



## 2017-2018 Advance Payments Program Application

### Individuals

To apply for a 2017-2018 APP advance please complete the forms in this document as well as the **form packet for your particular commodity** which can be found on our website at [www.agricommodity.ca](http://www.agricommodity.ca).

In addition to these forms we will also need a copy of:

- Proof of Legal Canadian Residency (Birth Certificate, Passport or Permanent Resident Card)
- 2017 AgriStability Enrollment Notice, front and back (and/or Crop Insurance for Crop Producers only)
- Your most recent completed tax return
- VOID Cheque for loan direct deposits
- Insurance policy coverage

If you have any questions on these, or any of our forms, please contact our office at 902-895-0581. We can help you over the phone or we can set up a time for you to come in so we can help you complete the application!

Applications can be submitted via fax, email or standard mail.

Fax: 902-893-7063  
Phone: 902-895-0581

Mailing Address: ACMA  
60 Research Dr.  
Bible Hill, NS  
B6L2R2

Email: Kara - [ksaville@agricommodity.ca](mailto:ksaville@agricommodity.ca)

**ADVANCE PAYMENTS PROGRAM (APP)  
APPLICATION & REPAYMENT AGREEMENT – INDIVIDUAL PRODUCER INFORMATION**

**Part 1A - Individual**

**PROTECTED "A" ONCE COMPLETED**

**1.1 DOCUMENTATION**

Producers must submit identification documents, only if requested by the Administrator.

**Identity verified** (Photo identification required, i.e. driver's license. Health cards cannot be accepted.)

Type of documentation provided: \_\_\_\_\_

**1.2 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	Given Name	Middle Name	Family Name	Date of Birth (yyyy/mm/dd)
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**Residential Mailing Address of producer:**

Street Address	City/Town	Province	Postal Code
Home Phone #	Cellular Phone #	Fax #	

**Business Mailing Address of producer, if different from above:**

Street Address	City/Town	Province	Postal Code
Business Phone # (Ext.)	Business Fax #		

**Farm Physical Address**

Civic Address	City/Town	Province	Postal Code
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**1.3 LENDER INFORMATION**

Name of Lending Institution \_\_\_\_\_

Street Address	City/Town	Province	Postal Code
Business Phone #	Business Fax #		

**1.4 DECLARATION OF APP ADVANCE RECEIVED FROM OTHER PRODUCER ORGANIZATIONS**

- List all advances issued by other organizations for this production period, including advances attributed by percentage of ownership in any Corporation/Cooperative/Partnership.
- List all outstanding advances from previous production periods, including advances attributed by percentage of ownership in any Corporation/Cooperative/Partnership.
- Attach a separate sheet if required.

Name of Producer Organization from which an advance was received	Agricultural Product for which an advance was received	Production Period (yyyy)	Amount of Advance Received
			\$
			\$
			\$

The information on this form is collected under the authority of section 10 of the *Agriculture Marketing Programs Act*. Any personal information provided by the Administrator to Agriculture and Agri-Food Canada (AAFC) will be used to administer the APP in accordance with the *Privacy Act*. The information may also be used for statistical or evaluation purposes. Individuals have the right to request access and correction to their personal information. Should you have any questions concerning your Privacy, please contact: Agriculture and Agri-Food Canada's Access to Information and Privacy Director, Floor 10, 1341 Baseline Road, Tower 7, Ottawa ON K1A 0C5 or by email at [AAFC.Privacy-vieprivee.AAC@AGR.GC.CA](mailto:AAFC.Privacy-vieprivee.AAC@AGR.GC.CA) and reference AAFC's personal information bank *Agricultural Marketing Programs Act: Advance Payments Program, PPU 140*.

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**1.5 RELATED PRODUCERS**

- ✓ Producers are related if they do not deal with each other at arm's length.
- ✓ In the absence of proof to the contrary, producers are presumed to be related to another producer in any of the following circumstances:
  - ✓ One of the producers is the spouse or common-law partner of the other producer;
  - ✓ One of the producers owns at least 25% of the voting shares of the other producer;
  - ✓ One of the producers owns at least 25% of the voting shares of a corporation that directly or through any other corporation owns 25% of the voting shares of the other producer;
  - ✓ One of the producers is entitled to 25% or more of the profits or revenues of the other producer.
  - ✓ The producer shares any management and administrative services, equipment, facilities or overhead expenses of a farming operation with the other producer, but is not in partnership with that other producer; or
  - ✓ Any other circumstances set out in the *Agricultural Program Marketing Act*.
- ✓ Relatedness affects the applicant's eligibility to receive an advance, as well as the amount of an advance.
- ✓ If you answer "yes" to question 2, you may not be eligible to receive an APP advance, unless you are able to rebut the presumption of relatedness.

