

# Application Growing Future Opportunities Initiative Tender Fruit and Table Grapes

Complete this application to apply for funding under the Growing Future Opportunities Initiative for tender fruit and table grapes.

Applications are accepted on a first-come, first-served basis beginning November 20, 2023 at 10:00 am. Applications will not be accepted before this date.

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For full details, see the initiative guidelines (available on agricorp.com).

Section A: Other funding (if applicable)

If you received funding from any federal-provincial-municipal source meant to address the costs incurred that are covered by this Initiative, indicate this below.

Important: Acres already replanted using other funding sources are not eligible under this Initiative.

Other (specify)

Other (specify)

Section B: Applicant information					
Business name (for sole proprietor, use first, middle	e and last name; for corporations, use incorporated name)	Correspondence language			
		☐ English ☐ French			
Operating name (if different from above)		Website address			
Agricorp ID (if you have one)	Business number (Canada Revenue Agency)	Farm Business Registration number			
A					

### Section C: Mailing address

If you have provided an Agricorp ID, skip to Section D.

☐ Canada-Ontario Grapevine Winter Injury Initiative

☐ Tender Fruit Acreage Revitalization Initiative

Business mailing address (include civic number and road name)

City/Town		Province	Postal code
Primary business telephone number	Alternate business telephone number	Business fax numb	er

Section D: Signing aເ	ıthority							
Please list up to two signi including signing cheques						related to your business,		
Primary contact								
First name			Last name	Last name				
Business telephone numb	per	Extension	Email add	Email address				
Secondary contact								
First name			Last name	•				
Business telephone numb	per	Extension	Email add	ress				
Section E: Your opera	ation							
Provide the following info	rmation about your op	eration. For definiti	ions of terms,	see the init	tiative guideline	S.		
Business structure								
☐ Sole proprietor	☐ Corporation	Partne	ership		Jnincorporated :	association		
Business type								
☐ Primary producer	☐ Processor							
Gross annual revenue								
☐ Under \$10,000	S10,000-\$24,99	9 □\$25,000	-\$49,999	<b>−</b> \$49,999 □ \$50,000 <b>−</b> \$99,999		\$100,000 <b>-</b> \$249,999		
□ \$250,000–\$499,999	\$500,000 <b>-</b> \$999,	999 □\$1M–\$1	99M □ \$2M–\$4.99M		□ \$5M–\$9.99M			
□ \$10M–\$49.99M	□\$50M-\$99.99M	:0M–\$99.99M □\$100M–		□ \$200	M and over	☐ Not-for-profit		
Employees								
No. of full-time employees (30 hours or more per week)			time employees No. of temporary/season employees					

Sect	ion F: Eligibility						
Pleas	se certify your eligibility for the G	Growing Future Opportunities Initia	tive for Tender Fruit an	d Table Grapes.			
1. I	I will plant the tender fruit/table grapes using one or more agronomic best practices.						
2. I am not planting or claiming for acreage already covered under another program offered ☐ Yes ☐ No by any level of government.							
<ol> <li>The land has been used for the commercial production of tender fruit/table grapes within  ☐ Yes ☐ No the past 3 years.</li> </ol>							
Sect	tion G: Project information						
	ide the following information abo	out vour project					
Impo	ortant: You may be eligible to re	ceive a maximum of \$50,000 in to cherries, table grapes, and wine	<u> </u>	modity categories (e.	g., apples, pears,		
Func	ling for commodity category -	- Tender fruit and table grapes					
Cost of new nursery stock (A) Total project value (replant and other costs) Funding amo requested ((A × 75%))		d (C)					
\$		\$	\$				
Wine	grapes (if applicable)						
Note		for wine grapes under the Growin wine grapes separately. The appli					
	ard ID/name	Address (include civic number and roa	ad name)				
City/7	Town	Municipality		Province	Postal code		
Prem	ises ID						
_	N						

Removal and planting activities

Orchard or vineyard ID/name	Crop	Variety to be removed	Variety to be planted	Expected date of tree/vine removal (YYYY/MM/DD)	No. of acres to be removed

Attach additional pages as required.

#### Section H: Agreement and signature

#### I understand, agree and certify that:

#### General

- I have read, understand and agree to be bound by all of the Growing Future Opportunities Initiative terms and conditions, including its eligibility requirements, entitlements and obligations as contained in this application and described in the Guidelines.
- To the best of my knowledge, information and belief, all information submitted on this application is accurate and true.
- In the event of an error, omission, conflict or inconsistency between this application and the Guidelines, the Guidelines will prevail. I further accept that in the event of an error, omission, conflict or inconsistency between the Guidelines and the Minister's Order, the Minister's Order prevails.

