LONG-TERM AGREEMENT

A. To be completed by NRCS; check appropriate box:

☐ **This transaction is for CCC**

☐ **This transaction is for NRCS**

B. Agreement NO.: _____

C. Program: _____

D. State: _____

E. County: _____

1. The undersigned participants enter into this agreement with the (1 a.)_____ to Implement and or maintain specific conservation practices, as set fort in the Attachment B: Schedule of Operations on the property as identified on the location may (Attachment D). In consideration for the implementation and or maintenance of the practices, NRCS will make payments to the participant(s) in the amount (s) described in the Schedule of Operations. This agreement is effective on the date signed by (1 b.) _____ and extends through (1 c.) _____ .

2. This agreement is comprised of this form AD-1154 and the following attachments. The terms of the Attachment A: General Provision; B: Plan or Schedule of Operations, C: Special Provision, D: Property Location Map are fully incorporated by reference into this document and are binding upon the participant(s).

3. The participant(s) agree; a) to implement and or maintain conservation practices for the life of this agreement on the above described land in compliance with the plan or schedule of operations and in accordance with the standards, specifications and other special program criteria obtained from the local field office of the NRCS; b) to forfeit further payments under this agreement and refund the United States, in amounts determined by (3 a.)_____, payments received hereunder upon NRCS' determination that participant(s) have violated the material terms of this agreement or accept such payment adjustments as NRCS may deem appropriate if NRCS decides that the participant's violation does not warrant termination of the agreement; and (c) to forfeit all rights to further payments under the agreement and refund to the United States, in amounts determined by NRCS, payments received hereunder if the subject land is transferred to a non-participant during the term of this agreement, unless the third party agrees to assume this agreement, and (3 b.)_____ consents to the modification.

By signing below, the parties agree to comply with the terms of this agreement, and further agree that form AD-1154 and the following attachments: A: General Provisions, B: Plan or Schedule of Operations, C: Special Provisions, D: Property Location Map constitute the entire agreement of the parties, inclusive.

4. Name and Address:	4 a. Telephone Number:
	4 b. Social Security # or tax ID # if applicable
	4 c. Signature: 4 d. Date:
5. Name and Address:	5 a. Telephone Number:
	5 b. Social Security # or tax ID # if applicable
	5 c. Signature: 5 d. Date:

(see page 3, continuation sheet for more participants, if applicable)

(6.) ***For***: _____

(6 a.) By: _____
(Signature Authorizing Official)

(6 b.) Date: _____

The signature by the NRCS representative signifies a CCC-NRCS transaction as indicated above.

LONG-TERM AGREEMENT

B. Agreement NO.: _____

Attachment A: General Provisions
Attachment B: Plan or Schedule of Operations
Attachment C: Special Provisions
Attachment D: Property Location Map

OMB DISCLOSURE STATEMENT

Federal Agencies may not conduct or sponsor and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to agerage 37.5mins. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Agriculture, OIRM.

PRIVACY ACT STATEMENT

The above statements are made in accordance with the Privacy Act of 1974 (U.S.C. 522a). Furnishing this information is voluntary; however, failure to furnish correct, complete information will result in the withholding or withdrawal of such technical or financial assistance. The information may be furnished to other USDA agencies, the Internal Revenue Service, the Department of Justice, or other State or Federal Law enforcement agencies, or in response to orders of a court, magistrate, or administrative tribunal.

NONDISCRIMINATION STATEMENT

The United States Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs.). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (202) 720-5964.

LONG-TERM AGREEMENT

B. Agreement NO.: _____

Continuation sheet for Long Term Agreement Participants

7. Name and Address:	7 a. Telephone Number:
	7 b. Social Security # or tax ID # if applicable
	7 c. Signature: 7 d. Date:
8. Name and Address:	8 a. Telephone Number:
	8 b. Social Security # or tax ID # if applicable
	8 c. Signature: 8 d. Date:
9. Name and Address:	9 a. Telephone Number:
	9 b. Social Security # or tax ID # if applicable
	9 c. Signature: 9 d. Date:
10. Name and Address:	10 a. Telephone Number:
	10 b. Social Security # or tax ID # if applicable
	10 c. Signature: 10 d. Date:
11. Name and Address:	11 a. Telephone Number:
	11 b. Social Security # or tax ID # if applicable
	11 c. Signature: 11 d. Date: