

Section 1: Participant Information

Name			Home Phone
Address 1			Work Phone
Address 2			Cell Phone
City	Province	Postal Code	Fax Number
Country	E-mail		

Contact Person: Note: To change your contact person you must complete this section and the participant must sign page two of this document for the change to be accepted.

Name			Home Phone
Address 1			Work Phone
Address 2			Cell Phone
City	Province	Postal Code	Fax Number
Country	E-mail		

Please check here to have a copy of your Calculation of Benefits (COB) sent to this contact person

Contact Person:

Name			Home Phone
Address 1			Work Phone
Address 2			Cell Phone
City	Province	Postal Code	Fax Number
Country	E-mail		

Please check here to have a copy of your Calculation of Benefits (COB) sent to this contact person

Section 2: Participant Profile

The participant is:

- Co-operative
 Communal Organization
 Limited Liability Partnership
 Other Entity Specify
 Corporation
 Trust
 Status Indian Farming on a Reserve
 Band Farm Band #

Business Number _____

Farm profile:

Province of main farmstead _____

This application is for (check all that apply):

- AgriStability
 AgriInvest

* Main Farmstead is where all or the majority of the gross farming income was earned over the reference period.

00003.02.2024.01

Saskatchewan Crop Insurance Corporation www.scic.ca
 484 Prince William Drive Phone: 1-866-270-8450
 PO Box 3000 Fax: 1-888-728-0440
 Melville SK S0A 2P0 Email: agristability@scic.ca

SCIC ID:

AgriStability PIN:

Section 2: Participant Profile (continued)

Please list the legal land description of your main farmstead:

RM QTR SEC TWP RGE MER

If the participant is deceased, please provide date of death: Day Month Year

Was 2024 your final year of farming? Yes No

Have you completed a production cycle on at least one of the commodities you produced? Yes No

If no to the above question, were you unable to complete a production cycle due to disaster circumstances? Yes No

Based on the AgriStability whole farm combining criteria outlined:

Should your operation be combined with another operation for the 2024 program year? Yes No

If you should be combined in the 2024 program year, or if you were previously but should no longer be combined, indicate the PINs that should be added or removed from your whole farm.

<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Add <input type="checkbox"/> Remove
AgriStability PIN	AgriStability PIN	AgriStability PIN	AgriStability PIN

Please explain

Supporting Documentation

Please attach additional information as required and submit all documentation to the Saskatchewan Crop Insurance Corporation (see contact and mailing information at the top of the page).

With these forms, are you including any of the following? (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Greenhouses and Nurseries Productive Capacity Form | <input type="checkbox"/> Section 85 Rollover Documents |
| <input type="checkbox"/> Receipts | <input type="checkbox"/> Financial Statements/Notes to Financial Statements |
| <input type="checkbox"/> Accrual to Cash/Cash to Accrual Conversions | <input type="checkbox"/> Purchase Agreement |
| <input type="checkbox"/> Other (Please specify): _____ | |

I certify the information provided on this form to be true, correct and subject to the AgriStability Participant Initial Declaration. I am aware that to make a false statement is an offence.

Signature (Participant/Signing Officer)	Printed Name
Corporate Name (if applicable)	Date

The Saskatchewan Crop Insurance Corporation (SCIC) recognizes the importance of your personal information and the privacy surrounding it. Depending on the program offered by SCIC, and pursuant to provincial legislation and regulations, SCIC will not share or disclose any of your information unless otherwise required by law or for the purpose of programs offered by SCIC. SCIC will secure your information and may archive it indefinitely in accordance with The Archives Act. For all privacy concerns, please contact SCIC's Privacy & Security Commissioner by e-mail at securityofficer@scic.ca or phone at 306-728-7200.

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Farming operation _____ of _____

(Complete this page for each farming operation)

Section 6: Statement of Farming Activities

	Code	Amount
Gross farming income	9959	
Total farming expenses	9968	
Net farming income (loss) before adjustments	9969	
Optional inventory adjustments - Current Year	9941	
Mandatory inventory adjustments - Current Year	9942	
Net farming income (loss) after adjustments	9944	
Net farming income (loss)	9946	
Shareholder/Member Information	Code	Amount
Number of members in co-operative	865	
Total number of outstanding common shares (voting/non-voting)	854	

Shareholders

Name of Shareholder/Member	AgriStability PIN	Number of Common Shares per Shareholder
		855

Partners

Enter the first and last name if the partner is an individual. Enter the corporation name if the partner is a corporation.	AgriStability PIN	Percentage Share

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Farming operation _____ of _____

(Complete this page for each farming operation)

Section 9: Livestock Productive Capacity (continued)

Code	Number of Feeder Livestock	Units	2024
105	Feeder Cattle (fed up to 900 lbs)	Number of opening or purchased animals fed	
106	Finished Cattle (fed over 901 lbs)	Number of opening or purchased animals fed	
125	Hogs, Feeders, Fed Up to 50 lbs	Number of opening or purchased animals fed	
124	Feeders, Fed over 50 lbs to Finish	Number of opening or purchased animals fed	
Code	Custom Fed Livestock	Units	2024
141	Custom Fed Cattle	Number of animal feed days	
142	Custom Fed Hogs	Number of animal feed days	
Code	Supply Managed Commodities	Units	2024
113	Dairy Quota, Butterfat	Number of kg of butterfat/day	
108	Chicken, Layers, Broiler Eggs for Hatching	Number of producing hens	
109	Chicken, Layers, Eggs for Consumption	Number of producing hens	
143	Chicken, Broilers	Number of kg produced	
144	Turkey, Broilers	Number of kg produced	
Code	Other (specify below)	Units	2024

Section 10: Purchased Inputs / Prepaid Expenses Nothing to report

Code	Description	Year-end amount (\$)	Code	Description	Year-end amount (\$)

Section 11: Deferred Income and Accounts Receivable Nothing to report

Code	Description	Receivables & income deferred to 2025 (\$)	Code	Description	Receivables & income deferred to 2025 (\$)

Section 12: Accounts Payable/Unpaid Expenses Nothing to report

Code	Description	Year-end amount (\$)	Code	Description	Year-end amount (\$)

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Farming operation _____ of _____

(Complete this page for each farming operation)

Section 10: Purchased Inputs / Prepaid Expenses (continued)

Code	Description	Year-end amount (\$)	Code	Description	Year-end amount (\$)

Section 11: Deferred Income and Accounts Receivable (continued)

Code	Description	Receivables & income deferred to 2025 (\$)	Code	Description	Receivables & income deferred to 2025 (\$)

Section 12: Accounts Payable/Unpaid Expenses (continued)

Code	Description	Year-end amount (\$)	Code	Description	Year-end amount (\$)