

Identification Number	Subscription		Year
8 7 0 _____	-		

Client Information
Business Name _____ Business Address _____ Contact Person (Must be a Client, or Shareholder of the company) _____

Program:
<input type="checkbox"/> Fed <input type="checkbox"/> Feeder <input type="checkbox"/> Calf <input type="checkbox"/> Hog This document is to authorize the cancellation of one or more active Livestock Price Insurance policies. Please indicate the policy number(s) below: Policy Number(s) for Termination _____ Please submit this completed document in person at your local BC Ministry of Agriculture, Food and Fisheries office, fax to 1.855.700.2372 or email to info@lpi.ca . If you require additional means to submit your intent, or have questions, please call your local BC Ministry of Agriculture, Food and Fisheries office to speak with a LPI Representative.

Client Declaration
By signing this document I (we) declare that <ul style="list-style-type: none"> ● I (we) accept that all cancelled policy's premiums paid will be forfeited and any outstanding cancelled policy's premiums must be paid in full to the Insurer. ● I (we) accept that the cancellation will be accepted upon receipt by AFSC. ● I (we) accept a new policy, under the same program, for the same livestock as the cancelled policy may not be purchased, until such a time as the cancellation is received by AFSC. ● I (we) accept to give up all rights to the cancelled policy. Client Signature _____ / _____ Date _____ <div style="text-align: center; margin-left: 300px;">Print Name</div>

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 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.