**AMENDMENT TO CONSERVATION PRACTICE ASSISTANCE CONTRACT**

|  |  |  |  |
| --- | --- | --- | --- |
| Organization | Contract Number | Amendment Number    Approval date**:** | Amendment Type  Date:  Amount:  Land Occupier/Landowner:  Practice: |

State Grant Agreement Expiration Date:

Original Contract Install Date:       Amended Contract Install Date:

Original Total Amount Authorized:       Amended Total Amount Authorized:

Original Land Occupier/Landowner:       Amended Land Occupier/Landowner:

Original Practice:       Amended Practice:

The parties whose names are signed below hereby agree that the above-referenced Conservation Practice Assistance Contract is amended as follows:

**IT IS AGREED THAT:**

The original contract, as numbered, shall remain in full force and effect, except for those changes made necessary by this amendment.

This amendment is to take effect on the date of the last signature hereto.

|  |  |
| --- | --- |
| Date | Land Occupier |
| Date | Landowner, if different from applicant |

**Technical Assessment**

I have the appropriate technical expertise and have reviewed the proposed amendment and deem the changes necessary.

|  |  |
| --- | --- |
| Date | Technical Assistance Provider |

**Organization Approval**

|  |  |
| --- | --- |
| Approval Date | Authorized Signature |

**\*Attach this form to the Conservation Practice Assistance Contract**