

PRODUCT AND MARKET DEVELOPMENT PROGRAM

APPLICATION FORM

Project/Client #: (Office Use Only)

Section 1 - Applicant Information

Full Name (including middle name):

Business Name (if applicable):

Mailing Address:

Civic Address (if different than mailing address):

Village/Town/City	Province	Postal Code
Telephone No. Cellular Phone No.	Fax No.	E-mail Address

Type of Business. Choose one and complete the required information:

Individual Proprietorship (if you file to Canada Revenue Agency as an individual)
Social Insurance Number: _____

Incorporated Company (if you file to Canada Revenue Agency as a corporation)
(This number can be found on your tax forms and is required under the authority of the Income Tax Act)
Revenue Canada Business Number: _____

Partnership (if you file to Canada Revenue Agency as a partnership.)
Please include Revenue Canada Business Number and All Partner's Social Insurance Numbers
Revenue Canada Business Number: _____

Name of all Partners (for partnerships)	% of Ownership (Must total 100%)	Partners' Individual Social Insurance Numbers:

Section 2 - Project Detail

Project Title:

Identify other Provincial and Federal Government funding sources that have been applied for:

Have the source(s) confirmed funding (please check appropriate box):

Yes No

You are applying as (check one) - see definitions at the end of the application:

- | | |
|--|---|
| <input type="checkbox"/> Established Farmer | <input type="checkbox"/> Beginning Farmer |
| <input type="checkbox"/> Small to medium-sized Agri-Business | <input type="checkbox"/> Agri-Processor |
| <input type="checkbox"/> Provincial Commodity Association or Marketing Board | <input type="checkbox"/> Public or Academic Institution |
| <input type="checkbox"/> Land owner | <input type="checkbox"/> Other: _____ |

If the applicant is a farmer, check the principal commodity produced:

- | | | | | |
|--|---|---|--|---|
| <input type="checkbox"/> Beef | <input type="checkbox"/> Eggs | <input type="checkbox"/> Broilers | <input type="checkbox"/> Other Poultry | <input type="checkbox"/> Fruit |
| <input type="checkbox"/> Mixed | <input type="checkbox"/> Dairy | <input type="checkbox"/> Goats | <input type="checkbox"/> Vegetables | <input type="checkbox"/> Potatoes |
| <input type="checkbox"/> Grains and Oilseeds | <input type="checkbox"/> Swine | <input type="checkbox"/> Sheep | <input type="checkbox"/> Horses | <input type="checkbox"/> Greenhouse and Nursery |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other Crops: _____ | <input type="checkbox"/> Other Livestock: _____ | | |

This program requires answers to the following questions which will thoroughly describe the proposed project.

1. What descriptive title best describes your project?
2. Please describe your farm/agri business including a brief history and current product production?
3. Provide an overview of your proposed project?
4. What are the objectives of this project for your operation, your industry and the province?
5. What are the expected results of this project under the following conditions:
 - a. Optimal market conditions?
 - b. Anticipated or current market conditions?
 - c. Poor market conditions?
6. Explain the conditions and research which lead to the decision to initiate this project?
7. What are the expected economic benefits of this project to the following groups:
 - a. Your operation?
 - b. The provincial agriculture industry?
 - c. The province of Prince Edward Island?
8. How will PEI products be used in this project? Please include sources as well as quantities.
9. How will success or failure of this project be measured?
10. What is your plan for communicating the results of this project to the agriculture industry and the general public?
11. In chronological order, describe the individual activities which will lead to the completed project with start and end dates?
12. For each individual activity described above, provide the following details:
 - a. Outline the individuals or companies which will carry out each activities
 - b. Provide allotted time for completion.
13. Provide a detailed budget which identifies all project costs as well as the funding requested from the Project and Marketing Development Program.
14. Include with this application a business and/or marketing plan for your operation and the proposed project. This is not a requirement for investigative travel projects.
15. If a business coach is to be hired through this program, please include their resume and proof of conflict of interest certification.
16. Please include additional information which you feel is important in the consideration of this project.

Section 3 - Declarations and Consent to Use Personal Information

By submitting this form for benefits under the Growing Forward 2 Programming, I/We:

- 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
- agree to participate in an evaluation and/or audit of the program
- understand that failing to comply with all application requirements may delay the processing of the application, or may render me ineligible for receiving assistance under the program
- understand and agree that the social insurance number (SIN) and the business number are collected under the authority of the *Income Tax Act* for the purposes of reporting income
- acknowledge that my/our completing this application form and by receiving advice from PEIDAF or other Growing Forward 2 Program delivery agent does not oblige PEIDAF or other delivery agents to provide funding
- understand that expenses incurred prior to the submission of an approved application are not eligible for assistance under this program.
- consent to the public release of my/our name, the amount of funding received, and the general nature of the project.

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

Name of Applicant/ Signing Officer
(Please print)

Signature of Applicant/Signing Officer

Date

Section 4 - Submitting the Application

Please submit completed application form or direct inquiries to:

Product and Market Development Lead
PEI Department of Agriculture and Fisheries
PO Box 2000, 5th Floor Jones
Charlottetown, PE C1A 7N8
Telephone: (902) 940-0871
Fax: (902) 368-4857
Email: dldoyle@gov.pe.ca

Date Application Received (Office Use Only)

Date Application Completed (Office Use Only)

Date Application was Approved (Office Use Only)