1. Has a related producer a) applied for an APP advance in this production period or b) have an outstanding APP advance from a previous production period?	<b>YES</b>	<b>NO</b>
2. Is any related producer ineligible as a result of a default under APP, SCAP or ESCAP?	<b>YES</b>	<b>NO</b>

**1.5.1 RELATED PRODUCER DECLARATION**

If you answered "no" to questions 1 and 2, you are not required to complete section 1.5.1 and 1.5.2.

- ✓ List all related producers who received an advance for this or previous production periods, including advances issued by other APP Administrators.
- ✓ Attach a separate sheet if required.

Name of the related producers that received an advance	APP ID	Name of Administrator which issued the advance	Production period (yyyy)

**1.5.2 REBUTTAL OF RELATEDNESS BETWEEN 2 INDIVIDUAL PRODUCERS**

- ✓ Answer the questions below for each related producer listed in section 1.5.1.
- ✓ If you responded "no" to any of the questions below, you have not rebutted the presumption of relatedness with the producer in question.
- ✓ If you responded "yes" to **all** the statements below, you have established that you deal at arm's length with the producer(s) in question, and the Administrator may request the appropriate documentation to support your responses, such as articles of incorporation, financial statements, leases, receipts, etc.
- ✓ Attach a separate sheet if required.

**1. Name of the related producer that received an advance:**

a. You and the related producer file separate tax returns and/or produce separate financial statements.	<b>YES</b>	<b>NO</b>
b. You and the related producer are not employees or do not act as agents of the other.	<b>YES</b>	<b>NO</b>
c. You and the related producer conduct all business transactions (e.g. sharing of equipment and/or land) at fair market value and such transactions are documented.	<b>YES</b>	<b>NO</b>

**2. Name of the related producer that received an advance:**

a. You and the related producer file separate tax returns and/or produce separate financial statements.	<b>YES</b>	<b>NO</b>
b. You and the related producer are not employees or do not act as agents of the other.	<b>YES</b>	<b>NO</b>
c. You and the related producer conduct all business transactions (e.g. sharing of equipment and/or land) at fair market value and such transactions are documented.	<b>YES</b>	<b>NO</b>

**3. Name of the related producer that received an advance:**

a. You and the related producer file separate tax returns and/or produce separate financial statements.	<b>YES</b>	<b>NO</b>
b. You and the related producer are not employees or do not act as agents of the other.	<b>YES</b>	<b>NO</b>
c. You and the related producer conduct all business transactions (e.g. sharing of equipment and/or land) at fair market value and such transactions are documented.	<b>YES</b>	<b>NO</b>

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**ADVANCE PAYMENTS PROGRAM (APP)  
APPLICATION & REPAYMENT AGREEMENT – DECLARATION & ATTESTATION**

**Part 3A - Individual**

**PROTECTED "A" ONCE COMPLETED**

**3.1 DECLARATION OF THE APPLICANT**

The Advance Payments Program (APP) is a Government of Canada program which supports the provision of cash advances to Producers across Canada. Under the APP, Agriculture and Agri-Food Canada (AAFC) provides funding to guarantee advances taken by Producers through farm organizations and covers the interest on the first \$100,000 in advances taken by each Producer under the program.

- 1) I am applying as an individual for an advance payment pursuant to the Advance Payments Program (APP).
- 2) I am of the age of majority and a Canadian Citizen or a permanent resident.
- 3) I am the Producer of the Agricultural Product for which this Application is made.
- 4) No other person has an interest in the Agricultural Product with respect to which this Application is made and the Agricultural Product will be sold in my name.
- 5) I am not required by the *Income Tax Act* to report income from other farming operations or other corporations carrying on a farm business, other than the one named in this Application and Repayment Agreement, otherwise I have listed in Part 1A section 1.5.1 all other farming operations and corporations carrying on farm operations in which I have an interest.
- 6) Neither I, nor any of the farming operations listed in section 1.5.1 of this Application and Repayment Agreement are in default under any repayment Agreement pursuant to the *Advance Payments for Crops Act* (APCA), the *Prairie Grain Advance Payments Act* (PGAPA), the Spring Credit Advance Program (SCAP), the Enhanced Spring Credit Advance Program (ESCAP) or the *Agricultural Marketing Programs Act* (AMPA).
- 7) I am not ineligible under a repayment agreement made pursuant to the *Agricultural Marketing Programs Act* (AMPA), the Spring Credit Advance Program (SCAP) or the Enhanced Spring Credit Advance Program (ESCAP).
- 8) I have made an application for Production Insurance and/or am participating in an eligible Business Risk Management program as outlined in Part 2 of this Application and Repayment Agreement and declare having submitted a duly completed BRM Assignment Agreement (Appendix 2A or 2B) as required for the specific class of Agricultural Product.
- 9) If I am requesting an advance on a Storable Agricultural Product in Post-production or Livestock, I have sufficient Agricultural Product in storage to justify the amount advanced as outlined in Part 2 of this Application and Repayment Agreement.
- 10) I declare having submitted the duly completed priority Agreements required for every secured creditor that has an assignment on the proceeds of the Business Risk Management (BRM) program(s) used to secure the advance, as applicable, and/or that holds a lien or encumbrance on the Agricultural Products listed in Part 2 of this Application and Repayment Agreement.
- 11) I agree that a credit check and an inspection of the Agricultural Product may be performed at any time while the advance is outstanding.
- 12) I acknowledge that, in the event of a default, I may be denied access to other federal agricultural support programming or, alternatively the Minister of Agriculture and Agri-Food Canada reserves the right to off-set from such support a sum equal to the outstanding amount and related interest charges and recovery costs.
- 13) I declare that this Application is consistent with the purpose of the APP.
- 14) I certify that all of the information provided in this Application is true and correct in every respect.
- 15) I understand that failing to comply with application requirements may delay the processing of the application or may render me ineligible for receiving an advance under the Program.
- 16) I agree that if I reside in a province where the legislation allows for the extension of the limitation period, to extend the limitation period and to take any necessary steps as determined by the Administrator to ensure that the limitation period for seeking a remedial order for claims arising from this application shall be extended from the date the Administrator knew, or in the circumstances, ought to have known, of the claim. Where possible according to the provincial legislation, I further agree that the extended limitation period should be of six years.
- 17) I have read the following privacy notice informing me of AAFC's use of my personal information submitted as part of the APP application process.

APP is a federal program delivered by Administrators which collect and use the personal information you submit to administer the program on AAFC's behalf. AAFC routinely receives a small portion of the personal information you submit however, in the event you enter into default, AAFC will receive your entire application file.

The personal information contained in, with, or pursuant to this Application and Repayment Agreement is collected under the authority of the *Agricultural Marketing Programs Act*. AAFC may use the information to verify and/or assess the Application and Repayment Agreement, as well as to administer, audit, analyze, and evaluate the APP. AAFC may also convey the information contained in this Application and Repayment Agreement, as well as associated documentation, both personal and otherwise, to other organizations administering the APP, for the purposes of verifying benefits under the APP.

Under the *Privacy Act* you have a right of access to and correction of any of your personal information held by AAFC and can do so by contacting the Access to Information and Privacy Coordinator at [ATIP-AIPRP@agr.gc.ca](mailto:ATIP-AIPRP@agr.gc.ca) and referencing Personal Information Bank, *Advance Payments Program*, PPU 140.

All non-federal government organizations are obligated to protect personal information in accordance with the *Personal Information Protection and Electronic Documents Act* (PIPEDA) or under legislation applicable within their jurisdiction.



**ADVANCE PAYMENTS PROGRAM (APP)  
APPLICATION & REPAYMENT AGREEMENT – DECLARATION & ATTESTATION**

**Part 3A - Individual**

**PROTECTED "A" ONCE COMPLETED**

I authorize Agri-Commodity Management Association (Administrator) to:

- a) Collect the personal information contained in, with, or pursuant to this Application and Repayment Agreement.
  - b) Convey the information contained in this Application and Repayment Agreement, as well as associated documentation, both personal and otherwise, to provincial governments and their agencies, for the purposes of verifying APP entitlements, verification, assignment and realization of security
  - c) Convey the information contained in this Application and Repayment Agreement, as well as associated documentation, both personal and otherwise, to other organizations administering the APP, for the purposes of verifying benefits under the APP. For further information regarding the use of your personal information by the APP Administrator or to make a formal request for access to your personal information, please contact Administrator through which you are applying.
- 18) I have read all the Terms and Conditions of the Repayment Agreement which are attached to and form part of this application and I agree to comply with such Terms and Conditions.
- 19) If I am a current or former public office holder, public servant or Member of the House of Commons, I am not prohibited to derive benefits from the APP under any applicable federal conflict of interest or ethical principles and I am in compliance with applicable federal conflict of interest or ethical principles, rules and obligations.
- 20) I acknowledge that, in cases where the applicant is declared in default and the Minister makes payment under the guarantee, the Minister is subrogated to the Administrator's rights against the applicant in default and against persons who may be personally liable under this Repayment Agreement.
- 21) I declare that I: have not recently filed a notice of intention to make a proposal or made a proposal under the *Bankruptcy and Insolvency Act*, am not subject to a receiving order under that act, am not bankrupt or seeking protection under any other insolvency or bankruptcy related statute such as the *Companies' Creditors Arrangement Act* and the *Farm Debt Mediation Act*.
- 22) I declare that in the case of agricultural product that is: storable, non-storable, or livestock, it is of marketable quality and will remain so until disposed of in accordance with the repayment agreement.
- 23) I understand that the Advance Rate per unit used to calculate my Eligible Advance was obtained by subtracting the Administrator's percentage of **3.64%** from 100%, and applying this factor to the maximum advance rate per production unit as determined by the Minister in accordance with 19 (2) of the AMPA.
- 24) I acknowledge that when the Administrator receives a payment in accordance with the Terms and Conditions of this Repayment Agreement, the Administrator must first reduce the portion on which the Minister pays the interest.

**3.2 PRODUCER ATTESTATION**

- Sign and date the declaration below attesting that the information provided on the application is complete and accurate. Providing false or misleading information will result in an automatic default with the loss of all benefits related to the Advance Payments Program.

**Signature of Application and Repayment Agreement for Individual Producer:**

I declare that I have completed and signed an Advance Payments Program Application and Repayment Agreement.

I declare that the above information is true and accurate at the time of completion and agree to repay the Administrator any difference, where applicable, as stated above.

I agree to comply with all of the terms and conditions included in this Advance Payments Program Application and Repayment Agreement.

\_\_\_\_\_  
Signature of Producer

\_\_\_\_\_  
Date (YYYY-MM-DD)

**3.3 ADMINISTRATOR ATTESTATION**

I declare having taken all necessary steps, in accordance with the AMPA, its Regulations, the Advance Guarantee Agreement and the APP administrations guidelines, to ensure, to the best of my abilities, that the current Application and Repayment Agreement by the Producer is accurate and complete before granting the abovementioned advance.

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Date (YYYY-MM-DD)

**Advance Payments Program  
2017-2018 Credit Application**

Farm Name: \_\_\_\_\_

Business ID (CRA)# \_\_\_\_\_

Owner(s) Full Name: \_\_\_\_\_

Civic Address \_\_\_\_\_ Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell #: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**Which of the following commodities are you applying for? (please check all that apply)**

Cattle	<input type="checkbox"/>	Blueberries	<input type="checkbox"/>	Mixed Grains	<input type="checkbox"/>	Oats	<input type="checkbox"/>
Sheep	<input type="checkbox"/>	Strawberries	<input type="checkbox"/>	Canola	<input type="checkbox"/>	Greenhouse (Nursery)	<input type="checkbox"/>
Hogs/Weaners	<input type="checkbox"/>	Raspberries	<input type="checkbox"/>	Wheat	<input type="checkbox"/>	Greenhouse (Veg, Potted Plants, Cut Flowers)	<input type="checkbox"/>
Christmas Trees	<input type="checkbox"/>	Cranberries	<input type="checkbox"/>	Flaxseed	<input type="checkbox"/>	Honey	<input type="checkbox"/>
Pelts (Mink/Fox)	<input type="checkbox"/>	Soybeans	<input type="checkbox"/>	Hay	<input type="checkbox"/>	Maple Syrup	<input type="checkbox"/>
Sod	<input type="checkbox"/>	Corn	<input type="checkbox"/>	Camelina	<input type="checkbox"/>	Mixed Field Vegetables	<input type="checkbox"/>
Apples	<input type="checkbox"/>	Barley	<input type="checkbox"/>	Buckwheat	<input type="checkbox"/>		

