

**ADVANCE PAYMENTS PROGRAM (APP)
STORABLE AGRICULTURAL PRODUCT INSPECTION REPORT**
Must be completed for each Agricultural Product inspection performed.

APPENDIX 5

PROTECTED "A" ONCE COMPLETED

1.1 BASIC INFORMATION			
Identify the individual applying for the advance and indicate their existing APP ID number or assign a new ID if they are a new applicant.			
APP ID	First Name	Last Name	
Residential Mailing Address of Producer:			
Street Address	City/Town	Province	Postal Code
1.2 INSPECTION INFORMATION			
Name of the Administrator Agri-Commodity Management Association		Date of Inspection yyyy/mm/dd 2016/ /	
Type of Agricultural Product Inspected		Legal land description	
LOCATION 1		LOCATION 2	
Address of Property on which the Agricultural Product is Held:		Address of Property on which the Agricultural Product is Held:	
Unit of Measurement of Agricultural Product		Unit of Measurement of Agricultural Product	
Number of Units in Inventory		Number of Units in Inventory	
Total Units in Storage or on hand	-	Estimated Amount of Spoilage, Shrinkage or Loss	=
Total Units Available for Sale			
Number of Units of Agricultural Product on Which Advance Was Received: _____ Difference: _____			
As determined in the Application and Repayment section , any discrepancy noted should be followed up and action(s) taken must be indicated on this form.			
Signature of Producer	Date 2018/ /	Signature of Inspector	Date 2018/ /
Comments/ Action(s) taken			