



An agency of the Government of Ontario
Un organisme du gouvernement de l'Ontario

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Third party authorization

AgriStability

Name and business structure		
Name of participant	Name of corporation or trust (if applicable)	AgriStability PIN
Third party contacts		
<p>Agricorp recognizes the participant as the primary contact for AgriStability. If you want Agricorp to share your information with an agent or a third party acting on your behalf you must designate the person, persons and/or the firm as authorized contacts by completing this form. Although Agricorp will accept inquiries from all such authorized contacts, all correspondence will continue to be directed to the participant. You must advise Agricorp if you change your agent or third party contact.</p> <p>The participant authorizes the following person, persons and/or firm to contact Agricorp regarding AgriStability information on the participant's behalf and hereby authorizes Agricorp to disclose and discuss the participant's AgriStability information with these authorized contacts, including personal and confidential information in the AgriStability file.</p>		
Agency contact (e.g., accounting firm)		
Name of agency	Telephone number	Fax number
Address		Email address
Other contact (e.g., spouse)		
Name of contact	Telephone number	Fax number
Address		Email address
Signature		
Signature of participant		Date

Collection, use, and disclosure of information: Please refer to the Participant Declaration on page 4 of your AgriStability application or page 3 of your New Participant Form.

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Version française disponible

