



**BEEF INDUSTRY INCENTIVE
HANDLING FACILITIES**

Full Name <i>(including middle name)</i> :	
Business Name if applicable:	
Mailing Address <i>(include civic address)</i>	
	Postal Code:
SIN or Business # <i>(required for income tax reporting)</i>	
Telephone number:	

THE FOLLOWING DOCUMENTATION (✓) IS TO BE SUBMITTED WITH THIS FORM:

Proof of equipment purchase: _____

Date: _____ Applicant Signature: _____

For administrator use only:

Brief Description of handling facility:

Approved by: _____ Approval Date: _____

Personal information on this form is collected under Section 31(c) of the Freedom of Information and Protection Privacy Act R.S.P.E.I. 1988, c. F-15.01 as it relates directly to and is necessary for Beef Quality Improvement Program and will be used for determining eligibility for program assistance and issuing tax related receipts. If you have any questions about this collection of personal information, you may contact the Beef Development Officer, PEI Department of Agriculture, PO Box 1600, Charlottetown, PE, C1A 7N3, 902-569-7639.

For office use only:

Amount of Assistance: _____ Date: _____ Invoice #: _____

Account #: _____ Batch #: _____

Approval Signature(s): _____

Note: Supporting documentation is filed in the office of the Beef Development Officer, Department of Agriculture.

**Return to: Beef Development Officer, PEI Dept Agriculture, PO Box 1600,
Charlottetown, PEI C1A 7N3**