

2026 AgriStability Historical Productive Units Form

New or Returning Participants – Optional Reference Margin

Identification Number	AgriStability PIN - add zeros at front to equal 8 digits	Business Name
8 7 0		

Historical Productive Units Information

Use the commodity dropdown menus in the table below to identify your historical productive units. Based on whether you elect to have your reference margin calculated using three (3) or five (5) years, provide the historical productive units, excluding landlord share, for either 2023-2025 (3 years) or 2021-2025 (5 years). If you have multiple farming operations, historical productive units must be provided for all operations. Additional historical productive unit forms and further instructions for completing this form are found in the AgriStability Historical Productive Units Guide at www.afsc.ca.

Historical Productive Units					
Farm Operation Name: _____			Farm Operation _____ of _____		
Commodity	2021	2022	2023	2024	2025
	Complete for 3 or 5 years based on your Reference Margin selection				
Crop & Forage Basket (excluding landlord share)					
Beef					
Market Hogs					
Specialty Crops (excluding landlord share), Greenhouse and Other Livestock					

Do Not Use This Area	Date Stamp – primary	Date Stamp – secondary
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AFSC Privacy Collection Notification

AFSC collects information for the purpose of operation and administration of our programs and services. Any information you provide to us related to this purpose, whether personal information or business information, (the “**Collected Information**”) is collected under the authority of the *Protection of Privacy Act* (Alberta) under section 4(c). AFSC may use the Collected Information in automated systems to generate content and to make decisions, recommendations and predictions.

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

Client Declaration

I declare that all of the information provided in this form is accurate and true and I understand that I must notify the Agriculture Financial Services Corporation (AFSC) immediately if I discover that any of the information contained in this form is inaccurate or untrue. Should the information I provided not be accurate or true, I agree that AFSC may cancel any application or approved subscription issued in reliance on such provided information.

For individual participants, the individual must sign. For corporations and other entities, authorized signatories must sign. All partners must submit a separate form.

Print Client Name _____
First Name _____ Middle Name _____ Last Name _____

Client Signature _____ Date _____

Reset Form