

Identification Number			Year
8 7 0			

Client Information	
Business Name _____ (If individual, list surname first)	
Business Address _____	
Phone Number ( ) _____	Fax ( ) _____
Cell Number ( ) _____	
Email Address _____	
Contact Person (Must be an Applicant, or Shareholder of the company) _____	
Applicant Type – Choose one	LPI Office: <input type="text"/>
<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				

**Complete and return this form to any local SCIC office, or fax to 1.306.728.7202.  
If you have any questions, please call 1.888.935.0000.**

Do Not Use This Area	Date Stamp	Do Not Use This Area
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SCIC recognizes the sensitivity of your personal information. Any personal or business information given to SCIC for the purpose of the Program, may be shared with the AFSC and/or AAFC for the purposes of the Program. Your personal information is subject to the provisions of the Freedom of Information and Protection of Privacy Act (Saskatchewan) (the FOIP Act) and will be protected according to the FOIP Act, The Saskatchewan Crop Insurance Corporation Act, and other applicable Saskatchewan statutes, regulations, and SCIC privacy policies. You agree that SCIC, AFSC, and AAFC may archive your personal information for the purpose of administering the Program and as required by Federal and Provincial legislation, including but not limited to The Archives Act. For all privacy concerns related to this program, please contact SCIC's Privacy Manager at 306.728.7200 or email [securityofficer@scic.ca](mailto:securityofficer@scic.ca)

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## Program Eligibility

Application for ☐ Cattle ☐ Hog

Questions 1 to 4 must be answered "Yes"

1. ☐ Yes ☐ No Client files or intends to file farm Income (or Loss) for tax purposes in the Province of Saskatchewan as required under the *Income Tax Act* (Canada)
2. ☐ Yes ☐ No Eligible Livestock are/will be owned by the applicant
3. ☐ Yes ☐ No Client (if an individual) is 18 years of age or older
4. ☐ Yes ☐ No Client's greatest amount of income from Eligible Livestock would be reportable in Saskatchewan 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 – LPI) required to designate an Authorized Representative to act on behalf of the client, for all matters regarding LPI 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.

## Conflict of Interest

☐ The Livestock Price Insurance applicant acknowledges that individuals who are subject to the provisions of the Conflict of Interest Act (S.C. 2006, c. 9, s. 2), the Conflict of Interest Code for Members of the House of Commons, the Ethics and Conflict of Interest Code for Senators, the Values and Ethics Code for the Public Sector or any other conflict of interest and/or values and ethics codes applicable within provincial or territorial governments or specific organizations, shall not derive any direct benefit resulting from this application unless the provision or receipt of such benefit is permitted in such legislation, policy or codes.

## Consent Statement and Client Declaration

I (the Applicant) declare that all the information contained in this application is accurate and true and understand that I must notify the Saskatchewan Crop Insurance Corporation (SCIC) 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.

The information on this form, and any information you provide to us in the future related to this form, whether personal information or business information, will be used: (i) to evaluate your eligibility in the Livestock Price Insurance Program (the Program) to which this form relates; (ii) for the administration of the Program; and (iii) for the release by SCIC to Agriculture Financial Services (AFSC), Agriculture and Agri-Food Canada (AAFC) any information in SCIC's possession related to the Applicant's participation in the Program.

	Client Signature	Date
1		
2		
3		
4		
5		

## SCIC Office Use Only

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_  
For SCIC