

| Office Use | Application ID | Date Received | Notes | Status/Initials | Office Use |
|------------|----------------|---------------|-------|-----------------|------------|
|            |                |               |       |                 |            |



## Rotational Grazing Supplementary Information for Equipment Purchases and Infrastructure for Virtual Fencing

Virtual fencing can be considered an eligible practice to support rotational grazing where traditional fencing is cost-prohibitive, logically complex, or environmentally disruptive. Supplementary information is intended to be used to outline the benefits of the proposed virtual fencing technology on the proposed project site over traditional fencing. Before final approval of your application can be given, OSCIA requires the following information to complete the application review.

**Please note:** This form must be completed by a third-party, qualified, agricultural professional (i.e., professional agrologist, agronomist, certified crop advisor, or rotational grazing specialist).

### PART A: PROJECT LOCATION INFORMATION

|   |                             |   |
|---|-----------------------------|---|
| Applicants Name   | Legal Name of Farm Business | Application ID<br><b>OFC- _____</b>                     |
| Total area (acres) of the proposed virtual fencing system |                             | Project Location (GPS Coordinates, Civic Address, etc.) |

### PART B: TECHNICAL INFORMATION ABOUT THE PROPOSED PROJECT

1. Please describe the current land use of the proposed project area:

2. Summarize the primary objectives of implementing this virtual fencing grazing system:

3. Describe the terrain of the project site that makes traditional fencing unsuitable (ex. floodplain, hillside, rocky terrain, etc.):

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4. Please provide an economic comparison of the proposed virtual fencing system to conventional fencing options:

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5. If applicable, please describe any environmental benefits of implementing virtual fencing technology on the proposed project site (e.g., habitat preservation, wildlife movement, etc.):

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#### PART C: QUALIFIED AGRICULTURAL PROFESSIONAL

This form must be completed by a third-party, qualified agricultural professional (i.e., professional agrologist, agronomist, certified crop advisor, or rotational grazing specialist).

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First and Last Name of Qualified Agricultural Professional

|              |               |
|--------------|---------------|
| Phone Number | Email Address |
|--------------|---------------|

Please provide a summary of rotational grazing qualifications, including professional designations, titles, training, and /or demonstrated experience planning, designing and supporting implementation of similar types of projects

|  |      |
|--|------|
| Signature of Qualified Agricultural Professional | Date |
|--|------|