**Are you currently enrolled in the AgriStability Program OR /AND have production Insurance to secure the advance request? Attached proof on AS enrollment with reference margin calculation and Production insurance.**

Yes  No  AgriStability ID Number: \_\_\_\_\_

Yes  No  Production Insurance #: \_\_\_\_\_

**Where and how do you market your agricultural product / inventory?**

\_\_\_\_\_

*Indicate if you direct market, sell to an auction house, processing plant, feed lot, cattle drover, direct market freezer beef, sell to an out of province buyer, or to a meat shop. Please provide name, telephone number, and address information if applicable.*

**Approximately when do you anticipate marketing your inventory?** (Please indicate date of sale(s) between April 1, 2017 and September 30, 2018 and to March 31 2019 for finish cattle only)

**Please indicate (yes or no) which type(s) of insurance you have for your agricultural operation and attach a copy of your current proof of insurance.**

Property Coverage      Y / N      Livestock Coverage      Y / N      Fire Coverage      Y / N

**Please provide contact information for your business Bank and attach a VOID cheque for the 'Direct Deposit' of the advance loan payment to you.**

Business Bank and Contact Name: \_\_\_\_\_

Civic Address \_\_\_\_\_ Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Please provide contact information of three current trade references for your business operations:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Please indicate if any of the following lenders hold your commodity as security and provide a completed Priority Agreement (Appendix 1A or 2B) from these secured lenders or party.**

Business Bank	_____	Nova Scotia Farm Loan Board	_____
Farm Credit Canada	_____	NAFA	_____
American Legend	_____	Copenhagen Fur	_____
Secure Party / Buyer / Drover	_____	Other:	_____

**Please provide financial information from your last completed fiscal year. Attach Financial Year End Report.**

Start Date: \_\_\_\_\_ To Date: \_\_\_\_\_

DD
MM
YYYY
DD
MM
YYYY

Total Farm Loan Debt Amount	_____	Total Farm Assets Amount	_____
Annual Farm Income Amount	_____	Annual Farm Sales Amount	_____
Annual Farm Expense Amount	_____	Current Personal Asset Amount	_____
Year End Accounts Receivable Amount	_____	Current Personal Liability Amount	_____
Year End Accounts Payable Amount	_____	Total Personal Income Amount	_____

**Please indicate all persons whom you authorize ACMA to discuss matters relating to your APP loan. (Accountant, spouse, lender, lawyer, business partner)**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**If you are an incorporated company, or a legal partnership, please attach a copy of your incorporation document or partnership agreement, shareholder agreement, as part of the programs eligibility requirements (required only if we don't have current information on file). Please attach a copy of your, partners, or all shareholders, birth certificate, passport / permanent residence card, to validate your legal status in Canada, as part of the programs eligibility requirements. (Required only if we don't have current information on file)**

*I/we the undersigned hereby declare that all information provided herein and on the APP application is to the best of my/our knowledge true, complete and correct and understand it will be used by ACMA in determining credit worthiness. I/we the undersigned further consent to ACMA making any inquires it deems necessary to reach a decision on this application, and consent to the disclosure of credit information about me/us from any credit reporting agency or anyone with whom I/we have financial dealings. I/we also understand that there may be an inspection to validate the production inventories for which I/we are requesting an advance as part of the advance payments program requirements and do hereby confirm that our agricultural product inventories are of marketable quality and is being maintained adequately in order to remain of that same quality. I/we the undersigned hereby declare that I/we are the owner/s and am/are the prime shareholder/s for this company and am/are the owner/s of the inventory being marketed and assigned to this APP loan application and am/are authorized to agree to these terms. The agreement may be executed in counterparts with the same effect as if both parties hereto had signed the same document/s. Each counterpart shall be as valid and binding as each other counterpart and all counterparts shall be constructed together and shall constitute one agreement. Execution and delivery of this Agreement by fax or email transmission shall constitute legal and binding execution and delivery of this Agreement. I/we understand that once approved for funds that all related parties and lenders have the right to information regarding the advance for the duration of the contract term.*

Date: \_\_\_\_\_

DD
MM
YYYY

Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Witness Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**ADVANCE PAYMENTS PROGRAM (APP)  
RELATED MARKETING TRADE NAMES DISCLOSURE**

