

Soil Test Result and FSA Shape file

Release Form

Name and Farm Name if applicable:

Address:

City, State, Zip:

Phone Number:

Tract Number(s):

I _____, give the _____ County Conservation Office permission to receive my:

FSA field shape files

And / Or

Soil test results in SnapPlus format for the purpose of developing my SnapPlus Plan. Include laboratory number(s) if available _____

Soil Test Month and Year _____

I have taken my own soil samples

I have hired an agronomist to take my soil samples and have obtained their permission to release the soil samples.

I, _____, from _____, give the
Agronomist Signature business

_____ County Conservation office permission to receive the soil test results requested above.

Please email these files to:

County Contact _____

Landowner Signature

Date