

## Control of Land Certification by Owner

Land Unit Description:

1. Legal Description – (Township, Range, Section): \_\_\_\_\_
2. County: \_\_\_\_\_
3. Civil Township Name: \_\_\_\_\_
4. FSA Tract Number: \_\_\_\_\_

I certify that I own the land unit(s) described above. Furthermore, I certify that \_\_\_\_\_ is the operator/tenant, and will have control of this land, including the authority to make decisions about the management and operation of the land for the purpose of satisfying the terms and conditions of a \_\_\_\_\_ Contract for the proposed contract period of 5 to 10 years. I also agree that the structural and vegetative practices recommended are necessary and I approve of the installation of those practices by the appointed operator on the above mentioned property. This agreement is entered into this day, \_\_\_\_\_, 20\_\_ and will extend for \_\_\_ years from the date of this document.

\_\_\_\_\_  
Landowner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Operator's Signature

\_\_\_\_\_  
Date