

# 2024 Cover Crop Cost-Share Application

---

Welcome to the 2024 fall cover crop cost-share! Please fill out this application to determine your eligibility. We will follow up shortly to let you know if you qualify.

*Note: This survey should be completed for EACH farmer who will receive a contract. If you farm with someone else, please fill it out for only your portion of acres.*

*\*Denotes a required question*

---

Please enter your contact information:

First name\* (1) \_\_\_\_\_

Last name\* (2) \_\_\_\_\_

Address\* (3) \_\_\_\_\_

City\* (5) \_\_\_\_\_

State\* (6) \_\_\_\_\_

Postal Code\* (7) \_\_\_\_\_

---

Email (required for contract and project notices)\*

\_\_\_\_\_

---

Phone (please TYPE phone number in this format 515-222-1234)\*

\_\_\_\_\_

---

Please list your farm name(s) or any other name(s) under which you have sold or may sell or market your grain (**other** than your first and last name listed above). (If no farms or other names, write "none")\*

---

How did you hear about this program?\*(  
(Check all that apply)

- From my co-op, agronomist or grain elevator (2)
  - From another farmer (7)
  - Flyer (3)
  - Radio (4)
  - ADM (8)
  - MSHC website (5)
  - MSHC newsletter (6)
  - MSHC field day (10)
  - Other (please specify below) (9)
- 

Do you have a farm manager or someone other than you who will be the **primary contact** for this cost share program? \*

- Yes (1)
- No (2)

---

Primary Contact's Name:

First name\* (1) \_\_\_\_\_

Last name\* (2) \_\_\_\_\_

Primary Contact's Email (required for contract and project notices)\*

\_\_\_\_\_

---

Primary Contact's Phone (please TYPE phone number in this format 515-222-1234)\*

\_\_\_\_\_

---

I raise crops in the following additional state(s):\*

(Check all that apply)

Iowa (2)

Wisconsin (1)

North Dakota (5)

South Dakota (9)

None of the above (6)

---

What county (or counties) in Minnesota will you raise crops in in 2024? \*

(Click in box below and select all that apply)

\_\_\_\_\_

\_\_\_\_\_

How many years have you grown cover crops?\*

- 2024 will be my first year! (1)
  - 1 (2)
  - 2-3 (3)
  - 4-5 (4)
  - 6-10 (5)
  - 11+ (6)
- 

**LAST year (2023)**, how many acres of **CORN** did you **plant**? (Enter "0" if no acres were planted)\*

Please enter a number ONLY

---

**LAST year (2023)**, how many acres of **SOYBEANS** did you **plant**? (Enter "0" if no acres were planted)\*

Please enter a number ONLY

---

**LAST year (2023)**, how many **acres** of the **FALL cover crops** did you **seed**? (Enter "0" if no acres were seeded)\*

Please enter a number ONLY

---

**THIS year (2024)**, how many acres of **CORN** do you **intend to plant**? If you don't intend to plant corn (for grain) in 2024, enter "0."\*

Please enter a number ONLY

---

**THIS year (2024)**, how many acres of **SOYBEANS** do you **intend to plant**? If you don't intend to plant soybeans (for grain) in 2024, enter "0."\*

Please enter a number ONLY

---

**THIS year (2024)**, how many acres of **FALL cover crops** do you **intend to seed**? If you don't intend to seed cover crops in fall 2024, enter "0."\*

Please enter a number ONLY

---

Will you raise livestock in 2024?\*

- Yes (1)
- No (2)

How many acres are you interested in enrolling? \_\_\_\_\_

How many years are you interested in enrolling for cost share?

- 1 Year
- 2 Years
- 3 Years
- 4 Years

---

Do you have land enrolled in any of the following private cost-share/carbon programs? \*  
(Check all that apply)

- None of the below (I am not enrolled in a private cost-share program) (1)**
- Indigo Carbon (2)
- Nori Carbon (5)
- Ecosystem Service Market Consortium (ESMC) (6)
- Soil and Water Outcomes Funds (SWOF) (3)
- Cargill RegenConnect (18)
- Agoro Carbon Alliance (7)
- Bayer Carbon (8)
- Corteva Carbon Initiative (9)
- Nutrien Carbon Program (10)
- CIBO Impact (11)
- Gradable (12)
- TruCarbon (13)
- Rabo Agrifinance (14)
- Continuum Ag (15)
- Truterra (16)
- Other (Please specify (17) \_\_\_\_\_)