**Applicant Organization:**

Click here to enter the legal name of the organization that will serve as lead for the project and will receive grant funds.

**Submitting Organization:**

If applicable, click here to enter the legal name of the organization submitting on behalf of the applicant.

**Cooperating Entities:**

Click here to list the cooperating entities and identify the role or contribution each will make to the project.

**Project Title:**

Click here to provide a concise description of the project in 15 words or less.

**Project Description (Abstract)** (300 words or less)

Click here to Summarize the need for the project, describe the goals and outcomes, and present a plan for evaluating and measuring the success of the project.\*

*\*The Project Description should minimize the use of technical terms and be appropriate for dissemination to the public as it may be included with information shared publicly for projects funded through California Climate Investments.*

**Project Budget:**

**Funds Requested:** Click here to enter the total amount of grant funds requested.

**Cost Share:** Click here to enter the total amount of cost share committed to the project.\*

**Total Budget:** Click or here to enter the sum of funds requested and cost share.\*\*

*\** *Cost sharing is not a requirement in Project Years 1 and 2 (May 1, 2018 – December 31, 2019); however, cost sharing is encouraged and may serve as evidence to demonstrate commitment to, or support for, the project. Cost sharing is required for Project Year 3 (January 1, 2020 – December 31, 2020).*

*\*\*The total budget will not calculate automatically.*

**Agricultural Operation Data:**

**Total size of the applicant's farm/agricultural organization:** Click here to enter the total farm/agricultural organization size (in acres).

**Assessor's Parcel Number (APN) that will be impacted by the proposed**

**Healthy Soils project:** Click here to enter APN(s).

*Be sure to use the APN format that is used by your county Assessor's Office. Visit your county's Assessor's Office in person or the Assessor's Office webpage to look up or verify the APN(s).*

**Address or Nearest Cross Streets:** Click here to enter address.

**City, Zip Code:** Click here to enter city and zip code.

**County:** Click here to enter the county.

**Census Tract:** Click here to enter the census tract.

*The census tract for each APN can be found using the U.S Census Bureau* [*census tract finder*](https://geocoding.geo.census.gov/geocoder/geographies/address?form)*.*

#### **I. Project Feasibility**

**1) Project Site Information:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Accessor’s Parcel Number (APN)** | **Address (or nearest cross street) City, Zip Code** | **Latitude** | **Longitude** | [**Census Tract**](https://geocoding.geo.census.gov/geocoder/geographies/address?form) **\*** | **Leased Land? \*\*** |
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\*To identify the census tract of each APN, use the census tract finder at [Census Tract Finder](https://geocoding.geo.census.gov/geocoder/geographies/address?form).

\*\* If it is a leased land, provide a copy of a letter of agreement from the landowner to implement proposed management practices for the duration of the grant term.

**Does the Applicant own the land to be impacted by the Healthy Soils Project?:** Yes or No

*If leasing land, applicants must include a letter of agreement from the land owner stating their consent to the project implementation for the duration of the project term. Include the letter as an attachment and name it “Incentives\_[ApplicantName]\_[taxIDlast4digits]\_LandownerAgreement”.*

**Are there multiple fields on which agricultural management practices will be implemented within a single APN?:** Yes or No

**2) Project Logistics:**

Enter the required data regarding the proposed project logistics. This will include a list of APNs, the eligible agricultural management practices to be implemented, and the acreage involved for each practice. A practice that was implemented previously (January 2017 – present) is not eligible for grant funds.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **APN #** | **Field #** | **Name of HSP Practice** | **Acres to Be Implemented** | **Was the Practice Implemented Previously?** |
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**3) Baseline Data:**

**Provide the cropping history for the past three years (January 2015 - January 2018) for all APNs included in the project.**

Click here to enter the cropping history.

**Provide the management practice history for the past three years (January 2015 - January 2018) for all APNs included in the project.**

Click here to enter the management practice history.

**Does the project include Compost Application Practices?:** Yes or No

If yes, applicant must upload one soil organic matter test result taken within the last five years for each APN included in the project. Attached documents should be named “Incentives\_[ApplicantName]\_[taxIDlast4digits]\_SoilTest.”

