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TO: Landscape Tree Cost-Share Applicant

FROM: Aaron Care, LPSNRD Conservation Forester

DATE: July 2, 2024

SUBJECT: Lower Platte South NRD Landscape Tree Cost-Share

Thank you for applying to The Landscape Tree Cost-Share Program here at the Lower Platte South Natural Resources District.

Included in this email is the Application, Application Checklist, Program Rules, W-9 Form (if you need instructions, they can be found at www.irs.gov/formw9) and United States Citizenship Attestation Form.

Please reach out to me if you have any questions on filling the information in the application. I must have the Application, W-9 Form and Citizenship Attestation Form before we can approve the application and plant a tree.

If there are any questions and comments, please send them to me for consideration.

Sincerely,

Aaron Clare

aclare@lpsnrd.org

Dan Clar

Lower Platte South NRD Conservation Forester

LPSNRD Landscape Tree Cost-Share Application

• Name:	
 Address where tree will be planted: 	:
 Is the location within the LPSNRD? 	Yes No No
Tree species selected:	
Tree cost:	
Cost-Share Amount Requested (75)	% up to \$115.00):
Please include the following supporting do	ocumentation:
 Map or photographs of the planting 	(location.
 Quote for the tree from nursery. 	
 Receipt from 811-Digger's Hotline. 	
 W-9 and Citizen Attestation Forms 	attached.
This application has been reviewed by the the LPSNRD General Manager	LPSNRD Conservation Forester and approved by
LPSNRD Conservation Forester	Date
LPSNRD General Manager	Date

Lower Platte South Natural Resources District's (LPSNRD) Landscape Tree Cost-Share Applicant Checklist:

- Step 1: Double Check, make sure the tree will be planted in the LPSNRD.
 - o Click this link to see the LPSNRD map.
- Step 2: Determine what tree you (the Applicant) would like to plant.
 - o Check species list provided by LPSNRD, is it approved by the LPSNRD?
 - Yes, time for Step 3.
 - No......
 - What other species would you be interested in that are approved?
 - The LPSNRD Forester is available for consultation, please email at aclare@lpsnrd.org
- Step 3: Shop....
 - o Applicants will shop around to find their species of choice.
 - o LPSNRD Forester can help in recommending a nursery close to home.
 - o Procure a written bid from nursery, with price prior to buying.
- Step 4: Apply....
 - o Fill out the LPSNRD Landscape Tree Cost-Share Program application form.
 - All information must be accurate, and Applicant must provide:
 - Address where tree will be planted.
 - Detailed map of exact location of tree planting.
 - The more pictures the better, to see all directions and area is ideal for planting.
 - Pictures of tree placement location.
 - Receipt from 811-Digger's Hotline confirming planting site has been marked.
 - Bid from nursery for the tree.
 - W-9 and Citizenship Forms
 - Submit all information to LPSNRD Forester, preferably via email.
- Step 5: Inspection and Approval...
 - o LPSNRD Forester will review the application.
 - Forester will alert Applicant of application submission.
 - Forester then reviews application.
 - Forester will contact Applicant for any additional information needed.
 - If needed, Forester will visit the site to insure it is ideal for the tree.
 - Forester approves application, submits it to General Manager for final approval.
 - General Manager approves.
- Step 6: Purchase tree, plant tree and request for cost-share.
 - o With Applicant approved, they will go purchase tree.
 - Tree will then be planted.
 - Applicant is responsible for tree planting.
 - LPSNRD does not cost share on planting.
 - Send request to LPSNRD Forester for cost-share.
 - Forester will inspect tree & planting.
 - o Forester will submit request to accounting to issue cost-share.

Lower Platte South Natural Resources District's (LPSNRD) Landscape Tree Cost-Share Rules:

The Lower Platte South Natural Resources District ("District") has budgeted funds for the purpose of sharing the total cost of trees for the good of urban forest. Below is the program rules and District administering guidelines.

- Applications will be awarded in order (Based on the submission date).
- Maximum of 1 tree per applicant AND location per year.
- Applications will be accepted year around until available funds are expended.
 - o Maximum of 85 applicants per year.
- Applications will be reviewed by the District Forester and approved by the General Manager.
- Applicants give permission for District Forester to visit site to inspect planting area and planted tree.
- Tree planting location must be within the District. See map.
 - o Can be planted on rights-of-way, common areas, etc., with proper approval.
 - o Can be on private ground residential & commercial.
 - Land cannot be owned by the United State government, the State of Nebraska, and/or any division of government of the State of Nebraska (i.e. county, city, local government).
- The address of tree planting must be accurate with:
 - O Detailed map of exact location of future tree placement.
 - o Pictures of tree placement location.
- Confirmation of request for tree planting, via email receipt, from Digger's Hotline, 811.
 - o Applicants are required to call Digger's Hotline (811) prior to any planting.
- No shrubs, grass, flowers and orchard trees.
 - o Species not recommended for the District will NOT be approved. See list.
- Standard landscape size $1\frac{1}{2}$ " stock $(1"-1\frac{3}{4}")$ for deciduous trees and 4-5" for conifer trees is the recommended size. Root maker bag trees 3 gallon to 15 gallon trees are encouraged as well. All trees must be guaranteed for 1 year.
- District will provide technical expertise for tree planting location, tree selection, proper planting and maintenance.
- Cost-Share will be 75% of the cost of the tree, with a maximum of \$115.
- No cost share will be for the nursery to plant.
 - o Applicant can plant tree themselves.
 - o Nursery can plant, Applicant is responsible for nursery planting cost.
- Applicants will be provided with the Landscape Tree Cost-Share Program checklist.
- Applicants must sign and date application prior to planting.
- Applicants after planting will provide District confirmation of tree planting, via email receipt from nursery and pictures of planted tree.

