

# Treasurer's Conservation Assistance Program ( T-CAP) Verification Form

This signed document verifies that this Land Rehabilitation Plan is a sound representation of the financial investment needed to complete the proposed rehabilitation activities as prescribed.

Total estimated cost of all Land Rehabilitation Activities = \_\_\_\_\_

Total T-CAP Funds requested = \_\_\_\_\_

Landowner/Operator \*

Printed Name(s) _____	Date _____
Signature(s) _____	

Land Rehabilitation Plan assisting agent

Printed Name _____	Organization/Agency/Entity _____
Signature _____	Date _____

Indiana State Department of Agriculture, Division of Soil Conservation verification

Printed Name _____	
Signature _____	Date _____

\* By signing this form, the landowner/operator is agreeing that a representative from the Indiana State Department of Agriculture (ISDA), Division of Soil Conservation may inspect and verify that the Land Rehabilitation Plan has been completed to the satisfaction of ISDA. In addition, the landowner/operator understands that the failure to complete Land Rehabilitation Plan could result in the forfeiture of their T-CAP loan.