

United States Department of Agriculture



Natural Resources Conservation Service
P.O. Box 311
Auburn, Alabama 36830

Sent Certified Mail: Return Receipt Requested: # (from certified receipt)

DATE

(Name and address of applicant)

RE: EQIP Program Application (enter application number)
Request for starting a practice before contract approval

Dear (applicant name):

The waiver request to begin the following practice: _____ as you requested on [enter the date of the request] has been denied at this time.

Practices completed without an approved contract will be ineligible to receive any (program) payments.

If you have any questions regarding the denial of the waiver request, please contact _____, District Conservationist, in the _____ Field Office to discuss.

Sincerely,

Assistant State Conservationist for Field Operations

cc:
DC

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An Equal Opportunity Provider and Employer

