

Identification Number			Year
8 7 0 _____			_____

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

Designate what ability you want the person or business listed below to have:	
<input type="checkbox"/> Authorized Representative (can act on behalf of livestock owner, through livestock owner's account)	<input type="checkbox"/> Person to Receive Information (may only receive information, not conduct business on behalf of livestock owner)
Representative's Full Name: _____	
Representative's Address: _____ _____	
Phone Number: _____	
I agree to the terms and conditions of the Contract of Insurance and hereby appoint the party named above to act on my behalf in the Livestock Price Insurance Program. I agree that I will not insure the same livestock through myself or another Authorized Representative and I am aware that I may be audited according to the terms and conditions of the Contract of Insurance. This authorization once provided to and accepted by the Insurer remains in effect until I inform the Insurer otherwise in writing.	
Signature of Insured _____ / _____ Print Name Date _____	

Complete and return this form to projects@agricommodity.ca.

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 section 6 of the PEI Agricultural Insurance Act, R.S.P.E.I. c. A-8.2 in Prince Edward Island. Your information is protected by and is subject to the provisions of the Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, Cap. F-15.01 in Prince Edward Island. We collect only what is necessary for the administration of the Maritime Livestock Price Insurance Program Pilot. Your information will be shared with the Alberta 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 and evaluation and for research and statistical purposes. Questions about the collection of information should be directed to: Prince Edward Island Agricultural Insurance Corporation.