Species	Height	Spread	Note	
Baldcypress	50	30		
River Birch	50	40		
Catalpa	50	35		
Kentucky Coffeetree	50	40		
Cottonwood, Native	80	60		
Elm spp. mis	50	40	Disease resistant varieties available.	
Ginkgo	45	35	Males only	
Hackberry	50	50		
Hickory spp.	40	40	Native Species only	
Oak spp.	50	40	Prioritize native species	
Pecan	50	50		
Sycamore	80	50		
Tulip Tree	50	40		
Black Walnut	60	45		
Yellow Buckeye	40	30		
Black Cherry	35	20		
Goldenrain Tree	35	25		
Horsechestnut	60	40		
Persimmon	30	20		
Yellowwood	25	20		
Chestnut spp.	25	25	Disease resistant varieties available.	
Flowering Crabapple	20	15	Several varieties avaliable.	
Hophornbeam	20	15		
Redbud	20	15		
Serviceberry	15	15		
Douglasfir	50	30		
Concolor Fir	50	25		
Eastern White Pine	70	40		
Ponderosa Pine	65	30		
Red Pine	40	30		
Southwestern White Pine	35	20		
Black Hills Spruce	50	30		
Norway Spruce	70	40		
White Spruce	50	30		

(Rev. October 2018) Department of the Treasury

Request for Taxpayer Identification Number and Certification

a to warm im gov/EarmW0 for instructions and the latest information

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do						
-	2 Business name/disregarded entity name, if different from above						
Print or type. Specific Instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose nam following seven boxes. ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S= Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from another LLC that is not disregarded from the owner for U.S. federal tax puris disregarded from the owner should check the appropriate box for the tax. Other (see instructions) ▶	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from FATCA reporting code (if any) (Applies to accounts maintained outside the U.S.)					
S o	5 Address (number, street, and apt. or suite no.) See instructions.	F	Requester's name a	nd address (optional)			
See	6 City, state, and ZIP code						
	List account number(s) here (optional)						
Part	Taxpayer Identification Number (TIN)		100				
Enter your TIN in the appropriate box. The TIN provided must match the name give backup withholding. For individuals, this is generally your social security number (\$\footnote{s} resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, entities, it is your employer identification number (EIN). If you do not have a number TIN, later. Note: If the account is in more than one name, see the instructions for line 1. Also Number To Give the Requester for guidelines on whose number to enter.		ber (SSN). However, for Part I, later. For other umber, see <i>How to get a</i>	a or	identification number			
Part	Certification						
	penalties of perjury, I certify that:						
2. I am Serv	number shown on this form is my correct taxpayer identification numb not subject to backup withholding because: (a) I am exempt from bac ice (IRS) that I am subject to backup withholding as a result of a failure inger subject to backup withholding; and	kup withholding, or (b) I	have not been no	otified by the Internal Revenue			
	a U.S. citizen or other U.S. person (defined below); and						
	FATCA code(s) entered on this form (if any) indicating that I am exemp						
you hav	ation instructions. You must cross out item 2 above if you have been no e failed to report all interest and dividends on your tax return. For real est ion or abandonment of secured property, cancellation of debt, contribution an interest and dividends, you are not required to sign the certification, but	ate transactions, item 2 d ons to an individual retirer	loes not apply. Foi ment arrangement	r mortgage interest paid, (IRA), and generally, payments			
Sign Here	Signature of U.S. person ▶	Da	ate ►				
Gen	eral Instructions	Form 1099-DIV (divided funds)	dends, including	those from stocks or mutual			
Section	Section references are to the Internal Revenue Code unless otherwise • Form 1099-MISC (various types of income, prizes, awards, or						

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

United States Citizenship Attestation Form

For the purpose of complying with Neb. Rev. Stat. §§ 4-108 through 4-114, check one of the following for yourself and attest to your response by providing your name, and signing and dating this form.

☐ I am a citizen of the United States.
- OR -
☐ I am a qualified alien under the federal Immigration and Nationality Act, my immigration status is and my alien number is, and I agree to provide a copy of my USCIS documentation upon request.
- AND – (for corporations, partnerships, or trusts)
☐ Every person who is either a stockholder of the corporation, a partner of the partnership or a beneficiary of the trust is also a United States citizen or qualified alien.
Name of Trust, Partnership or Corporation
I hereby attest that my response and the information provided on this form and any related application for public benefits are true, complete, and accurate and I understand that this information may be used to verify my lawful presence in the United States.
PRINT NAME (first, middle, last)
SIGNATURE
DATE