



Maine Healthy Soils Program - Soil Health Implementation Grant - RFA#: ARDMHSP2025.SHIG1



This is the application form for the Maine Healthy Soils Program's Soil Health Implementation Grant RFA#: ARDMHSP2025.SHIG1

Applications will **NOT** be scored question by question, but instead will be scored based on how the entire application addresses the rubric criteria. Please read the rubric provided in the RFA before applying—it will improve your application. Applications will be evaluated for eligibility and completeness. Applications will not be scored for writing quality, including grammar, spelling, and punctuation. Review the RFA for this grant for full details on how applications will be scored.

After submitting this application form, **you must submit supplemental files as PDF documents to matthew.boucher@maine.gov**. These supplemental files must be received before the application deadline listed on the cover page of the RFA. You may have to submit up to four (4) supplemental files: 1) a farm map; 2) recent soil health test results (if you have them); 3) a soil health management plan (if you have one); 4) vendor quotes (if you are requesting funds to purchase equipment). Please review the RFA for more details on which files you need to submit and how to submit them.

Applications forms and supplemental files must be submitted by April 4, 2025 by 5:00 p.m. Your application is **NOT** considered complete until you submit both the application form and all necessary supplemental files.

To see the RFA for this grant, Question and Answer Summaries, and/or Amendments to the RFA, visit the DACF Maine Healthy Soils Program website. <https://www.maine.gov/dacf/ard/resources/healthsoils/index.shtml#funding>

Applicant Information

1. Farm Business Name *

2. Your Name *

First and Last

3. Farm Physical Address (Street, City, ZIP, and County) *

4. Mailing Address (if different from Farm Physical Address)

5. Phone number *

Enter number without dashes or parentheses, include area code.

6. Email Address *

7. How many acres are currently in production?

8. List your farm's primary crops and products and estimate the percentage of gross income each represents. *

Eg. Mixed vegetables (50%), potatoes (20%), eggs (10%), flowers (10%)

9. Do you have soil health test results that are 3 or less years old? *

Yes

No

10. I understand that I must email a copy of these results to matthew.boucher@maine.gov. I understand that if I do not send these results by the application due date, my application may be rejected and thus not considered for an award. *

Yes **Note - you are only required to submit this if you have one**

11. Schedule a no-cost soil health test using the link below and enter the date you scheduled. Scheduling is available on a first-come-first-served basis and dates are available on Tuesdays, Wednesdays, and Thursdays from April through November. If there are no available dates, please enter 'no available dates' below. *

<https://outlook.office365.com/owa/calendar/Meetings@StateOfMaine.onmicrosoft.com/bookings/>

12. Do you have a soil health management plan? *

Yes

No

13. I understand that I must email a copy of my soil health management plan to matthew.boucher@maine.gov. I understand that if I do not send these results by the application due date, my application may be rejected and thus not considered for an award. *

Yes **Note - you are only required to submit this if you have one**

Identification of Soil Health Constraints

For all questions in this section, answers must be 100 - 250 words in length. You may be scored lower if your answers are not within the stated range. We recommend writing your answers in a word processor and copy/pasting them into the form.

14. Describe any soil-related problems you face on your farm. *

15. Describe what soil health means to you and how you would like to improve your understanding of soil health. *

16. Describe any current efforts to improve or maintain soil health on your farm. *

17. Implementing changes to your farming practices to improve soil health can take extra time, labor, and other resources. Describe the operational barriers making it difficult to improve or maintain soil health on your farm. *

Implementation Plan

For all questions in this section, answers must be 100 - 250 words in length. You may be scored lower if your answers are not within the stated range. We recommend writing your answers in a word processor and copy/pasting them into the form.

18. Describe how you intend to use these grant funds to improve soil health. *

What do you intend to purchase and how will each purchase improve your farm's soil health?

19. What soil health practices do you intend to adopt, scale, or improve through these grant funds? *

20. How will your intended use of these grant funds improve or maintain soil health on your farm beyond the 3-year grant period? *

21. Describe your farming experience and training. *

Budget

There are no word count minimums or maximums for any of the questions in this section.

22. Are you requesting funds for labor? *

Yes

No

23. Describe 1) the hourly rate you intend to pay; 2) the number of months per year you expect to employ an individual supported by these funds; 3) the hours per week you expect an individual supported by these funds to work; 4) any additional costs associated with labor. *

Enter N/A if you are not requesting funds for labor.

