

Michigan Department of Agriculture  
 Pesticide & Plant Pest Management Division  
 P.O. Box 30017, Lansing, Michigan 48909  
 Telephone: (517) 373-1075  
 Fax: (517) 335-4540

### Cost Share Application for Organic Handlers/Producers

SIGN AND DATE FORM UPON COMPLETION OF ALL APPLICABLE BLANKS

<b>Date</b>	<b>Federal I.D. Number</b>
<b>Applicant/Company</b>	
<b>Mailing Address</b>	
<b>City, State, Zip Code</b>	
<b>First Name</b>	<b>Last Name</b>
<b>Telephone ( )</b>	
<b>Certifying Agents (attach copy of certificate or renewal)</b>	

**Calculate your reimbursement:**

Example: Certification costs were \$500.00, you will receive 75% reimbursement, which would be \$375.00. If your certification costs were \$1000.00, 75% would equal \$750.00, so you would only receive \$500.00, which is the maximum allowed under this program.

Total certification fees paid = \$ _____ ( <b>attach support documentation</b> )	X 75% (.075) \$ _____ (maximum \$500)
---	---------------------------------------

I hereby certify that the information above is true and accurate to the best of my knowledge.

\_\_\_\_\_

**Applicant (Signature)**

\_\_\_\_\_

**Date**

Please submit this form with attachments:

**Michigan Department of Agriculture**  
**Pesticide & Plant Pest Management Division**  
**Attn: Colleen M. Collier**  
**P.O. Box 30017**  
**Lansing, MI 48909**