Or:

In the table, enter the major soil type (i.e., soil series name) and soil organic matter content data sourced from the UCD Web Soil Survey for the specific APNs where project implementation will occur. Instructions for using the Web Soil Survey are provided in Appendix II, Document 2: Step-by-Step Instructions to Determine Soil Organic Matter Content Using Web Soil Survey.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **APN** | **Field No.** | **SOM (%)** | **Major Soil Type** | **APN** | **Field No.** | **SOM (%)** | **Major Soil Type** |
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**4) Project Design:**

**Provide a project design schematic, with a map that includes:**

1. **The specific APNs where eligible management practices will be implemented.**
2. **A layout of where all eligible management practices will be implemented.**
3. **The total acreage for each eligible management practice to be implemented.**
4. **Indicate the plant species to be planted on each field, if applicable.**

Click here to provide a design schematic, including a map of the agricultural operation.

**5) Work Plan:**

**Table I. Management Practice Implementation Plan**

***In the table below, provide the required data for each eligible management practice to be implemented on all fields within an APN that are part of the project. Add additional rows as necessary.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **APN** | **Field Number** | **Practice Name** | **Activities \*** | **Performed by** | **Timeline**  **(start mm/yyyy – end mm/yyyy)** | **Acres of Practice Implementation** |
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**\*Describe each activity that will support *implementation* of the identified management practice(s) for listed APNs.**

**6) Budget Worksheet**

Download the [Budget Worksheet](https://www.cdfa.ca.gov/oefi/HealthySoils/2017SecondSolicitationDocs/2017%20HSP%20Incentives%202%20Budget%20template_3-2-2018.xlsx) and save it on your computer. On the Budget Worksheet, fill in the information only in the yellow highlighted areas. Please note that (1) for practices with payment units in acres, enter only acreage, (2) for practices with payment units in feet, enter only feet to be implemented, (3) for Compost Application, enter both acreage and application rate, (4) for soil organic matter analysis, enter number of soil samples to be taken each year, (5) for the optional Matching Funds to be provided in 2018 and 2019, enter the total amount you plan to contribute for each practice. Once you finish entering all necessary information for practices to be implemented in the project, the document will automatically calculate the total grant funding amount and the total matching funds amount.

For information about determining the number of soil samples to be taken for soil organic matter analysis and how to take soil samples, please go to [HSP Incentives Program](https://www.cdfa.ca.gov/oefi/healthysoils/IncentivesProgram.html) webpage and download the guidance on [Soil Sampling Protocol for Sil Organic Matter Analysis](https://www.cdfa.ca.gov/oefi/healthysoils/docs/HSP_SoilSampling.pdf).

**Attachment: Project Budget Worksheet**

**7) Year 3 Cost Share:**

CERTIFY:

By checking the box to the left, the applicant certifies that the total amount of cost share committed to the project has been secured and includes cost share for year 3 implementation of eligible management practices as applicable.

| **Amount** | **Type of Cost Share\*** *(Matching Funds or*  *In-Kind Contribution)* | **Source**  *(Include Contact Information)* | **Summary of Activities or Costs Covered with Matching Funds**  **or In-kind Contributions** |
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\* *Matching funds refers to a dollar amount committed to your project from a source other than the Healthy Soils Program. An in-kind contribution is the estimated dollar value of any time, property, or supplies donated to your project.*

**II. Project Sustainability:**

1. **Explain why this project is important to the agricultural operation.** (500 words or less)

Click here to provide an explanation of the project importance.

**2) Describe how the project will be sustained beyond the project term. Include anticipated learning or successes from the implemented management practices and how this will affect future adoption (e.g., continuing the practice(s) in the long-term (>3 years) and/or adding the practice(s) to new fields).** (500 words or less)

Click here to enter project sustainability

**3) Describe how you plan to assess and measure possible changes and impacts after project**

**implementation.** (500 words or less)

Click here to describe the assessment plan.

**III. GHG Reduction Estimation:**

*Indicate the estimated greenhouse gas emission reductions from the project (Tonnes of CO2 equivalent/acre) located in the CARB Calculator Tool(s). For each practice, please calculate total acreage to be implemented in order to calculate GHG reduction estimation.*

Before proceeding with this application, applicant must follow guidance of [CARB Greenhouse Gas (GHG) Quantification Methodology for CDFA Healthy Soils Program](https://www.arb.ca.gov/cc/capandtrade/auctionproceeds/cdfahsfinalqm16-17.pdf) and use CARB Greenhouse Gas (GHG) calculator Tools: [COMET-Planner](http://comet-planner-cdfahsp.com/) and/or [Compost-Planner](http://www.compost-planner.com/) to estimate project GHG benefits.

