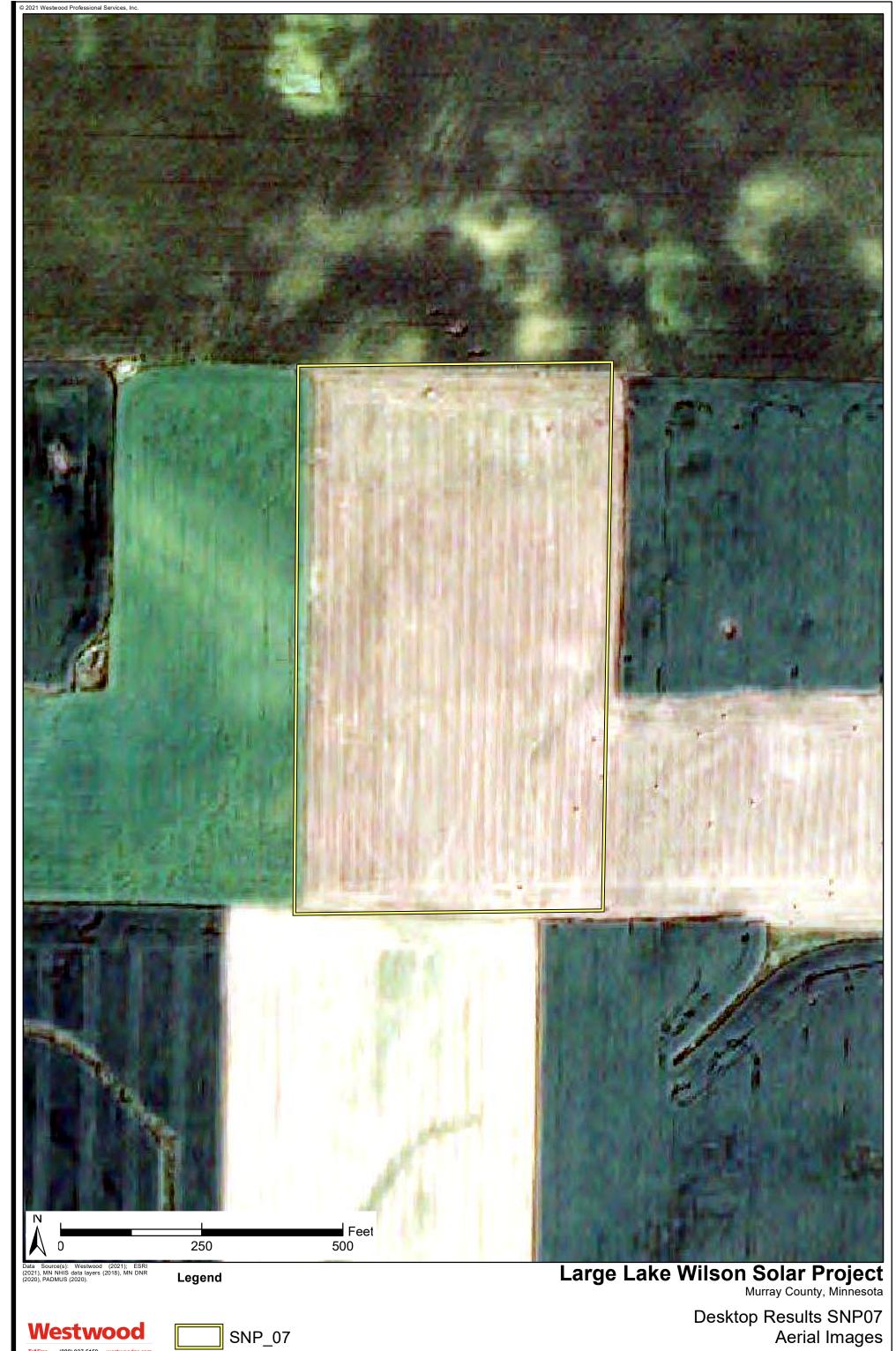
(888) 937-5150 westv

Westwood Professional Services, Inc.



(888) 937-5150 west

Westwood Professional Services, Inc.



**Aerial Images** 



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SNP\_07

Desktop Results SNP07 Aerial Images



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Aerial Images



Westwood

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Westwood Professional Services, Inc.



