



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
Type of Agricultural Product Inspected, Legal land description
LOCATION 1, LOCATION 2
Address of Property on which the Agricultural Product is Held:
Unit of Measurement of Agricultural Product
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, Signature of Inspector, Date
Comments/ Action(s) taken