When using the model tools, please make sure to

(1) Select the correct county where your project site is located,

(2) Select the correct practice implementation (refer to column **C** in your budget worksheet), and

(3) Enter the correct acres for each practice (refer to the column titled **acres** in your budget worksheet).

Enter the estimated greenhouse gas emission reductions from the project as indicated below.

**Enter the total CO2 equivalent obtained from the Compost-Planner Carbon Sequestration and GHG Estimation Report.:** Click here to enter the total CO2 equivalent.

**And/or:**

**Enter the total CO2 equivalent obtained from the COMET-Planner Carbon Sequestration and GHG Estimation Report.:** Click here to enter the total CO2 equivalent.

**Enter the total CO2 equivalent obtained from both the Compost-Planner and COMET-Planner Carbon Sequestration and GHG Estimation Report (i.e., provide the total sum of CO2 from both reports).** Click here to enter the total sum.

**Required Attachment(s): COMET-Planner Report AND/OR Compost-Planner Report**

**IV. Soil Health and Environmental Co-Benefits:**

**Describe environmental benefits achieved through implementing the proposed project in the short (within three years) and long-term (beyond three years). Describe how the proposed project will improve soil health. Provide a qualitative description of the environmental co-benefits of the proposed project such as water and air quality improvements, and ecosystem services.** (500 words or less)

Click here to describe the environmental benefits.

**V. Conservation Plan:**

**Although optional, applications that include a qualified conservation plan will receive additional consideration during review. For more information on what to provide in the Conservation Plan, reference page 11 of the Request for Grant Applications. The Conservation Plan must be detailed below and include all of the following:**

1. **An aerial photo or diagram of project fields.**
2. **A list of current management decisions.**
3. **The location of and schedule for applying new conservation practices.**
4. **A Resource Assessment. This includes an inventory of resources and resource concerns, soils information, topographic maps, plan maps showing location of property, existing practices, structures, planned practices, soils, water features and other environmentally sensitive areas, and environmental assessment.**
5. **Information explaining how specific management decisions will be implemented.**
6. **A plan for operation and maintenance of selected management practices.**

Click here to enter the conservation plan.

**Additional Considerations:**

*Wildfire Affected Counties:*

**Are APNs impacted by the project located in one of the following counties affected by wildfires in 2017 or 2018: Butte, Lake, Los Angeles, Mendocino, Napa, Nevada, Orange, Santa Barbara, Sonoma, Ventura, Yuba:** Yes or No

*Disadvantaged Communities:*

*Although optional, applications that include a consideration for Disadvantaged Communities will receive additional consideration during review. For more information about Disadvantaged Communities, reference page 11 of the Request for Grant Applications.*

*To qualify as a benefit to disadvantaged communities, projects must provide direct, meaningful, and assured benefits to one or more disadvantaged communities AND meaningfully address an important community need regardless of location. To determine if projects provide benefits to disadvantaged communities consistent with the California Climate Investments program, provide an answer to all of the following questions. Answer 'Yes' only if the claim can be supported by documentation. All supporting documentation must be included as an attachment. For each question, examples of supporting documentation are provided.*

**Has the applicant done any of the following?:**

**Reviewed the factors on the** [CalEnviroScreen 3.0](https://www.arb.ca.gov/cc/capandtrade/auctionproceeds/lowincomemapfull.htm) **website that cause an area to be defined as a disadvantaged community?** Yes or No

**Hosted a community meeting to get local input on project design?** Yes or No

**Referred to the list of common needs in Table 2.2 of the Funding Guidelines for Agencies that Administer California Climate Investments?** Yes or No

**Received documentation of community support (e.g., letters or emails)?** Yes or No

**Is the majority (50%) of the project located within one or more disadvantaged communities according to** [CalEnviroScreen 3.0](https://www.arb.ca.gov/cc/capandtrade/auctionproceeds/lowincomemapfull.htm) **AND will project implementation significantly reduce exposure to dust and airborne particles for disadvantaged community residents relative to pre-project levels?** Yes or No

**Will project implementation include recruitment, agreements, policies, or other approaches that are consistent with federal and state law and result in at least 10% of project work hour performed by residents of a disadvantage community participating in job training programs which lead to industry recognized credentials or certifications? (Documentation may include labor contracts or agreements with job training or certification programs and documentation of disadvantaged communities.** Yes or No

**Additional documents:**

Click here to copy maps or other documentation to support any “Yes” answers in response to the Additional Considerations questions.