#### Using and sharing information

The information collected for the purposes of this Initiative is subject to the Freedom of Information and Protection of Privacy Act and other applicable laws. The information collected under the Initiative, or under other programs administered by Agricorp or the Ontario Ministry of Agriculture, Food and Rural Affairs (OMAFRA), may be shared between Agricorp and any government department/ ministry, agency or third party to verify compliance with other provincial and federal funding initiatives, to confirm the information provided, to verify eligibility for Initiative funding, and to identify funds that may be owing to the Province of Ontario under any other provincial funding program. Information may also be shared for the purposes of administering and auditing the Initiative as well as other

- programs administered by Agricorp or by OMAFRA, or for developing other programs and agricultural policies.
- Agricorp may use information mapped by Agricorp for the Ontario Tender Fruit Growers and Ontario Fresh Grape Growers Marketing Board contained in the Data Management System (DMS) for the purpose of evaluating eligibility and administering the Initiative.

#### Overpayments and recoveries

- Any payments that I receive under the Growing Future Opportunities Initative beyond the amount I am entitled to in the program year, or in contravention of: (a) any program requirements. (b) the obligations set out in this form, or (c) the laws of Ontario, will be considered an overpayment and a debt due and payable to the Crown in right of Ontario. I confirm that any overpayments, plus any interest accruing at the quarterly rate set by the Ontario Ministry of Finance, will be repaid either by: (a) offset from payments owing to me under this or any other initiative or program administered or delivered by Agricorp, or under other federal and/or provincial income tax and other federal and/or provincial programs, or (b) payment to Agricorp upon demand. My obligation to repay and Agricorp's right to recover overpayments are not subject to any limitation period and will survive even if I stop participating in the Initiative.
- If I have any pre-existing debts to the Crown in right of Ontario or Canada, the amounts of these debts may be deducted from any funds otherwise payable to me under this Initiative.

	ı	have	read	and	agree	to	the	terms	outlined	above.
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Name of applicant (please print)	Signature (not required for emailed applications)	Date (YYYY/MM/DD)
	x	
Name of partner (please print)	Signature (not required for emailed applications)	Date (YYYY/MM/DD)
	x	

Attach additional pages as required.

#### **Notes**

For corporations, the signatory must be an authorized signing authority. For partnerships, all partners must sign. Your submission of this application by email will be treated as the equivalent of an electronic signature.

#### Section I: Submit completed form

**Email or fax** 

GFOI@agricorp.com Fax: 519-826-4118

Questions?

1-888-247-4999 agricorp.com GFOI@agricorp.com TTY: 1-877-275-1380 Accessible formats available

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## **Appendix Demographic Questions (voluntary)**

Answering the following questions is voluntary. You will still be eligible to participate in the Growing Future Opportunities Initiative if you decline to provide this information. Your answers to the questions will have no impact on the assessment of your application.

1.		e the shares of your business/organization owned by a majority of individuals (50% or more) who identify as being one or more the following Persons? (Select all that apply)
		Indigenous Person: First Nations
		Indigenous Person: Métis
		Indigenous Person: Inuit
		Indigenous Person: Unknown/Other
		Women: refers to all people, including trans people who identify as a woman
		Youth: 40 years old and younger
		Not applicable
		Decline to identify
2.	On	your Board of Directors, are one or more of the following groups significantly represented? (i.e., 30% or more) (Select all that apply)
		Individuals who identify as being an Indigenous Person: First Nations
		Individuals who identify as being an Indigenous Person: Métis
		Individuals who identify as being an Indigenous Person: Inuit
		Individuals who identify as being an Indigenous Person: Unknown/Other
		Women: refers to all people, including trans people who identify as a woman
		Youth: 40 years old and younger
		Not applicable
		Decline to identify
3.	Wil	I any of the following groups benefit from the activities of your project? (Select all that apply)
		Individuals who identify as being an Indigenous Person: First Nations
		Individuals who identify as being an Indigenous Person: Métis
		Individuals who identify as being an Indigenous Person: Inuit
		Individuals who identify as being an Indigenous Person: Unknown/Other
		Women: refers to all people, including trans people who identify as a woman
		Youth: 40 years old and younger
		Not applicable
	П	Decline to identify