



**APPLICATION FOR
ACEQUIA PROGRAM
COST-SHARE ASSISTANCE**

For Office Use Only
FY 2021-2022 – BP 1

----- **APPLICANT INFORMATION** -----

Applicant Name: _____

Applicant's Agent/Leasee (if applicable): _____

Mailing Address: _____

_____ (City) _____ (State) _____ (Zip)

Telephone: _____ (Primary) _____ (Secondary)

Email Address: _____

Project Location (Taos County Neighborhood): _____

- Property is (✓):
- Owned *(Must attach a copy of a recent property tax bill for the project location)*
 - Leased *(Must attach a copy of lease & recent property tax bill for the project location)*
 - Agent *(Must attach a copy of written/dated landowner approval & a recent property tax bill for the project location)*

Have You Participated in Taos SWCD Programs Before (✓)? Yes No

If Yes, Please List Project Type(s): _____

----- **ACEQUIA PROJECT APPLICATION INFORMATION** -----

Acres Irrigated: _____ Acequia Name: _____

Crop Grown on Irrigated Acres: _____ Year of Most Recent Harvest: _____

Is the acequia project location on somebody else's land (✓)? Yes No
*If yes, a signed **Temporary Construction Easement** must be attached to this application prior to submittal. A Temporary Construction Easement form can be obtained at the Taos SWCD office or on their web site (www.tswcd.org).*

Have You Applied for Funding from Other Sources? _____ Yes _____ No

If yes, please describe: _____

***The following items must be attached to this application
BEFORE it can be accepted by Taos SWCD staff:***

1. All information filled out legibly (✓)? Yes
2. Copy of tax bill attached (✓)? Yes
3. Copy of lease (if leased) (✓)? Yes
4. Copy of landowner approval (if acting as agent) (✓)? Yes
5. Neighborhood added (✓)? Yes
6. Acreage filled out (✓)? Yes
7. Acequia name listed legibly (✓)? Yes
8. If required, is Temporary Construction Easement attached (✓)? Yes
9. Signature & date provided (✓)? Yes

I recognize that the above information is true and correct and I am requesting Taos SWCD assistance. This project is needed to protect soil and water resources on the identified property and technical and/or cost-share assistance is needed to complete it.

Signature of Applicant

Date

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Application Received By: _____ Date: _____
(Staff Member Name)

APPLICATION SUBMITTAL TIMELINES/INFORMATION

Taos SWCD currently accepts cost-share program applications year-round.

Applications received during regular office hours between January 1 and June 30 will be considered for funding in the fall of that same year.

Applications received during regular office hours between July 1 and December 31 will be considered for funding in the following spring.

Regular office hours are Monday through Friday 8:00 a.m. - 12:00 p.m. *and* 1:00 a.m. - 5:00 p.m.

Once completed, deliver application to: Taos Soil & Water Conservation District
220 Chamisa Road
Taos, NM 87571

Tel. (575) 751-0584

Taos SWCD observes all national holidays (plus the day after Thanksgiving).

In the event of inclement weather, Taos SWCD follows delays set by Taos Municipal Schools.

Taos Soil & Water Conservation District (Taos SWCD) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and, where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact Taos SWCD at 575-751-0584. To file a complaint of discrimination, write to Taos SWCD, 220 Chamisa Road, Taos, NM 87571 or call 575-751-0584. Taos SWCD is an equal opportunity provider and employer.