

| Identification Number | Subscription | AgriStability PIN - add zeros at front to equal 8 digits |
|-----------------------|--------------|--|
| 8 7 0 _____ | _____ | _____ |

| Participant Information: | | | | |
|---|-----------------------------|-------------|----------|----------------|
| Legal Name _____ | | | | |
| Business Address _____ | | | | |
| _____ | | | | |
| City | Province | Postal Code | | |
| Contact Person (for corporations) _____ | | | | |
| Phone _____ | BN (for corporations) _____ | | | |
| Fax _____ | SIN (for individuals) _____ | | | |
| Email _____ | Home Quarter _____ | | | |
| | Part | Section | Township | Range Meridian |

Freedom of Information and Protection of Privacy Act

The information on this form, and any information you provide to us in the future related to this form, is collected under the authority of the *Agriculture Financial Services Act* (Alberta) and the *Freedom of Information and Protection of Privacy Act* (Alberta) (the “**FOIP Act**”). The collected information, whether personal information or business information, will be used: (i) to evaluate your eligibility for the program to which this form relates; (ii) for the administration of the program; and/ or (iii) for the administration of any other AFSC program or benefit in which you participate. Your personal information is subject to the provisions of the FOIP Act.

By submitting this form, you are providing your consent to AFSC disclosing and sharing the information contained on this form, whether personal information or business information, or any other information that will be provided in the future by you or your authorized representative, to the following third parties: B.C. Ministry of Agriculture, Alberta Ministry of Agriculture and Forestry, Saskatchewan Ministry of Agriculture, Saskatchewan Crop Insurance Corporation, Manitoba Ministry of Agriculture and Resource Development, Manitoba Agriculture Services Corporation, Agriculture and Agri-Food Canada, Canada Revenue Agency and Statistics Canada. You consent that such disclosed and shared personal information and business information may be used in the following ways: (i) for the administration of all current and future AFSC, federal and provincial programs related to agriculture, AFSC lending programs and AFSC insurance programs; (ii) for AFSC, federal and provincial policy and program development; (iii) for AFSC, federal and provincial policy and program evaluation; (iv) for AFSC, federal and provincial program compliance; (v) for research development; and (vi) for statistical purposes.

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|----------------------------|----------------------|------------------------|
| Do Not Use This Area | Date Stamp – primary | Date Stamp – secondary |
|----------------------------|----------------------|------------------------|

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Participant Declaration:

I/We, the Participant(s), either on my/ our own behalf or on behalf of the corporate Participant:

Certify that all information submitted on this application is accurate, true and correct;

Certify that I/ we are the only persons making application for the livestock and costs listed within this application;

Understand that it is my/our responsibility to ensure that I/we understand, meet, accept, and are in compliance with, the Terms and Conditions of the Initiative, a copy of which I acknowledge having received by submitting this application;

As outlined in the Terms and Conditions, if it is determined that the Participant has submitted any false or misleading information, any funds they have received will be required to be repaid in full;

Any false or misleading information submitted by the Participant may impact any future participation in AFSC's programs;

Certify that I/ we will supply, on request, to Agriculture Financial Services Corporation ("AFSC"), or its agent, any documentation AFSC considers necessary to administer the Initiative;

Consent to third parties, including Canada Revenue Agency ("**CRA**"), disclosing to AFSC, upon request made by AFSC, or its agent, any information pertaining to me/ us or my/ our financial affairs which AFSC considers necessary for the purpose of administering the Initiative;

Consent to on-site audits by AFSC, or its agents, at any time, to verify eligibility and to evaluate and enforce the provisions of the Initiative, and agree that any such on-site audits shall not constitute trespass;

Consent that AFSC may review, as necessary, information held by other government entities related to other programs in which I/ we am/ are enrolled to verify the information provided on this application form; and

Understand that the Social Insurance Number or Business Number disclosed on this form is collected and disclosed under the authority of the *Income Tax Act* (Canada) for the purposes of reporting income.

I have reviewed, and I agree to be bound by, the terms and conditions of the 2021 Canada-Alberta Livestock Feed Assistance Initiative - Secondary Payment.

Eligibility Questions

1. Are you an individual at least 18 years of age, Canadian citizen or permanent resident of Canada residing in Alberta; or a corporation whose majority of voting shareholders are resident in Alberta
2. Do you report income and expenses in Alberta for income tax purposes; or can you provide documentation that demonstrates the production and sale of agricultural commodities
3. Are you responsible for feeding and primary care of Eligible Animals and/or Eligible Colonies/Hives located in Alberta

Do all three eligibility criteria questions above apply?

If you have any questions about this form and the collection and use of your information, please contact AFSC at, 5718 - 56 Avenue, Lacombe AB T4L 1B1, 1.877.899.2372 or info@afsc.ca

For individual participants the individual must sign. For corporations, and other entities, authorized signatories must sign.

