

Green County Dairy Transition Assistance Program

Application Form

1. Business Information

Farm / Business Name: _____

Owner(s) Name(s) : _____

Address: _____

Phone Number: _____

Email Address: _____

2. Operation Overview

Briefly describe your dairy operation (herd size, products, years in operation, etc.):

[Short paragraph]

3. Succession & Transition Status

Do you currently have a succession or transition plan in place?

Yes

No

In Progress

If yes or in progress, briefly describe:

[Short paragraph]

4. Project Request

What type of assistance are you seeking? (check all that apply)

- Succession planning
- Ownership transfer strategy
- Financial transition modeling
- Estate/business planning
- Operational transition planning
- Strategic planning
- Other: _____

5. Project Description

In a few sentences, describe:

- What challenge are you trying to solve?
- What would success look like at the end of this project?

[Short paragraph]

6. Consultant Information

Do you already have a consultant you would like to work with?

- Yes
- No

If yes:

Consultant Name: _____

Organization: _____

Contact Information (if available): _____

7. Timeline & Readiness

When would you be ready to begin this work? _____
[Date or "Immediately"]

Can this project be completed by May 31, 2026?

- Yes
- No

8. Estimated Scope (if known)

If you have an idea, please estimate:

- Type of work needed: _____
- Approximate hours: _____
- Estimated cost (if known): _____

(Leave blank if unsure)

9. Acknowledgment

By submitting this application, I understand that:

- This program provides payment for consulting services, not direct cash funding
- GCDC must approve the project scope and consultant before work begins
- Funds are limited and awarded on a rolling basis

Signature: _____

Date: _____