

taxable income by the IRS.

Signature

Dairy Excellence Grant Fall 2024 Application

CDE use only:	
Approved:	ECM lbs/d
Check #	

Send completed application with \$100 application fee to Center for Dairy Excellence * Attn: Melissa Anderson * 1140 Mountain View Road * Shermans Dale, PA 17090 * Phone: 717-636-0779 * Email: manderson@centerfordairyexcellence.org * www.centerfordairyexcellence.org — Applicants not awarded grants will have the application fee refunded to them.

Program support is made possible through Ag Excellence funding provided by the Commonwealth of Pennsylvania and the PA Dairymen's Association.

<u>Dairy Excellence Grant:</u> Qualifying projects would include anything related to improving dairy farm efficiency, cow comfort, milking facilities, housing facilities, or feeding system. The project should be focused on improving milk production per cow and/or enhancing overall farm profitability and/or efficiency. *Grant funding will be a 50 percent match, up to a maximum limit matching level of \$5,000.*

Application period runs: September 1 — **November 1, 2024** *This is a competitive grant,* so winning grant award recipients will be notified by November 18, 2024, with expenses/invoices due by **June 15, 2025**. Application fees will be refunded to those who are not awarded grants.

Producer's Name	Farm Name			
Address	Town/City		State	Zip Code
County	Email	Phone #		
Milk market or cooperative _				
		No. heifers 12mths or older		r 12mths
otal pounds of milk shipped	prior year	, Butterfat % _	, Protein %	(See December's settlement check
Operational information (chec	ck all that apply): Tie stall Pai	lor Robotics	_ Organic Grazing	_
Milking / day 3x, 2x	, Robotic (Average x / day)	DHIA #	RAC #	_ (Right hand corner of DHIA Repor
Oo you use TMR? Yes	No Are you happ	y with your milk produ	uction numbers? Yes	_ No
Vould you like assistance wi	th your milk production numbe	ers? Yes No	<u> </u>	
Answer the following:				
Our farm has a current Manu	ure Management Plan or Nutrie	ent Management Plan.	Yes No	
Our farm has a current Conse	ervation Plan or Ag Erosion and	l Sediment Control Pla	n. Yes No	-
Our farm is compliant with N	lational FARM Program or simil	ar program. Yes	No	
Dur farm has a Risk Manager	ment Plan or uses risk manager	ment tools to protect p	orofit margins. Yes	_ No
Our farm has a Biosecurity Pl	lan. Yes No			
Our farm has a formal manag	gement or advisory team. Ye	s No		
ist two consultants/advisor	rs with phone# and email addr	ess that work with th	e farm (ex. Nutritionist, A	ccountant, Veterinarian)
Consultant/Advisor Nam	e Organization	Phone#	Email Address	Type of Consultar
n exchange for the allocation	of funding and support, farms acc	ented as a Dairy Excelle	nce Grant Teams will he exn	ected to do the following:

Date

Please Complete the Questions Below:

1.	What is your project?
2.	How will this project benefit your farm?
3.	What are your 2—5 year goals for your farm?
4.	How does this project fit into your 2-5 year goals?
5.	How much do you estimate your project will cost?
	Include a letter of recommendation, if possible from an unrelated person. (banker/lender, nutritionist, veterinarian, PSU ension etc.)