

AGRICULTURE RESEARCH AND INNOVATION PROGRAM Innovative Technologies

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)

- Agricultural Producer Multi-applicant Project
 Agriculture Industry Organization Other: _____
 Group of Producers

Check the principal commodity produced:

- Beef Eggs Broilers Other Poultry Fruit
 Mixed Dairy Goats Vegetables Potatoes
 Grains and Oilseeds Swine Sheep Horses Greenhouse and Nursery
 Other: _____ Other Crops: _____ Other Livestock: _____

This program requires a short (1-2 page) project proposal using all of the following headings to describe the project:

- **Title:** *Provide a descriptive title for your project*
- **Overview:** *Provide a brief overview of the project*
- **Objective:** *Identify the project objective(s)*
- **Background:** *Provide a summary of your operation and why you feel this project is important, timely and innovative to your operation.*
- **Description:** *Outline what work will be carried out, by whom, what equipment is involved
Describe how results will be measured.*
- **Impacts:** *Explain how the project will be evaluated. State the expected benefits to the agricultural industry of Prince Edward Island.*
- **Communication:** *Describe how the results will be communicated*
- **Milestones:** *Identify the start date and end date of project
List in chronological order the activities, time allotted per activity, and expected completion date of each. Include the submission date for the final report.*
- **Budget:** *Identify total project costs including a breakdown of specific items required and funding requested.*
- **Overview of the Business**

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:

Innovative Technologies Program
PEI Department of Agriculture and Fisheries
PO Box 2000, 5th Floor Jones
Charlottetown, PE C1A 7N8
Telephone: (902) 314-0825
Fax: (902) 368-4857
Email: sdmackinnon@gov.pe.ca

Date Application Received (Office Use Only)

Date Application Completed (Office Use Only)

Date Application was Approved (Office Use Only)