Utah Soil Health Equipment Grant Application



Grant	: Detai	ils
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Total Program Funding\$1,000,000Expected Funding Date10/13/2023Expected Number of Awards20Expected Purchase Deadline5/31/2024Application Open Date7/3/2023Match Requirement20%

Application Closing Date8/18/2023Grand Award Cap\$50,000

Grant Description

The Utah Soil Health Equipment Grant is designed to provide funding for equipment for implementing soil health practices in the state. Access to soil health equipment has been identified as a key barrier to the adoption of soil health practices such as no-till. The equipment purchased will be made available to agriculture producers by the conservation district in the area it will serve.

Eligibility Criteria

Each grant application funding request will be capped at \$50,000 maximum with a minimum of 20% matching funds. The match requirement must be in the form of a financial contribution (no in-kind match)

All applications are required to have at least one conservation district as a fiscal partner. All reimbursement payments under the grant will be made through the conservation district.

Equipment purchased must have a tie to implementing at least one of five following soil health princples.1. Keeping the soil covered. 2. minimizing soil disturbance (physical or chemical) 3. maximizing biodiversity 4. Keeping a living root as long as possible 5. Integrating livestock.

Application may include accessories and supportive equipment needed for the operation and or transportation of the soil health equipment being purchased.

Application Submission Instructions

Please submit the completed application electronically in PDF form via email to tdrichards@utah.gov. A printed (typed) application may be submitted via mail to Utah Soil Health Program - UDAF C/O Tony Richards, PO Box 146500, Salt Lake City, UT 84114-6500. All applications must be received via email or postmarked by August 18th, 2023. Applications received after this date will not be considered for funding. All applications must be signed by a representative of each partner involved to be considered complete.

Contact Information

Applicants with questions please contact

Tony Richards - Soil Health Program Manager - Utah Department of Agriculture and Food

Email <u>tdrichards@utah.gov</u>

Phone 435-452-2296 Mail PO Box 146500

Salt Lake City, UT 84114-6500

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Applicant Contact Information				
Organization Name				
Organization Address				
Contact Name				
Organization Phone Number				
Organization Email				
Conservation District Partner Information (If not applicant)				
Conservation District Name				
Conservation District Chairman				
Conservation District Chairman Phone Number				
Conservation District Chairman Email				
Applicatio	n Overview			
Please summarize the equipment being requested along with the intended use and how it will improve the adoption of soil health practices in the area. Include any current goals that will be accomplished with the equipment if funded.				
Please describe the notantial impact this equipment w	ill have and the types of participants it will be			
Please describe the potential impact this equipment w benefiting.	ill have and the types of participants it will be			

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Equipment Details				
Type of Equipment being Requested (example - No-till drill)				
Estimated Cost of Equipment	_			
Please List Any Required Accessories that will be purchased				
Estimated total Cost of Required	Accessories			
Total Amount of Matching Funds	being committed (all pa	rtners)		
Total Grant Amount being Reque	St (total equipment cost mir	nus match)		
How many acres do you estimate	the equipment will be	utilized annually		
How many individuals do you est	imate will use the equip	ment annually		
Will this equipment be utilized in	Urban agriculture?	Yes	No	
IF YES: Plea	se describe the type of	urban agriculture settir	ngs the equipment will be used	
Organization Details Please Describe the partners involved in the equipment purchase and what role/responsibility each will have				

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Organization Details Continued			
Is this the first soil health equipment being purchased by the organization?	Yes	No	
IF NO			
Does the organization currently have the same type of equipment?	Yes	No	
Is there a current project the organization is doing that this equipment will be utilized on?	Yes	No	
Do you have additional fiscal partners?	Yes	No	
IF YES: Please list the fiscal partners (including contact info) a	and the amounts th	ey will be co	ontributing
Additional Information			
Please provide any additional information about your request that yo	ou feel would help t	he ranking o	committee
understand your request.			

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Applicant Signatures

By Signing the Applicant Acknowledges that this application is not a guarantee of funding and in no way not obligates the Utah Department of Agriculture and Food or the State of Utah to a commitment of funding. The Applicant also acknowledges the information in this application to be true to the best of their knowledge and it done in food faith.

Applicant Signature	Date	Applicant Name
Conservation District Chairman Signature	Date	Chairman Name
Partner Representative Signature	Date	Partner Name

Attach any optional files, such as cost estimates, pictures, and equipment brochures as a separate file from the application, preferably in PDF format.

Access the Directory of Conservation Districts Here