

# Advanced Soil Sampling Program



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Please Review Agreement. Application must be signed and returned to the LLNRD before soil sampling in order to receive reimbursement. A copy will be provided to you for your records.

## **Applicant**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Legal Description of Field:

\_\_\_\_\_ 1/4 of the \_\_\_\_\_ 1/4 of Section(s) \_\_\_\_\_ Township \_\_\_\_\_ North, Range \_\_\_\_\_ E/W, \_\_\_\_\_ County

Acres: \_\_\_\_\_ Total # of Samples: \_\_\_\_\_

**Agreement subject to the terms here of:** The undersigned Applicant and LLNRD agree that the applicant shall perform an advanced soil sampling analysis on the applicant's field that include nutrient management recommendations based on available in-field nutrient credits and soil health recommendations. The applicant will also perform a 3 ft. deep soil (subsoil) nitrate test on the applied field. **One advanced soil sample and one 3 ft deep soil nitrate test per 40 acres (max. 8 samples/applicant per year). Both sets of samples shall be taken once/year for the next four (4) years.** Cost-share rate will be the cost of the samples up to \$55/sample for the advanced test and \$15/sample for the deep soil test. Soil sampling receipts/invoices and results for both the advanced soil sampling analysis and deep soil nitrate test will be submitted to the applicant's field office prior to cost-share payment. Application Deadline January 31<sup>st</sup>.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

For NRD Use Only

NRD Approval \_\_\_\_\_ Date \_\_\_\_\_