24. Enter the total dollar amount you are requesting for labor. *

Enter \$0.00 if you are not requesting funds for labor.

25. Are you requesting funds for equipment and/or services? *

This may include sensors, mobile fencing, monitoring equipment, implements, tools, contracted work, etc.

Yes

No

26. I understand that if I am requesting funds for equipment/services, I must email a PDF of a vendor quote for any and all equipment/services to matthew.boucher@maine.gov as a supplemental file. I understand that my application is not complete until the vendor quote is received. I understand that if I do not send the vendor quote by the application deadline, my application will be considered incomplete and may not be considered for an award. I understand that if the vendor quote does not meet the requirements described in the RFA for this grant, my application will be considered incomplete and may not be considered for an award. *

Yes

I am not requesting funds for equipment/services

27. Describe the equipment/service you intend to purchase. *

For each piece of equipment/service, include: 1) what it is; 2) the brand and model (if applicable); 3) the vendor you intend to purchase it from; 4) how you will use it to improve soil health; and 5) the total cost. Enter N/A if you are not requesting funds for equipment/services.

28. Enter the total dollar amount you are requesting for all equipment/services. *

Enter \$0.00 if you are not requesting funds for equipment/services.

29. Are you requesting funds for materials? *

Materials may include, but is not limited to: soil amendments, cover crop seeds, and other consumables used to improve soil health on the farm.

Yes

No

30. Describe the materials you intend to purchase. *

For each material, include: 1) what it is; 2) the cost per unit; 3) the number of units being purchased; 4) the total cost; 5) and how it will help you improve soil health on your farm. Enter N/A if you are not requesting funds for materials.

31. Enter the total dollar amount you are requesting for all materials. *

Enter \$0.00 if you are not requesting funds for materials.

32. Are you requesting funds for anything other than labor, equipment/services, materials? *

This can include anything that you do not feel fits in the above categories. Note that if we determine that items described in this section could be categorized as equipment/services, we may request a vendor quote from you. In such a case, your application will be considered incomplete until you submit a vendor quote to us and thus may not be considered for an award.

Yes

No

33. Describe the other items you intend to purchase. *

For each item, include: 1) what it is; 2) the cost per unit; 3) the number of units being purchased; 4) the total cost; 5) and how it will help you improve soil health on your farm. Enter N/A if you are not requesting funds for other items.

34. Enter the total dollar amount you are requesting for all other items. *

Enter \$0.00 if you are not requesting funds for other items.

35. Enter the total dollar amount for all purchases described above. *

This figure cannot exceed \$100,000. If it does or is determined to be inaccurate based on your answers above, your application may be disqualified and thus not considered for an award.

Acknowledgements

Please review the following statements.

36. I have read and understand the RFA for this grant and understand that if my application does not meet the standards outlined in the RFA and application, my application may be disqualified and thus not considered for an award. *

I agree

37. I have read and understand the eligibility requirements described in section 1.2 of the RFA for this grant and, to the best of my knowledge, certify that I meet all eligibility requirements. *

I agree

38. I understand that if my application includes any unallowable costs as outlined in Section 1.4 of the RFA for this grant, my application may be disqualified and thus not considered for an award. *

I agree

39. I understand that my application will not be considered complete until I have submitted the required supplemental files by email. *

1. Supplemental files must be emailed to matthew.boucher@maine.gov using the email subject line: **ARDMHSP2025.SHIG1 – Supplemental Files – [YOUR FARM'S NAME]**.

2. Supplemental files include: 1) a map of the farm (required for ALL applicants); 2) results of a soil health test that is 3 or fewer years old (if applicable); 3) a copy of your soil health management plan (if applicable); vendor quotes (if applicable). Refer to Section 2.5 of the RFA for supplemental files submission instructions.

I agree

40. I understand that if I am recommended for an award, an interview or additional supporting files may be required before a contract can be completed. *

I agree

41. By submitting this application, I certify that: *

- 1) To the best of my knowledge, all information provided in the enclosed application, both programmatic and financial, is complete and accurate at the time of submission.
- 2) No personnel currently employed by the Department or any other State agency participated, either directly or indirectly, in any activities relating to the preparation of the Applicant's Application.
- 3) No attempt has been made, or will be made, by the Applicant to induce any other person or firm to submit or not to submit an Application.
- 4) The above-named organization is the legal entity entering into the resulting contract with the Department should they be awarded the contract.
- 5) The person preparing this application is authorized to apply on behalf of the applicant farm business.

I agree

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