

STATE OF MISSOURI  
DEPARTMENT OF NATURAL RESOURCES

Jeremiah W. (Jay) Nixon, Governor • Sara Parker Pauley, Director

www.dnr.mo.gov

MEMORANDUM

2012-012

DATE: November 9, 2011

TO: All Soil and Water Conservation Districts

FROM: <sup>AB</sup> April M. Brandt, District Operations Section  
Soil and Water Conservation Program

**SUBJECT: Cost-Share Landowner Authorization**

In response to district staff concerns and as a result of recent district audit findings, program staff has developed a new Landowner Authorization form which will replace the current Landowner Signature Authorization. Program staff met with the Natural Resources Conservation Service, Farm Service Agency, and the Office of Administration to gain a better understanding of their procedures and developed policy to meet state guidelines.

Signature of the legal landowner on the new form certifies ownership as listed on the property deed. This will reduce the burden on district staff in verifying the legal landowner for cost-share. The Landowner Authorization form will be required to be scanned and attached in MoSWIMS as document type "Landowner Authorization" prior to cost-share payment submission beginning January 1, 2012. Districts may begin utilizing the form prior to this date.

Cost-Share Handbook updates will be forthcoming and include policy pertaining to landowner authorization. District staff is encouraged to attend the workshop entitled "Cooperator Payments-Getting it Right!" which will be offered multiple times at the 2011 Missouri Soil & Water Training Conference. This workshop will be presented by program staff in conjunction with the Office of Administration. The workshop will provide guidance on cooperator entry in MoSWIMS, landowner authorization, cost-share signatures, and the OA Vendor Input/ACH-EFT form.

Attached you will find the updated form, examples of completed forms, as well as policy pertaining to Landowner Authorization. If you have any questions, please contact your district coordinator.

AMB:cwd

Attachments

Cost-share must be provided to the legal landowner (exceptions provided in the Cost-Share Handbook Section III, page 1 under 2. Operator Definition) as listed on the “Landowner Authorization” form. The “Landowner Authorization” form is required for all cost-share contracts. The form may be utilized to provide signature authority to those listed on the property deed or to others not directly listed. If signature authority is given, cost-share form signatures must include the cooperator name as well as the name of the person signing.

**1) Individuals**

In case of ownership by an individual, the cooperator information must list that specific person on all pertinent forms.

Example

Legal Landowner:	Joseph Stephens
Cost-Share Cooperator:	Joseph Stephens
Vendor Input/ACH-EFT:	Joseph Stephens

**2) Multiple Individuals**

In case of ownership by multiple individuals, including spouses, cooperator information must list all owners. If space is not allowable for entry of the complete ownership, abbreviate appropriately but a MoSWIMS general note must be entered to state the entire ownership.

Example

Legal Landowner:	Paul and Stephanie Kane
Cost-Share Cooperator:	Paul and Stephanie Kane
Vendor Input/ACH-EFT (any are acceptable):	Paul and Stephanie Kane Paul Kane Stephanie Kane

**3) Corporations/Trusts/LLCs**

In case of ownership by a corporation, trust or other entity information must list all owners. If space is not allowable for entry of the complete ownership, abbreviate appropriately but ensure a MoSWIMS general note must be entered to state the entire ownership.

Example

Legal Landowner:	Bob and Mary Howe Living Trust
Cost-Share Cooperator:	Bob and Mary Howe Living Trust
Vendor Input/ACH-EFT (any are acceptable):	Bob and Mary Howe Living Trust Bob and Mary Howe Bob Howe Mary Howe Mark Howe (trustee)

# Landowner Authorization

## LEGAL LANDOWNER INFORMATION

Legal Landowner's Name (as listed on the property deed):

Telephone Number:

Current Mailing Address (include zip code):

### TYPE OF OPERATION

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> General Partnership     | <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Estate                             |
| <input type="checkbox"/> Joint Venture           | <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Charitable/Tax-exempt Organization |
| <input type="checkbox"/> Sole Proprietorship/DBA | <input type="checkbox"/> Revocable/Living Trust    | <input type="checkbox"/> Other:                             |
| <input type="checkbox"/> Corporation             | <input type="checkbox"/> Irrevocable Trust         |   |

### MEMBER INFORMATION

NAME	OWNERSHIP %	DOES THIS MEMBER HAVE SIGNATURE AUTHORITY FOR THE LEGAL ENTITY	
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO

