

(EQIP)
Control of Land Certification by Landowner

Land Unit Description

Farm # _____ Tract # _____ Section _____ Township _____ Range _____ County _____

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For the above described land unit that I own, I hereby certify that my tenant,
_____, **will have control of this land for the**
purpose of satisfying the terms and conditions of an EQIP contract, for the proposed
contract period of _____ years. I grant the applicant permission to install, operate
and maintain the following practices:

_____ **listed in the**
EQIP contract.

I understand that these structural/vegetative/management practices must be
maintained for the lifespan of the practice(s).

Landowner Signature _____ Date _____

Landowner Signature _____ Date _____

Landowner Signature _____ Date _____

Landowner Signature _____ Date _____

Landowner Signature _____ Date _____