

Application for the James River Buffer Program

Section 1 - Applicant Information

Last Name: _____ First Name: _____

Phone Number: _____

Email Address: _____

Mailing Address:

Street Address

City/County State Zip Code

Have you participated in similar programs? ___ Yes ___ No

If yes, please describe:

Is the applicant the property owner and/or property manager? ___ owner ___ manager

Section 2: Property Information

What is the property's current use? ___ pasture ___ crop ___ other

If other, please describe:

Property Address:

Street Address

City/County

State

Zip Code

Section 3 - Contact Information

Please fill out this form and either mail or drop off the application to:

Attn: James River Buffer Program
James River Association
531 Valley Street
Scottsville, VA 24590

If you have questions regarding this application, please call 434-286-7000 or email buffers@thejamesriver.org

Staff will review your application and respond within 30 days. Please note that due to the number of applications and potential need for site preparation, all projects may not be completed this year.