



**YOLO-SOLANO AIR QUALITY MANAGEMENT DISTRICT  
AGRICULTURAL CHIPPING PROGRAM APPLICATION**

<b>Instructions:</b> 1. Complete all sections of the application. 2. Sign application and attach all required documentation.	<b>Submit to YSAQMD (Attn: Incentives):</b> 1947 Galileo Court Davis, CA 95618 OR email to <a href="mailto:grants@ysaqmd.org">grants@ysaqmd.org</a>
District staff will follow up over email to confirm receipt of your application. If you do not receive an email confirmation, please call the District at 530-757-3650 to ensure your application was received.	

**Applicant Information**

Organization, Company, or Proprietor’s Name (as it appears on Form W-9):
YSAQMD Burn Permit #:
Address (City, State, Zip):
Mailing Address (City, State, Zip):

**Primary Contact Information**

First and Last Name:	Title:
Phone Number:	Email:

**Contract Signing Authority**

First and Last Name:	Title:
Phone Number:	Email:

**Project Information**

Crop Location Address:		
Crop Location Coordinates – Latitude:	Crop Location Coordinates – Longitude:	
Type of Project:	Removal Acreage:	
<input type="checkbox"/> Chipping with soil incorporation <input type="checkbox"/> Chipping without soil incorporation		
Crop Type:	Orchard/Vine Age (Years):	Last Date of Production:

Final Disposition of Agricultural Material Location and Address:

**Chipping Contractor Information**

Business Name:	Contact Name:
Address (City, State, Zip):	
Phone:	Email:
License No.:	Total Project Cost:
Number and Type of Contractor's Equipment Expected to be used for Project:	
PERP Registration Numbers of Equipment Expected to be used for Project:	
Estimated Project Start Date (dd/mm/yy):	Estimated Length of Project (# of days that contractor will be onsite):

**Funding Disclosure**

Applicants are required to disclose any funding they have applied for or received from any other source for this project. Other sources may include, but are not limited to, the USDA EQIP, CARB, US. EPA, and private sources. Additionally, if you intend to apply for additional funding, this information must be disclosed. Receiving funding from other sources for this project does not necessarily preclude you from applying for or receiving funding through YSAQMD.

Applicant certifies:  Yes, I have applied for funding from other sources.  
 No, I have not applied and will not apply for funding from other sources.

If yes, provide the Source, Program and Project/Application Number and Funding amount applied for or awarded.

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**Required Attachments:**

- Map of the proposed project location.
- Signed Statement of Terms and Conditions
- Dated and Itemized Quote for the project.
- Completed W-9

**APPLICATION STATEMENT OF TERMS AND CONDITIONS**

1. I have legal authority to apply for grant funds for the project or activity described in this application.
2. I understand that submission of this application does not guarantee incentive funding for the project.
3. I understand that the final funding amount reimbursed may be less than the maximum incentive amount if the final invoice amount for the project is less than the maximum incentive amount, or if the final project is different from the proposed project. For example, the project proposed and funded was 100% soil incorporation but the final project was 50% with soil incorporation and 50% without soil incorporation.
4. I have not chipped, nor will I begin chipping, any of the agricultural material at the above-described location referenced in this application until I have an executed voucher.
5. I understand that the chipped material must be used for either soil incorporation, on-site land application, or off-site beneficial re-use (e.g. mulch, composting, land application) and cannot be used in any combustion practices including, but not limited to biomass power generation, pyrolysis or air curtain burners.
6. I understand that no portion of the agricultural material can be burned or used in any of the aforementioned combustion processes, including but not limited to leaves, branches, trunks, roots, stumps, or untreated sticks.
7. I certify that I will continue to use the acres referenced in this application for agricultural use.
8. I understand that the selection of a third-party contractor to perform any or all of the project is completely my choice and the District does not endorse, or is not in partnership with any such contractors, and shall not be responsible for any disputes arising from the work performed between the applicant and the contractor. The District will not be held liable for any disputes, circumstances or events that occur between the applicant and contractor. Contractors are independent contractors; they are not officers, representatives, agents, servants, employees, partners, associates, or joint ventures of the District.
9. The proposed project is not required to be implemented by any local, state, and/or federal rule, regulations, or other legally binding requirement.
10. I understand the grant will pay for a portion of the total costs and I must retain copies of receipts and cancelled checks to prove that I paid my share of the costs.
11. I understand there are conditions placed on receiving a grant and agree to refund the grant (or a pro-rated portion) if it is found that at any time, I do not meet those conditions.
12. Projects funded by District will not be used as marketable emission reduction credits, to offset any emission reduction obligation, or for credit under any federal or state emission averaging, banking and trading program. In addition, projects funded through this program may not be used to generate a compliance extension or extra credit for determining regulatory compliance.
13. I understand that disclosure is required of the value of any current financial incentive that directly reduces the project price, including tax credits or deductions, grants, or other public financial assistance.
14. I agree not to make a payment towards chipping prior to receiving a valid voucher from the District.
15. I understand the District has the right to conduct inspections, including, but not limited to pre-inspection and post-inspection.
16. I understand that an IRS Form 1099 will be issued to me for the incentive funds received under any District Program. I understand that it is my responsibility to determine the tax liability associated with participating in District Programs.
17. I certify to the best of knowledge that the information contained in this application is true and correct.

I agree to the above statements.

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Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Representative's Name (Print)

\_\_\_\_\_  
Title