

**Working Grassland Partnership  
Renter/Operator/Lessee  
Permission Form**

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**Renter/Operator/Lessee Information**

Name: \_\_\_\_\_ County: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

The following Working Grassland Partnership agreement practices will be installed on the above legal description:

*(EXAMPLE: 5,280 feet of four stand barbed wire cross fence and 5,280 feet of four stand barbed wire boundary fence)* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**Landowner's or Information**

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

I agree that the renter/operator/lessee will be responsible for installing or coordinating the installation of all the practices listed above. The renter/operator/lessee has my permission to request cost-share reimbursement for all the listed practices. I agree that the installed practices will be maintained for the lifespan of the agreement.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Renter/Operator/Lessee

\_\_\_\_\_  
Date