AGRICULTURE STEWARDSHIP PROGRAM APPLICATION FORM

Project/Client #: (Office Use Only)

Section 1 - Applicant Information			
Full Name (including middle name):			
Business/Farm 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:

Growing Forward 2

Prince Edward Island CANADA

Canada

Section 2 - Project Detail A separate section 2 forms must be completed for each individual project. Several Section 2 forms may be included in the same package.

If the applicant is a farmer, 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: _____

Check ONE BMP category from chart below, and fill the appropriate section:
Section A is to be used for all BMP's EXCEPT Crop Residue Management, Residue Tillage, Furrow Damming, and Strip cropping. Please use section B for those BMP's.

1. Soil Management
__ Erosion control structures
__ Crop residue management
__Primary residue tillage – spring or fall
__Furrow damming
__Strip cropping

2. Storage Management
__ On-farm fuel storage; double walled tanks only
__ On-farm pesticide storage
__ On-farm silage storage
__ Improved manure storage
__ Covered feedlot – Impermeable base and roof

3. Buffer/Riparian Area Management
__ Alternate Watering Systems
__ Improved stream crossing for farm machinery
__ Power to remote sites for alternate watering systems
__ Livestock fencing and livestock stream crossings

4. Water Management
__ Agricultural water quality
__ On-farm water use efficiency
__ Improved irrigation efficiency
__ Sustainable agricultural water supply
__ Well water management

5. Nutrient/Pest Management
__ Nutrient management planning
__ Rotational Crops for Pest Management and Nutrient Reduction Loss

6. Energy Management
__ On-farm energy efficiency

Part A) Complete the table below to describe the project details, who will supply the work and the estimated cost for the proposed project.

Building Permit # (if applicable):	**Property Tax Number:**

Project Detail (includes materials, services, labour, equipment)	**Supplier**	**Estimated Cost**
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
	Total	$
Eligible Cost Sharing (office use only)		
Total		

Part B) Complete the table below for soil management BMP's for **all** fields/properties.
Crop Residue Management (CRM), Residue Tillage (RT), Furrow Damming (FD), and Strip cropping (SC).

BMP Activity	Property ID #	Acreage	BMP Activity	Property ID #	Acreage
1)			8)		
2)			9)		
3)			10)		
4)			11)		
5)			12)		
6)			13)		
7)			14)		
Eligible Cost Sharing (office use only)	____ @ $15/Acre		____ @ $20/Acre	____ @ $25/Acre	
Total					

Conflict of Interest: check and Initial the conflict of interest statement that best describes your situation.
Referring to Conflict of Interest Guidelines:

☐ To the best of my knowledge and belief, I am involved in no situation or action that might be regarded as a potential conflict of interest with the consultants/contractors/suppliers mentioned above.
_____ (initials)

☐ It appears that I am involved in some situation or actions that might be regarded as a potential conflict of interest with the consultants/contractors/suppliers listed above. *YOU MUST COMPLETE CONFLICT OF INTEREST DECLARATION FORM*

The following declarations are specific to the Agriculture Stewardship Program:

- I/We have/we will complete an up to date Environmental Farm Plan by claim date of project.
- I/We shall provide the Province original invoices and proof of payment as required, detailing eligible costs upon completion of the project.
- I/We agree to comply with Federal and Provincial and Municipal legislation, including Environmental Protection legislation and Regulations, and to report any negative impact on the environment to the Minister immediately. I/We shall immediately cease any activity which is suspected to be the cause of any unacceptable level of pollution or environmental damage and such activity shall not be resumed until the matter is reviewed and the Minister gives his/her consent to the resumption of the activity.
- All physical works constructed or installed through the ASP shall be maintained by the applicant to satisfy the program objectives for a minimum fifteen (15) year period. If the physical works constructed or installed are not maintained for the minimum fifteen (15) year period, the Project Operator agrees to repay the Minister for the full financial benefit which accrued to the Project Operator and the Property under the CPEIASP Agreement. This amount shall be calculated by the Minister and the Project Operator will be invoiced by the Provincial Treasurer. The amount owing, plus interest calculated at the rate of 5% per year, shall be calculated from the date of the invoice and shall be repaid to the Provincial Treasurer within thirty (30) days of receipt of the invoice.
- Recipients of funding under the Agriculture Stewardship Program are consenting to the public release of their name, the amount of funding received, and the general nature of the project.
- I/We declare that we are the owner of the property as indicated on Part A of this application or have obtained the owner's permission to enroll the property in the Agriculture Stewardship Program (ASP).

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.

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:

Daniel Muir - Agriculture Stewardship Program Officer
PEI Department of Agriculture and Fisheries
PO Box 2000, 5th Floor Jones Building
Charlottetown, PE C1A 7N8
Telephone: (902) 894-0340
Fax: (902) 368-4857
Email: dfmuir@gov.pe.ca

Date Application Received (Office Use Only)	**Date Application Completed (Office Use Only)**

Signature of Project Advisor and Date Application was Approved (Office Use Only)