

Thomas County Conservation District  
FY2024 Cost-Share Program  
*Application for Financial Assistance*

Program Non-Point Source Pollution/On Site Wastewater System

Landowner Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone No. \_\_\_\_\_ Email address \_\_\_\_\_

Social Security/FEIN: \_\_\_\_\_ Multiple Landowners? Yes No

Legal Description \_\_\_\_\_

Practice applying for On Site Wastewater System

Practice Components Complete System Replacement

Estimated Units 1 Amount Requested \$2500

*I understand that I am not authorized to start any component of this practice until I have a signed contract with the Thomas County Conservation District.*

Landowner Signature \_\_\_\_\_

Date \_\_\_\_\_