

FUTURE FARMER PROGRAM
Interest Rebate Assistance – APPLICATION FORM



Agriculture and Forestry

A copy of the approval letter from the applicant’s lending institution outlining the loan’s terms and conditions and the initial draw date of funds must accompany this application for interest rebate. The loan must be solely for farm related expenses. If there are more than one loan, please complete an application form for each.

Full Name of Approved Applicant:		SIN:
Name of Corporation (if applicable):		BIN:
Please indicate if the rebate is to be made payable to: <input type="checkbox"/> Applicant <input type="checkbox"/> Corporation		
Name of Lending Institution:		Branch:
Name of Loans Officer/Account Manager:		Direct Telephone Number:
E-mail Address of Loans Officer/Account Manager:		
Loan Number:		
Exact Name in Which the Loan is Held:		
Loan Approval Date:	Date of the First Draw of Funds:	
Purpose of the Loan (in detail):		
Amount Borrowed:	Interest Rate:	
Date that Applicant Wishes to Have the Rebate for this Loan Begin (must be at least 365 days after first draw date):		

An applicant by submitting a claim:

- certify that all the information provided is complete and correct.
- understand that personal information on this form is collected under Section 31c of the *Freedom of Information and Protection of Privacy Act* R.S.P.E.I. 1988 c. F-15.01 as it relates directly to and is necessary for the Growing Forward 2 Program being delivered as part of the Canada-Prince Edward Island Growing Forward 2 Framework and Bilateral Agreements. It will be used for determining eligibility for program assistance and will be shared with the Canada Revenue Agency regarding the taxable benefit and Agriculture and Agri-Food Canada, regarding program management, claims, audits, and evaluations of this program.
- agree that information provided for purposes of the Growing Forward 2 Program may be shared with the Canada Revenue Agency as it pertains to any potential taxable benefits, as well as with Agriculture and Agri-Food Canada or its agent regarding claims, audits, and evaluations as it relates directly to and is necessary for this contract being delivered as part of the Canada-Prince Edward Island Growing Forward 2 Framework and Bilateral Agreements.

I, certify that the information given on this application is to the best of my knowledge complete, true and accurate.

 Name of Applicant (Please print)

 Signature of Applicant

 Date

FOR OFFICE USE ONLY – Payment Authorization

Invoice #:	Amount Payable \$:
Account #:	Date:

Authorization: _____

Note: Supporting documentation is filed in the office of the Growing Forward 2, Future Farmer Program Manager.