Participant Signature: _____ Date: _____

Print Name: _____

(Either individual, or authorized signatory on behalf of the corporate Participant, as the case may be)

Completed applications may be submitted by fax 403.782.8441 or dropped off at AFSC Branch. All applications must be received by AFSC no later than 11:59 p.m. on January 31, 2022 to be considered for this initiative.

Continued on next page

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Bee Assistance

- This secondary payment application is for inventory of eligible breeding females on hand as of December 31, 2021, and/or eligible colonies/hives on hand as of August 27, 2021
- Eligible hives must be 100 or greater
- If any changes are required after the application is submitted, contact AFSC for assistance

Complete this section if you are you a bee keeper and reporting your expenses for bee feed assistance.

Annual Registration Number – Enter the annual registration number issued by the Office of the Provincial Apiculturist

Premises ID – Enter the Premises ID for where the bees are overwintered

of Colonies/Hives – Enter the number of Colonies/Hives Registered with the Office of the Provincial Apiculturist that were on hand as at Aug 27, 2021

| ANNUAL REGISTRATION NUMBER | PREMISES ID | # OF COLONIES/HIVE (min 100) |
|----------------------------|-------------|------------------------------|
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Type of Expense – Enter in either syrup or pollen patties

Expense Date – Enter date of purchase receipt

Expense \$ including GST – enter full expense amount

GST amount – enter GST amount if GST is applicable

| TYPE OF EXPENSES | EXPENSE DATE (d-mmm-yy) | EXPENSES \$ INCLUDING GST | GST AMOUNT |
|------------------|-------------------------|---------------------------|------------|
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Livestock Assistance

Complete this section if you are reporting on eligible breeding females for feed assistance.

Premises ID – Enter the Premises ID for where the animals are located

Type of Eligible Animal – enter an eligible animal type from this list

1. Cow (beef) - Bred Cow
2. Cow (beef) - Bred Heifer
3. Bison - Bred Cow
4. Bison - Bred Heifer
5. Horses - Brood Mare
6. Sheep - Ewe
7. Goats - Nanny
8. Elk - Cow
9. Deer - Doe
10. Alpacas - Female(Hembra)
11. Llamas - Female
12. Musk Ox - Cow
13. Yak - Cow
14. Other

Animals/Units – enter the total # of breeding females, of this animal type, on hand, as at December 31, 2021- Minimum 10 head or greater for each livestock type is required

Normal Grazing Start date - enter the date Eligible Animals were placed in pasture (date cannot start prior to June 1, 2021)

Normal Grazing End Date - the date Eligible Animals would have been removed from pasture in a normal grazing season (date cannot be later than Dec 1, 2021)

CHANGED FEEDING PRACTICE START DATE - Enter the date when you were required to make changes to normal grazing practices due to dry conditions. This would include various drought management strategies such as: early weaning, feeding of stockpiled feed, securing additional pasture, creep feeding calves, grazing cropland/hayland, providing additional supplement, removing/moving animals to other locations earlier than normal etc.

| PREMISES ID | TYPE OF ELIGIBLE ANIMALS | # OF ANIMALS/UNITS | NORMAL GRAZING START DATE (d-mmm-yy) | NORMAL GRAZING END DATE (d-mmm-yy) | CHANGED FEEDING PRACTICE START DATE (d-mmm-yy) |
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Eligible Expenses and Mileage Assistance

Type of Expenses - enter an expense type from the seven eligible expense categories

1. Feed
2. Temporary Water Provision - Cost of Water
3. Temporary Water Provision - Other than Cost of Water
4. Temporary Fencing
5. Pregnancy Tests
6. Transportation Costs - Custom, with Receipt,
7. Other Activities for Feed and Herd Maintenance - note:
selection of Other Activities for Feed and Herd Maintenance
will require additional follow up by AFSC

Expense Date – Enter date of purchase receipt

Expense \$ including GST – enter full expense amount

GST amount – enter GST amount if GST is applicable

| TYPE OF EXPENSES | EXPENSE DATE (d-mmm-yy) | EXPENSES \$ INCLUDING GST | GST AMOUNT |
|------------------|-------------------------|---------------------------|------------|
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Type of Expenses - enter an expense type - Transportation Costs – Mileage, without Receipt

Description - Enter a description of the extraordinary transportation activity required relating to the hauling of feed, water or animals

Transportation Date - Enter date of the extraordinary activity

Mileage (KM) - Enter kilometers for Transportation costs not supported by receipts related to hauling feed, water or animals

| TYPE OF EXPENSES | DESCRIPTION | TRANSPORTATION DATE (d-mmm-yy) | MILEAGE (KM) |
|---|-------------|--------------------------------|--------------|
| Transportation Costs – Mileage, without Receipt | | | |
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NOTE: Expense Items claimed should relate to extraordinary activities/purchases that you were required to make due to drought conditions (should not include standard expenses that occur in a normal year)

If you require additional lines for a certain section of this application, please reprint and submit an additional page along with full application.