**1.1 PRODUCER/S AND ADMINISTRATOR INFORMATION**

APP ID# \_\_\_\_\_ DATE (YYYY-MM-DD): \_\_\_\_\_

Between (Name of Administrator) Agri-Commodity Management Association

and (Name of APP Producer/s and/or Business) \_\_\_\_\_

**1.2 RELATED MARKETING TRADE NAMES DISCLOSURE**

Where a Producer has applied for an Advance Payments Program (APP) advance from Agri-Commodity Management Association, herein called the Administrator, under the Terms and Conditions of the APP the Producer is hereby providing full disclosure for his/her/their related marketing trade names, other than those listed on the APP application. A marketing trade name is any name that your commodity, for which you are receiving APP funds, is marketed under, either individual or farm name.

**1. Under what names have you sold your commodity. Please list all used within the past five (5) years.**

(If you are applying as a corporation/partnership but market under a single individual's name please include that below)

Trade Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Trade Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Trade Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Trade Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

**2. If you have listed trade names please also list your relationship to that entity/person.**

(i.e. If a farm name is listed, what is your shareholder percentage? If an individual is listed, are they a family member or business partner? etc.)

**1.3 FULL LIEN DISCLOSURE**

Where the producer has a Financial Relatedness and Affiliation with any of the parties listed in 1.2, Full Lien Disclosure is required.

**3. Please state all outstanding debt for which your commodity, past or present production, is being held as security and for which an entity/person could make a claim in priority to the Administrator.**

(An outstanding debt could be a Loan agreement, Buyer agreement, Consigner agreement, and/or Other Debt Repayment Obligation with the above trade names for which you, as an individual, your farm, or any of its shareholders have a financial responsibility.)

Trade Name: \_\_\_\_\_ owes \_\_\_\_\_ (entity)  
\$ \_\_\_\_\_ from an agreement entered into on \_\_\_\_\_ (YYYY/MM/DD)

Trade Name: \_\_\_\_\_ owes \_\_\_\_\_ (entity)  
\$ \_\_\_\_\_ from an agreement entered into on \_\_\_\_\_ (YYYY/MM/DD)





**ADVANCE PAYMENTS PROGRAM (APP)  
RELATED MARKETING TRADE NAMES DISCLOSURE**

Trade Name: \_\_\_\_\_ owes \_\_\_\_\_ (entity)

\$ \_\_\_\_\_ from an agreement entered into on \_\_\_\_\_ (YYYY/MM/DD)

Trade Name: \_\_\_\_\_ owes \_\_\_\_\_ (entity)

\$ \_\_\_\_\_ from an agreement entered into on \_\_\_\_\_ (YYYY/MM/DD)

Trade Name: \_\_\_\_\_ owes \_\_\_\_\_ (entity)

\$ \_\_\_\_\_ from an agreement entered into on \_\_\_\_\_ (YYYY/MM/DD)

Trade Name: \_\_\_\_\_ owes \_\_\_\_\_ (entity)

\$ \_\_\_\_\_ from an agreement entered into on \_\_\_\_\_ (YYYY/MM/DD)

**1.4 PRODUCER/S ATTESTATION**

I/We do hereby attest that we have provided full disclosure on all marketing trade names and financial interests against the agricultural product for which the administrator shall provide APP financing. I/we further disclose this information to ensure the administrator will be able to obtain first priority to secure the APP advance. I/We declare that I/We exercise authority, supervision and control over the production, and marketing of the agricultural product for which this disclosure is required and the fiduciary actions are directed and carried out by me/us. I/We will inform the administrator should I/We enter into any agreement post this disclosure agreement, which may affect the administrator maintaining first priority on the agricultural product for which I/We will receive APP financing.

**IN WITNESS WHEREOF** the Administrator and the Producer/s have caused their seals to be affixed and attested to by the hands of their duly authorized officers.

**Sealed, delivered and attested to by:**

\_\_\_\_\_  
Name of Producer Printed

\_\_\_\_\_  
Signature of Producer

\_\_\_\_\_  
Name of Producer Printed

\_\_\_\_\_  
Signature of Producer

\_\_\_\_\_  
Name of Producer Printed

\_\_\_\_\_  
Signature of Producer

\_\_\_\_\_  
Name of Producer Printed

\_\_\_\_\_  
Signature of Producer

\_\_\_\_\_  
Name and position of Administrator

\_\_\_\_\_  
Signature of Administrator