

Livestock Development Program Beef – Herd Health

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:		
<input type="checkbox"/> Individual Proprietorship (if you file to Canada Revenue Agency as an individual) Social Insurance Number: _____		
<input type="checkbox"/> Incorporated Company (if you file to Canada Revenue Agency as a corporation) <i>(This number can be found on your tax forms and is required under the authority of the Income Tax Act)</i> Revenue Canada Business Number: _____		
<input type="checkbox"/> Partnership (if you file to Canada Revenue Agency as a partnership.) <i>Please include Revenue Canada Business Number and All Partner's Social Insurance Numbers</i> Revenue Canada Business Number: _____		
Name of all Partners (for partnerships)	% of Ownership Must total 100%	Partners' Individual Social Insurance Numbers:

Section 2 – Herd health details

Member of the Prince Edward Island Cattle Producers (√): Yes No

Attended a Verified Beef Production course (√): Yes No

Premise ID _____

Required Documentation For Cow-Calf Producers:

Number of mature females in the herd: _____

To be eligible for the Herd Health sub-program the application only must be received by December 31, 2015. Remaining documentation must be received by **March 1, 2016**

- This includes:**
- 1) Questionnaire *
 - 2) Summary Sheet
 - 3) Vaccine and Dewormer receipts
 - 4) proof of payment (cancelled cheque, credit card or 'account paid')

***Completed questionnaire showing dates when cows and calves were treated (vaccinated, dewormed, castrated and dehorned).**

Required Documentation For Feedlot Producers

- 1) Completed affidavit from cow-calf supplier
- 2) Receipts for Vaccine/Dewormer receipts for feeders identified on the affidavit
- 3) Proof of payment for vaccine/dewormer (cheque, credit card or 'account paid')

For office use only:

Vaccine and dewormer receipts

Amount of Assistance: \$ _____

Completed questionnaire (cow/calf)

Approval Signature(s): _____

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:

Beef Development Program

Rinnie Bradley

PEI Cattle Producers

420 University Av

Charlottetown, PE

C1A 7Z5

Telephone: (902) 368-2229 Fax: (902) 367-3082

Email: Cattlemen@eastlink.ca



Date Application Received (Office Use Only)

Date Application Completed (Office Use Only)

Date Application was Approved (Office Use Only)