



Marginal Land Recovery Grant

Expression of Interest

PERSONAL INFORMATION

Applicant Name:

Mailing Address:

City:

Province:

Postal Code:

Phone:

Cell:

Email:

SITE INFORMATION

Legal Land Description:

Farm Address *(if different from above)*:

Farm Name *(if applicable)*:

What is the total area of land to be treated, in acres?

Of this area, identify suspected level (dS/m) of Salinity by circling one of the below:

Non-Saline
<2 dS/m

Weakly Saline
2-4 dS/m

Moderately Saline
4-8 dS/m

Strongly Saline
8-16 dS/m

V. Strongly Saline
>16 dS/M

What is the soil type and quality on this marginal land?

CURRENT SITE CONDITION

Site Condition Description (circle one of the options):

Weed Population:

Low

Moderate

High

Water Present:

Never

Seasonally

Always

Additional comments:

ADDITIONAL INFORMATION

APPLICATION SUBMISSION

Applications can be submitted by:

Mail:

Vulcan County
Box 180
Vulcan, Alberta T0L 2B0

Dropped off at the Administration Building:

Vulcan County
102 Centre, Street, Vulcan

Email: caleb.scott@vulcancounty.ab.ca

CONTACT INFORMATION

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