

EXAMPLE – Simple Purchase

3910-FM-WM0469 2/2007



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATERSHED MANAGEMENT

**Chesapeake Bay Special Projects Funding Program
Cost Verification Form (CBP-SP5)**

1. General Information						
Operator/Landowner Name: Mike Lewis			Document Number: # from District-DEP contract			
Street Address: 211 Anywhere Lane			District Contract Number: 34 (agreement number for CBP-SP3)			
Harrisburg, Pa 17101			FSA Farm Number: 1234			
Telephone Number: 717-111-7777			Date of BMP Installation: September 22, 2009			
<input checked="" type="checkbox"/> The landowner will do some or all of the work.			<input type="checkbox"/> Contractor to do some or all of the work.			
Specify: Operator planted cover crop			Specify:			
2. Units Planned/Installed						
(a) BMP No.	(b) Project Item	(c) Unit of Measure	(d) Planned		(e) Performed (Installed)	(f) Charge Amount
			Units	Est. \$		
			340	Cover Crop		
Columns (a), (b), (c), and (d) are to be completed prior to construction/implementation; (e) and (f) are to be completed after construction/implementation.						
3. Performance Report						
The BMP shown above has been implemented to the extent indicated in Section 2, Column (e), and has been installed to meet project plans and to meet or exceed the standards and specifications as per the Special Project Agreement. (Title Signature must have approving authority, i.e. NRCS, if design approval; Technician when appropriate.)						
Signature:			Date:			
Title: Chesapeake Bay Technician						
Landowner Certification: I hereby certify that the above described items have been completed and the charges are accurate.						
Landowner Signature:			Date:			
(DISTRICT USE ONLY)						
Check to Landowner:			Cost Breakdown:			
Check Number: 4568			Landowner Cost: \$0			
Date Paid: October 14, 2009			CBP Cost Share: \$1,500.00			
Amount Paid: \$1,500.00			Other Cost Share: \$0 (if any)			

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	Cost of Practice/Project: \$1,500.00
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