

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:																																			
Hours to Claim: Tuesday from 2:00pm to 11:00pm MT (Alberta); 5:00pm to 2:00am Atlantic																																			
<input type="checkbox"/> Feeder <input type="checkbox"/> Calf																																			
Date to Claim: _____ (As offered within the Calendar of Insurance)																																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 12.5%;">Invoice Number</th> <th style="width: 12.5%;">Policy Number</th> <th style="width: 12.5%;">Option</th> <th style="width: 12.5%;">Total Insured Weight (CWT)</th> <th style="width: 12.5%;">Claim Request (CWT)</th> <th style="width: 12.5%;">Remaining Weight to Claim on Policy (CWT) (Optional)</th> <th style="width: 12.5%;"><i>Office Use</i></th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <th style="text-align: center;">Claim Request Number</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	Invoice Number	Policy Number	Option	Total Insured Weight (CWT)	Claim Request (CWT)	Remaining Weight to Claim on Policy (CWT) (Optional)	<i>Office Use</i>							Claim Request Number																					
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Need assistance? Call LPI at 902-957-2606 Please return this form to projects@agricommodity.ca																																			

Client Signature
Client Signature _____ / _____ Print Name
Contact Number _____ Date _____ Time _____

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 New Brunswick Agricultural Insurance Act. Your information is protected by and is subject to the provisions of the New Brunswick Right to Information and Protection of Privacy Act. We collect only what is necessary for the administration of the Maritime Livestock Price Insurance Pilot Program. Your information will be shared with the Agriculture Financial Services Corporation for the purposes of administering the program. Your information may be shared with Agriculture and Agri-Food Canada for policy and program development, program evaluation and/or research and statistical purposes. Questions about the collection of information should be directed to the New Brunswick Department of Agriculture, Aquaculture and Fisheries.