Minnesota Actual Cost Data Collection Summary Sheet

Participant Name		**Contract Number**	
Contract Item #		**Practice Code**	
		Practice Name	

Additional Data (If Applicable):

402	**Dam**	Drainage Area (Ac)			
410	**Grade Stabilization Structure**	Drainage Area (Ac)			
412	**Grassed Waterway**	Bottom Width (ft)		Drainage Area (Ac)	
378	**Pond**	Drainage Area (Ac)			
725	**Sinkhole Treatment**	Fill (sq ft)			
313	**Waste Storage Facility (784 prior to 2007)**	Storage (cu ft)			
638	**Water & Sediment Control Basin**	Fill Height (ft)		Drainage Area (Ac)	

PRACTICE COMPONENTS

Amount	Unit	Description	$/Unit	Total

Totals

Total Expenses	
Cost Share Percentage	
Equals	
Not to Exceed	
Total Cost-Share Allowed	