



Illinois Pheasant Forever & Quail Forever Habitat Assistance Program Application

In partnership with the IL DNR Pheasant & Habitat Funds



Section A: To be completed by the landowner/cooperator

Project Questions:

- This project is part of a new CRP contract (signed after January 1, 2010)
- This project is located in either the same section or an adjacent section to the _____ publicly owned habitat area.
- This contract is 120' in width for buffer practices (CP21, CP33) OR is ≥ 20 acres in size.
- This project has or will receive federal funding: Cost share: _____%, PIP _____% or \$_____.
- This project has or will receive state or other local funding in the amount of: \$_____. What is the source? _____

Cooperator Name: _____ Phone: _____

Address: _____ City: _____, ST: _____ Zip: _____

Total Project Acres: _____ Township: _____ (N or S), Range: _____ (W or E), Section: _____

I am requesting assistance for my project through the following Pheasants Forever/Quail Forever programs:

- BONUS
- MAX CRP
- WSG Establishment
- CSG Establishment
- Switchgrass
- WSG Upgrade
- CSG Upgrade
- Fescue Conversion
- Prescribed Burning
- Woody Cover Removal

Project Costs:

- Seed Cost: \$_____/acre * _____ acres = \$_____
- Seeding Cost \$_____/acre * _____ acres = \$_____
- BONUS/MAX-CRP Cost \$_50_/acre * _____ acres = \$_____
- Prescribed Burn Cost \$_____/acre * _____ acres = \$_____
- Chemical Cost \$_____/acre * _____ acres = \$_____
- Woody Cover Removal Cost \$_____/acre * _____ acres = \$_____

Checklist:

- I have included a USDA aerial photo and highlighted the project boundaries.
- I have included all related invoices for this project.
 - PF/QF Seed Program used—no invoice necessary for seed order.
- I authorize Pheasants Forever / Quail Forever and their designees to receive all USDA Conservation Program information for this project.

Cooperators Agreement: I agree to complete the above described project for wildlife and maintain it in quality wildlife habitat for a minimum of 5 years. If the habitat is destroyed prior to 5 years, I agree to repay Pheasants Forever/Quail Forever funds provided to me through this agreement. I authorize an agent of Pheasants Forever/Quail Forever to inspect, with notification, the project annually through this 5 year period to ensure obligations are met. Everything described above is accurate and I agree to abide by these terms.

Landowner Signature: _____ Date: _____

Section B: To be completed by the sponsoring PF/QF chapter: (To find your local chapter call Matt (N IL) or Tim (Central & Southern IL))

Chapter Name: _____ Chapter Contact: _____

Email: _____ Phone: _____

- Our chapter agrees to 1) abide by the PF/QF IL Pheasant and Habitat Grant Policies and 2) provide the landowner above with the required local match for this project (for information on match requirements Call Aaron at 217-341-7171).

Mail the completed Form to Kim Sterling at 401 Burberry Lane, Rochester, IL 62563

Questions about this form, program or Pheasants Forever / Quail Forever?

Visit Us online at www.illinoispf.org
Call Aaron, Director of Conservation at (217) 341-7171, or
Email at: akuehl@pheasantsforever.org

Remember that your purchase of seed through the Pheasants Forever / Quail Forever Program not only provides high quality habitat at a great value, it also supports these programs and the mission of PF/QF in Illinois. Thank You.