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2024 AgriStability Interim Payment Application

	F	AgriStability PIN		Corresponde Engli	ence language preferred sh French	
Check and complete ONE of the follow INDIVIDUAL First Name / Last Name	ing					
CORPORATION Corporation Name			Name a corporate representative			
Business mailing address Civic Address (incl. Emergency #): RR / PO Box / Number / Street			City/Town	Prov	ince Postal Code	
Business Phone Number F	ax Numbe	umber Email Addre			ess	
Farm location Municipality (e.g., County, region, District)) Tow	nship (if applio	cable)	Lot	Concession	
Agricorp ID		Fisca	l period	!	<u> </u>	
		From To	dd dd	mm	уууу	
Please use this space to explain your p						
Please read and sign the participant de By submitting this form, I: Certify that I have completed a production on the for reasons beyond my control, Certify that the information provided is compounded and agree that as a condition of in 2024 AgriStability, Agree to repay any overpayment amount refinal 2024 AgriStability benefit.	eycle and a colete and co f receiving eceived as	t least six mon correct, an interim pay an interim pay	yment, I will mee	t all requirement	ts to participate eater than my	
Name of Participant	Sigr	nature (not red	Date (dd/mm/yyyy)			

2024 Interim Payment Application Program Year Farming Activity AgriStability PIN: (Complete a separate sheet for each farming operation) Farm of Your share of this operation (e.g., 100%) Expenses: Enter the estimated dollar value for your expenses for the 2024 fiscal year \$ Seed purchases 9714 - Minerals and salt \$ \$ \$ Livestock purchases 9764 - Machinery (gasoline, diesel, oil) Feed purchases \$ 9799 - Electricity \$ \$ \$ 9836 - Commissions and levies 9801 - Freight and shipping \$ \$ 9802 - Heating fuel 571 - Prepared feed purchases \$ 9815 - Arm's length salaries \$ 573 - Livestock owners custom feeding expenses \$ \$ 9661 - Containers and twine 9822 - Storage/drying 9662 - Fertilizer and lime \$ 9713 - Veterinary Fees, Medicine, A.I. \$ \$ 9663 - Pesticides 9665 - Production Insurance Premiums Income: Enter your estimated program year income. If the commodity has been sold, enter the income. Attach additional sheets if necessary. • Enter your estimated income from contract work and trucking \$ • Enter your estimated income from other government payments \$ **Crops Sold** Production **Description** Income Acres or sq. ft. Specify units per acre (Acres or sq. ft) X or sq. ft. (bu/T/lbs) (e.g., 100 acres) (actual or est.) (units per acre or sq. ft.) \$ \$ \$ \$ \$ \$ Total acres or sq. ft. **Breeding Livestock Description Average Number Marketed Livestock** Average weight Total marketed **Description** Income (if applicable) numbers (actual or est.) \$ \$

\$ \$

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Program vear Farming Activity AgriStability PIN: (Complete a separate sheet for each farming operation) Farm _____ of ____ Your share of this operation (e.g., 100%) Schedule 2 - Inventory, Purchased Input Record, Accounts Receivable, Accounts Payable **Inventory - Homegrown Crops Record Ending Inventory** Type of crop Unit Opening Inventory (Estimated) **Inventory - Marketed Livestock Record** Type of livestock Unit Opening Inventory **Ending Inventory** (Estimated) **Purchased Input Record** Description Opening Inventory Ending Inventory (Estimated) \$ \$ \$ \$ \$ \$ \$ Accounts Receivable (allowable income only) Description Opening Total Ending Total (Estimated) \$ \$ \$ Accounts Payable (allowable expenses only) Description Opening Total Ending Total (Estimated) \$ \$

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To submit this application, attach it to an email message and send the email to contact@agricorp.com, or print and fax it to 519-826-4118.







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