



**Sussex County Municipal Utilities Authority /  
Walkkill River Watershed Management Group (SCMUA / WRWVG)  
Program Participant 319(h) Non-Point Source Grant Program**

**Application Form**

\_\_\_\_\_  
Applicant - Program Participant (Print Name)

\_\_\_\_\_  
Address - Mailing

\_\_\_\_\_  
Block / Lot Municipality

\_\_\_\_\_  
Watershed - Clove Brook, Papakating Creek, Upper Paulinskill

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-mail Address

The SCMUA/WRWVG, working in cooperation with the New Jersey Department of Environmental Protection (NJDEP) 319(h) Non-Point Source Grant Program and the United States Department of Agriculture - Natural Resource Conservation Service (USDA-NRCS), is considering application for Program Participant Grant Funding to implement conservation Best Management Practices on Sussex County agricultural lands. This application is one step in a process to determine if property is eligible for 319(h) grant funding in addition to the USDA-NRCS Farm Bill Program funding. SCMUA / WRWVG 319(h) grant funding will only be considered for Sussex County agricultural lands which have been approved for USDA-NRCS Farm Bill Programs.

Program Participant acknowledges that if their project is approved for 319(h) grant funding a Program Participant agreement will be prepared for the SCMUA / WRWVG and the Program Participant to execute. The agreement will provide information on the amount of funding committed to the project and the commitment period.

**Program Participant(s) Agrees to:**

- Provide SCMUA/WRWMG with an executed NRCS *Authorization for Release of Information Form* which will provide the SCMUA/WRWMG access to documents submitted by the applicant to the USDA-NRCS as well as those generated by the USDA-NRCS for Farm Bill Program Funding
- Provide a copy of their USDA-NRCS Farm Bill Program Application and commitment letter for consideration by SCMUA / WRWMG for 319(h) grant funding.
- If determined eligible for 319(h) grant funding, comply with New Jersey Laws and Regulations including Political Contribution Disclosure Requirements.

I, \_\_\_\_\_ (print name) request 319(h) Non-Point Source grant funding assistance from the SCMUA/WRWMG as indicated in this application. I certify that the information included herein and in any supplemental submission is truthful and complete to the best of my knowledge and any information or submission that is willfully false could subject me to punishment. I understand that this application does not guarantee approval or obligate the Program Participant to enter into an agreement or to provide me or anyone else any funds or payments. I understand that the information contained in this application and any supplemental submission or any approval may be accessible to the public pursuant to the NJ Open Public Records Act, N.J.S.A. 47\_1A-1 et. seq, unless otherwise prohibited by law.

**Name of Program Participant**

**Signature of Program Participant**

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Date