### LEGAL LANDOWNER SIGNATURE

I certify as a representative of the above mentioned entity that all individuals listed above and indicated as YES do have signature authority and that all information is true and correct. Sign and print your name.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print

\_\_\_\_\_  
Date

# Landowner Authorization

## LEGAL LANDOWNER INFORMATION

Legal Landowner's Name (as listed on the property deed):

STEVE AND MARY JENSON

Telephone Number:

573-619-3331

Current Mailing Address (include zip code):

42 HWY AA  
STEELE, MO 61194

## TYPE OF OPERATION

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Estate                             |
| <input type="checkbox"/> Joint Venture                  | <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Charitable/Tax-exempt Organization |
| <input type="checkbox"/> Sole Proprietorship/DBA        | <input type="checkbox"/> Revocable/Living Trust    | <input type="checkbox"/> Other:                             |
| <input type="checkbox"/> Corporation                    | <input type="checkbox"/> Irrevocable Trust         |   |

## MEMBER INFORMATION

NAME	OWNERSHIP %	DOES THIS MEMBER HAVE SIGNATURE AUTHORITY FOR THE LEGAL ENTITY	
STEVE JENSON	50	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
MARY JENSON	50	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO

## LEGAL LANDOWNER SIGNATURE

I certify as a representative of the above mentioned entity that all individuals listed above and indicated as YES do have signature authority and that all information is true and correct. Sign and print your name.

Steve Jenson

Signature

Steve Jenson

Print

July 30, 2011

Date

August 30, 2011

Date

# Landowner Authorization

## LEGAL LANDOWNER INFORMATION

Legal Landowner's Name (as listed on the property deed):

**JAMES LANDEN**

Telephone Number:

**660-217-3960**

Current Mailing Address (include zip code):

**60014 MAIN STREET  
COLUMBIA, MO 65109**

## TYPE OF OPERATION

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> General Partnership                | <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Estate                             |
| <input type="checkbox"/> Joint Venture                      | <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Charitable/Tax-exempt Organization |
| <input checked="" type="checkbox"/> Sole Proprietorship/DBA | <input type="checkbox"/> Revocable/Living Trust    | <input type="checkbox"/> Other:                             |
| <input type="checkbox"/> Corporation                        | <input type="checkbox"/> Irrevocable Trust         |   |

## MEMBER INFORMATION

NAME	OWNERSHIP %	DOES THIS MEMBER HAVE SIGNATURE AUTHORITY FOR THE LEGAL ENTITY	
JAMES LANDEN	100	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
SARA LANDEN	0	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
JOE PARKER	0	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO

## LEGAL LANDOWNER SIGNATURE

I certify as a representative of the above mentioned entity that all individuals listed above and indicated as YES do have signature authority and that all information is true and correct. Sign and print your name.

*James Landen*  
Signature

*July 30, 2011*  
Date

JAMES LANDEN  
Print

AUG 30, 2011  
Date

# Landowner Authorization

## LEGAL LANDOWNER INFORMATION

Legal Landowner's Name (as listed on the property deed):

**FARMLAND LLC**

Telephone Number:

**417-442-0061**

Current Mailing Address (include zip code):

**710 FARM LANE  
BENTON, MO 66124**

## TYPE OF OPERATION

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> General Partnership     | <input type="checkbox"/> Limited Partnership                  | <input type="checkbox"/> Estate                             |
| <input type="checkbox"/> Joint Venture           | <input checked="" type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Charitable/Tax-exempt Organization |
| <input type="checkbox"/> Sole Proprietorship/DBA | <input type="checkbox"/> Revocable/Living Trust               | <input type="checkbox"/> Other:                             |
| <input type="checkbox"/> Corporation             | <input type="checkbox"/> Irrevocable Trust                    |   |

## MEMBER INFORMATION

NAME	OWNERSHIP %	DOES THIS MEMBER HAVE SIGNATURE AUTHORITY FOR THE LEGAL ENTITY	
MIKE STEVENS	25	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
LINDA STEVENS	25	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
JOSH STEVENS	25	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
GAIL STEVENS	25	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO
		<input type="checkbox"/> YES	<input type="checkbox"/> NO

## LEGAL LANDOWNER SIGNATURE

I certify as a representative of the above mentioned entity that all individuals listed above and indicated as YES do have signature authority and that all information is true and correct. Sign and print your name.

Mike Stevens  
Signature

Mike Stevens  
Print

Aug 30, 2011  
Date

Aug 30, 2011  
Date