

**North Dakota Statewide Windbreak Renovation Initiative  
Inspection - Certification and Reimbursement Form**



**LANDOWNER INFORMATION**

<b>Landowner Name:</b>	<b>NDFS Agreement Number:</b>
------------------------	-------------------------------

**PROJECT PRACTICE DESCRIPTION & COSTS**

**Cash Expenses**

Practice Description	Units (acres, feet, etc.)	Completion Date	Cost* *Attached copy of receipt or invoice showing zero balance due and/or cancelled check
<b>Total Cash Expenses</b>			<b>a)</b>

**Landowner In-Kind**

Practice Description	Units (acres, feet, etc.)	Completion Date	Value* *Use the look-up table to calculate values
<b>Total Landowner In-Kind</b>			<b>b)</b>

**Landowner Forest Restoration Credit (FRC)**

<p><u>Forest Restoration Credit</u>                  Acres of Forest Restored X 5-year average per acre rental rate for                  Non-Irrigated Cropland in this county* X 10 Years                  _____ X _____ X 10 =                  Acres                      Rental Rate                  * See current County Rents and Values for North Dakota, available                  from the North Dakota Department of Trust Lands:  <a href="http://www.land.nd.gov/surface/RentSurvey.aspx">http://www.land.nd.gov/surface/RentSurvey.aspx</a></p>	
<b>Total Landowner Restoration Credit</b>	<b>c)</b>

**Total Project Value**

<b>Total Project Cash, In-kind and FRC Values (add a+b+c)</b>	<b>d)</b>
---	-----------

REIMBURSEMENT CALCULATION	
Total Project Values (line d from page 1)	d)
50% of Total Project Values (line d)	e)
<b>Total Reimbursement is (line e) \$ _____ not to exceed the actual cash expenditures and not to exceed \$10,000.</b>	

NDFS USE ONLY	
Amount \$ _____ Payee _____ Payee Mailing Address _____ _____ Fund Number _____ Approval Signature _____ Date _____	Current W-9 On file _____ Acres of cropland protected _____ Rural residences protected _____ Miles of road protected _____ OVERMATCH if any (Negative Value of f) \$ _____

If you would like assistance filling out this form, please contact:

Derek Lowstuter, Forest Stewardship Manager  
 ND Forest Service  
 916 E Interstate Ave, Suite #4  
 Bismarck, ND 58503  
 Tel: (701) 328-9990 Cell: (701) 537-3584  
 E-mail: Derek.Lowstuter@ndsu.edu

Submit this Form and all required attachments to:

North Dakota Forest Service  
 916 E Interstate Ave, Suite #4  
 Bismarck, ND 58503

INSPECTION & CERTIFICATION	
Name & Title of NDFS Authorized Inspector:	I hereby certify that the windbreak renovation project has been completed as described in the NDFS Windbreak Renovation Agreement and Project Practice Description above*. _____ NDFS Inspector Signature Date *Attach photos of completed practices.
<b>Landowner Certification</b> I certify that the attached documents are a true, accurate and complete accounting of the costs to complete the Forest Restoration/Windbreak Renovation project described and referenced in my NDFS Windbreak Renovation Agreement and Project Practice Description above. I can be reached at (one contact method is <b>required</b> ) Phone _____ email _____ to answer any questions regarding this Form or attachments.	
<b>X</b> _____ Landowner Signature	_____ Date

North Dakota State University does not discriminate in its programs and activities on the basis of age, color, gender expression/identity, genetic information, marital status, national origin, participation in lawful off-campus activity, physical or mental disability, pregnancy, public assistance status, race, religion, sex, sexual orientation, spousal relationship to current employee, or veteran status, as applicable. Direct inquiries to Vice Provost, Title IX/ADA Coordinator, Old Main 201, 701-231-7708, ndsu.eoaa@ndsu.edu.

This publication will be made available in alternative formats for people with disabilities upon request by calling 701-328-9944.