

Livestock Development Program - BEEF APPLICATION FORM

Genetic Innovations & Feed Efficiency

2016

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:

General information and sub-program categories

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

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

Premise ID _____

Beef Initiative Components:

Please check (✓) the programs you are applying for:

Genetic Innovations:

Seed stock testing: Bulls Heifers

Replacement Purebred Heifers:

Replacement Commercial Heifers:

Premium Sires: Purebred F1 Hybrid

Mature bulls, Breeding soundness exam:

Feed Efficiency

Feed analysis:

Pasture soil analysis:

Ration formulation:

Source and Age Verification protocols:

Trace mineral supplement injectable/bolus :

Livestock scales:

Livestock handling systems:

Section 2a – Seed Stock Testing details (STATION TESTED or HOME TESTED)

Purebred bull tattoo numbers – at the Nappan Test Station

Please submit (✓) the following with this application form

Registration papers

Sub-total: \$ _____

Purebred bull tattoo numbers – home tested bulls

Please submit (✓) the following with this application form

Registration papers

Genetic evaluation results (e.g. Igenity, Zoetis)

Breeding Soundness Exam Certificate

Sub-total: \$ _____

Mature Bull Tattoo numbers - Breeding Soundness Exam:

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Breeding Soundness Exam Certificate – including semen test

Sub-total: \$ _____

Amount of Assistance for Seed Stock Testing : \$ _____

Approval Signature(s): _____ Date: _____

Section 2b – Replacement Heifer details – Purebred and Commercial

Number of mature breeding females in the herd: _____

Purebred heifer tattoo number:

Please submit (✓) the following with this application form

- Pregnancy Check or verified calf at side:
- Registration papers :
- EPD information (if not on registration paper):
- Genetic test certificate (e.g. Igenity):

Commercial Heifer CCIA Tag numbers

Please submit (✓) the following with this application form

- Pregnancy Check:
- Weaning weight data – entire calf crop :

For office use only:

Amount of Assistance for Heifers : \$ _____ Date: _____

Approval Signature(s): _____

Comments:

Section 2c – Premium Sire details (Bull Bonus)

Purebred bull tattoo information:

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Please submit (✓) the following with this application form

- Registration papers :
- EPD information (if not on registration paper):
- Breeding Physical Soundness Exam (vet check) :
- Genetic test certificate (e.g. Igenity,Zoetis):
- RFI tested :

Hybrid F1 bull information:

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- Registration Papers – Sire and Dam:
- Breeding Physical Soundness Exam (vet check) :
- Proof of purchase - (cancelled cheque):
- Genetic test certificate (e.g. Igenity):
- RFI tested :

If bull was tested outside of the Maritimes please submit ROP information

For office use only:

Tattoo/Id: _____ Adjusted yearling weight: _____
EPD's : Yes No ; **Genetic ratings:** Yes No ; **RFI rating :** Negative Positive N/A

Tattoo/Id: _____ Adjusted yearling weight: _____
EPD's : Yes No ; **Genetic ratings:** Yes No ; **RFI rating :** Negative Positive N/A

Tattoo/Id: _____ Adjusted yearling weight: _____
EPD's : Yes No ; **Genetic ratings:** Yes No ; **RFI rating :** Negative Positive N/A

Tattoo/Id: _____ Adjusted yearling weight: _____
EPD's : Yes No ; **Genetic ratings:** Yes No ; **RFI rating :** Negative Positive N/A

Amount of Assistance for Premium Sires: \$ _____ : Date: _____

Approval Signature(s): _____

Section 2d – Feed Efficiency details

Number of mature females in the herd: _____

Property number(s) of pasture land _____

Check (\checkmark) which components of the program apply and attach receipts and proof of payment

- Pasture soil analysis \$ _____ @ 50% = \$ _____
- Feed analysis \$ _____ @ 50% = \$ _____
- Ration formulation costs \$ _____ @ 50% = \$ _____
- Age Verification (Attach copy of CCIA birth certificate) \$50/herd \$ _____
- Number of mineral boluses used # _____ @\$8/double bolus = \$ _____
- Trace mineral – injectable \$ _____ @ 75% \$ _____
- Livestock Scales \$ _____ @ 50% \$ _____
- Handling system \$ _____ @ 50% \$ _____

For office use only:

Amount of Assistance for Feed Efficiency : \$ _____ Date: _____

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)

Version 1.2, Last Revised July 13, 2016