



Agricultural Resilience Incentive (ARI) Grant Program Application

Download this form and submit by e-mail to jfmorris@ucanr.edu

Farmer/Rancher Applicant

Name: _____ Phone: _____

Email: _____

Street Address: _____

Project Location

Name of Farm/Ranch: _____

Street Address: _____

Property Owner: _____ Phone: _____

Email: _____

Assessor's Parcel Number¹ (APN): _____

If Multiple APNs²: _____, _____

Total Farm/Ranch Operation Size: _____ acres

Combine all acreage under the applicant's agricultural operation, including other parcels.

Age of Farm/Ranch Operation: _____ years

History of Crops on Site(s): _____

History of Conservation Practices (if any): _____

¹ APNs can be looked up at www.sccpropertyinfo.org or by using an interactive map at: <https://tinyurl.com/sccpropertyinfo>

² If project is located on multiple APNs with different owners, please complete property owner information on additional sheets provided and attach to the Application.

Project Scope

Please complete using the guidance of the [ARI Grant Procedural Guide](#).

Management Practice ³	Acreage ⁴	Years ⁵	Total Cost Estimate	Bid

Total Grant Project Bid⁶ \$ _____

[Optional] Please comment on the difference (if any) between bid amounts and the total cost estimate: _____

I represent and warrant that this Application accurately describes the intended use of the requested grant to complete the management practices listed above and if such grant is awarded I shall comply with all terms and conditions of the ARI Grant Procedural Guide including the Grant Funding Agreement Template attached as Appendix C and all other Appendices.

I certify that I am the authorized representative of the farm/ranch to submit this Application and that the above statements are true and correct to the best of my knowledge. I understand that a false statement may disqualify me from the grant program.

Signature or Initials of Applicant⁷

Date

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³ Please choose from the 27 pre-approved practices listed in the [ARI Grant Procedural Guide](#).

⁴ A map including APNs will be required to delineate specific areas for each practice, prior to grant agreement execution. Technical assistance will be available to support the preparation of these maps.

⁵ If any proposed practices are annual (e.g., cover crop, compost, prescribed grazing) please note the number of years proposed (1-3 years) and attach an implementation schedule for each.

⁶ Total Grant Project Bid not to exceed \$30,000.

⁷ Property owner consent will also be required for execution of the grant agreement.