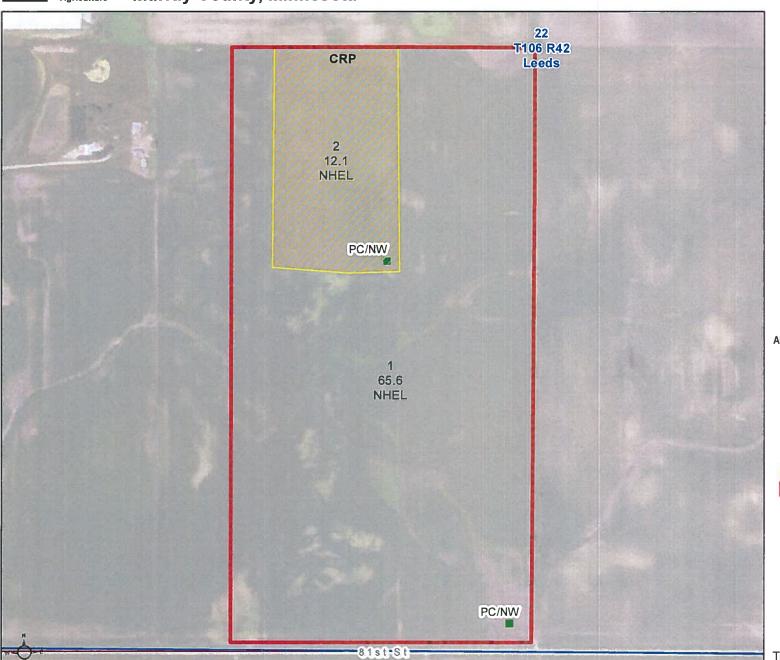
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## Appendix D SNP\_07 CRP Agreement

**Lake Wilson Solar Project** 

Murray County, Minnesota

## **Murray County, Minnesota**



Farm 9480 Tract 11638

2020 Program Year

Map Created April 01, 2020



Unless otherwise noted:
Shares are 100% operator
Crops are non-irrigated
Corn = yellow for grain
Soybeans = common soybeans for grain
Wheat = HRS, HRW = Grain
Sunflower = Oil, Non-Oil = Grain
Oats and Barley = Spring for grain
Rye = for grain
Peas = process
Alfalfa, Mixed Forage AGM, GMA, IGS = for forage
Beans = Dry Edible
NAG = for GZ
Canola = Spring for seed

## Common Land Unit cropland\_indicator\_3CM

Cropland
CRP
Tract Boundary



- Restricted Use
- ▼ Limited Restrictions
   Exempt from Conservation
- Compliance Provisions

Tract Cropland Total: 77.70 acres

000.4				Page 1 of 1
CRP-1	U.S. DEPARTMENT OF AGRICULTURE	1. ST. & CO. CODE &	ADMIN. LOCATION	2. SIGN-UP
(07-06-20) Commodity Credit Corporation		27 101		NUMBER 43
CONCE	DVATION DECEDUE DECORAL COMPANY	3. CONTRACT NUMBER		4. ACRES FOR
	RVATION RESERVE PROGRAM CONTRACT	10104B		ENROLLMENT 12.10
5A. COUNTY F	SA OFFICE ADDRESS (Include Zip Code)	6. TRACT NUMBER	7. CONTRACT PERIOD	
	Y FARM SERVICE AGENCY	11.53	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
2740 22ND ST SLAYTON, MN5		11638	10-01-2012	09-30-2022
5B. COUNTY F	SA OFFICE PHONE NUMBER Code): (507) 836-8567 x2	8. SIGNUP TYPE: General		

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (referred to as "the Participant".) The Participant agrees to place the designated acreage into the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the Contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with the terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges receipt of a copy of the Appendix/Appendices for the applicable contract period. The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. BY SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.

9A. Rental Rate Per Acre \$ 140.00	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment \$1,694.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$	11638	2	CP2	12.10	\$ 605.00
(Item 9C is applicable only when the first year payment is prorated.)					
11. PARTICIPANTS (If more than three individu	uals are signing	see Page 3.)			

man milee mulviduals are signing, see Page 3.)

A(4) DADTICIDANTIC NAME AND	(0) 011455	Lan atana and			
A(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE	(5) DATE	
ADDRESS (Include Zip Code) JOYCE RISACHER			INDIVIDUAL SIGNING IN THE	(MM-DD-YYYY)	
925 STATE HIGHWAY 30	100.00%		REPRESENTATIVE CAPACITY		
HADLEY, MN56151-2027	100.00 %				
B(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE	(5) DATE	
ADDRESS (Include Zip Code)	` '	(-,	INDIVIDUAL SIGNING IN THE	(MM-DD-YYYY)	
RISACHER FARMS LLP			REPRESENTATIVE CAPACITY	(10000-1777)	
927 STATE HIGHWAY 30 HADLEY, MN56151-2027	0.00%		THE THEOLITITIVE ON MOTT		
	101 01110				
C(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE	(5) DATE	
ADDRESS (Include Zip Code)		•	INDIVIDUAL SIGNING IN THE	(MM-DD-YYYY)	
	%		REPRESENTATIVE CAPACITY	820	
12. CCC USE ONLY A. SIGNATUR	B. DATE				

NOTE:

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form The following statement is made in accordance with the Privacy Act of 1974 (5 USC 5028 - as amended). The authority for requesting the information behavior is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local governation. Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <a href="http://www.ascr.usda.gov/complaint-filing\_cust.html">http://www.ascr.usda.gov/complaint-filing\_cust.html</a> and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender