|  |  |
| Complete Mailing Address (Street, RFD, Box No.) | City | State | Zip Code |
|  |  |  |  |
| Phone Number (Home) | Phone Number (Work) | Phone Number (Cell) | E-Mail Address |
|  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Township 1 Name | Section No. | Twp. No. | Range No. | Township 2 Name (if applicable) | Section No. | Twp. No. | Range No. |
|  |  |  |  |  |  |  |  |

**EASEMENT INFORMATION**

**[ ]** Reinvest in Minnesota (RIM) Reserve [ ]  Flowage Easement [x]  Wetland Banking [ ]  Other

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|       | Total Easement Acres\* |  |       | Total Easement Payment\* |

*\*These are preliminary figures and are subject to change as easement boundaries are finalized.*

**TERMS AND CONDITIONS**

The purpose of this application is to authorize and collect information that is necessary to make a preliminary determination of eligibility and acceptance for the land being offered for a conservation easement. This application is not a binding contract on any of the involved parties. By signing, the applicant agrees to grant employees and/or agents of the state of Minnesota permission to visit and evaluate the property proposed for enrollment and also to provide all information as requested in the application including information relating to land ownership.

**Tennessen Warning Notice:** If this application is accepted for program enrollment, social security numbers or tax identification numbers for all identified owners of the easement property will need to be provided. Social security numbers are private data under the Minnesota Government Data Practices Act. Private data on individuals is not available to the public, but is available to other persons or entities authorized by law to receive the data. Upon making any easement payments associated with this application, social security numbers of payment recipients may be provided to the commissioner of revenue for purposes of tax administration and to the commissioner of finance for the issuance of 1099 tax forms.

**LANDOWNER ACKNOWLEDGEMENT**

I, the landowner, attest that I have read and understand the Tennessen Warning Notice. Further, I attest that to the best of my knowledge, I have truthfully answered all questions asked and provided all information requested as part of this application for a conservation easement. I also understand that the applied for conservation easement cannot be secured on any lands containing contaminants, pollutants, hazardous substances or unsealed abandoned wells unless the identified environmental problems are properly cleaned up and abandoned wells are properly sealed at my expense.

|  |  |  |
| --- | --- | --- |
|  |  |   |
| Landowner Signature |  | Date |

**FIELD OFFICE ACKNOWLEDGEMENT**

I attest that to the best of my knowledge, the information in this landowner application for enrollment and other required associated application forms are accurate and that the landowner and said preliminary easement area meets eligibility requirements of the identified program(s).

|  |  |  |
| --- | --- | --- |
|  |  |       |
| SWCD/Local Government Unit Signature |  | Date |