

Identification Number			Year
8 7 0 ?			?

Client Information	
Business Name ? <small>(If individual, list surname first)</small>	
Business Address	
Phone Number ()	Fax ()
Email Address	
Contact Person (Must be an Applicant, or Shareholder of the company) ?	
Applicant Type – Choose one	WLPIP Office: ?
<input type="checkbox"/> Individual – Also complete a Personal Information Form <input type="checkbox"/> Corporation – Provide Business or Trust Number: ? <input type="checkbox"/> Informal Partnership – Individuals must complete a Personal Information Form <input type="checkbox"/> Legal Partnership – Provide Business Number:	

Shareholder Details ?				
	Surname/First/Middle Names	Phone	Address	Share %
1				?
2				
3				
4				
5				
6				

Complete and return this form to AGRI.WesternLivestockPriceInsuranceProgram@gov.bc.ca or by fax to BRMB at 1.250.861.7490 or to any local BC Ministry of Agriculture office.

Do Not Use This Area	Date Stamp	Do Not Use This Area
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The personal information on this form is collected under the authority of the Farm Income Insurance Act, RSBC 1996. Your information is protected by and is subject to the provisions of the Freedom of Information and Protection of Privacy Act. We collect only what is necessary for the administration of the Western Livestock Price Insurance Program and the operation of the program's online systems and the provision of requested materials to you. Your information will be shared with the Alberta Financial Services Corporation for the purposes of administering the program and may also be used for the administration of all BRM programs, to advise you about BRM programs and services, for policy and program development and evaluation, and for research and statistical purposes. Your information may be shared with Agriculture and Agri-Food Canada for policy and program development and evaluation and for research and statistical purposes. Questions about the collection of information should be directed to: Business Risk Management Branch, 200 - 1690 Powick Rd., Kelowna, BC V1X 7G5 1-888-332-3352.

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Program Eligibility ?

Application for Calf Fed Feeder Hogs
 Questions 1 to 4 must be answered "Yes"

- Yes No Client files or intends to file farm Income (or Loss) for tax purposes in the Province of British Columbia as required under the *Income Tax Act* (Canada)
- Yes No Eligible Livestock are/will be owned by the applicant
- Yes No Client (if an individual) is 18 years of age or older
- Yes No Client's greatest amount of income from Eligible Livestock would be reportable in British Columbia under the *Income Tax Act* (Canada) or be a Status Indian who carried on the business of farming on a reserve in Western Canada.

Authorization ?

Only applicants and parties with written authorization are allowed to give or receive information about this account.

Check here if you want the legal document (Authority Form – WLPIP) required to designate an Authorized Representative to act on behalf of the client, for all matters regarding WLPIP or for a "Person to only receive Information". Until the document is received from you completed and signed, the Insurer will not provide or receive information from anyone other than the client.

Client Declaration ?

Cheques and correspondence will be sent to the "Client" shown as the Business Name.

I (the Applicant) declare that all the information contained in this application is accurate and true and understand that I must notify the Insurer in writing immediately if this business undergoes a change in clients or I discover that any of the information contained in this application is inaccurate or untrue.

	Client Signature	Date
1		
2		
3		
4		
5		
6		

BC Ministry of Agriculture Office Use Only

Comments _____

Approved by _____ Signature _____ Date _____