***Appendix A***

**CT Department of Agriculture**

**2015 Farm Reinvestment Grant**

**Application Cover Page**

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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant Information** | | | | | | | | | | | | | | | | | |
| **Applicant Name:** | | | |  | | | | | | | | | | | | | |
| **Application/Project Contact:** | | | |  | | | | | | | | | | | | | |
| **Full Mailing Address:** | | | |  | | | | | | | | | | | | | |
| **Phone:** |  | | | | | | | | | | | **Fax:** | |  | | | |
| **Email:** |  | | | | | | | | **Website:** | | | | |  | | | |
| **FEIN or SS Number:** | | |  | | | | | **Farmers’ Tax Exemption Permit Number:** | | | | | | | |  | |
| **Project Information** | | | | | | | | | | | | | | | | | |
| **Project Title:** | |  | | | | | | | | | | | | | | | |
| **Total Project Costs:** | | | | | | | | | | | | | | |  | | |
| **In-Kind Expenses Covered by Applicant:** | | | | | | | | | | | | | | |  | | |
| **Cash Expenses Covered by Applicant:**  *At least 50% of match expenses must be covered in cash by applicant* | | | | | | | | | | | | | | |  | | |
| **Farm Reinvestment Grant Funds Requested**:  *Not to exceed $40,000.00* | | | | | | | | | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| **Farm Information** | | | | | | | | | | | | | | | | | |
| **Owner(s) of Record** *(if different from Project Contact)* | | | | |  | | | | | | | | | | | | |
| **Property Address** *(where project will take place if different from mailing address)* | | | | |  | | | | | | | | | | | | |
| **Phone of Owner(s):** *(if different from Project Contact)* | | | | |  | | | | **Email of Owner(s):** *(if different from Project Contact)* | | | | | | | |  |
| **Acres in production agriculture** | | | | |  | | **Do you farm:** | | | | | | Full Time / Part Time | | | | |
| **Describe in detail the production agriculture carried out on the farm. Give acreage and quantities of the crops grown, the number and kinds of livestock, forest products, value added products, greenhouses, etc.** | | | | |  | | | | | | | | | | | | |
| **Is any of the land in production or land associated with this project in the Farmland Preservation Program or under any other conservation restrictions?** | | | | | | | | | | | Yes / No | | | | | | |
| **If yes to above, please state under what program/what the restrictions are:** | | | |  | | | | | | | | | | | | | |
| **Have you received other Connecticut Department of Agriculture Grants in the last five years?** | | | | Yes / No | | **If yes state the grant program, year received, and amount for each award.** | | | | | | | |  | | | |
| **Are you a beginning farmer** *(farming for less than ten years)* | | | | | | | | | | Yes / No | | | | | | | |

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**Signature of Applicant Title Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Owner(s) Title(s) Date**

*(if different from applicant)*

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