## **Production Insurance**

BC Ministry of Agriculture and Food

## SCHEDULE D – 21: REQUEST FOR INTERIM CLAIM PAYMENT

			CROP YE	ZAR			
Grower Name:					Policy No.:		
Details of	UNHARVI	ESTED Grain as o	of (date):				
CROP	TOTAL INSURED ACRES	UNHARVESTED ACRES	UNHARVESTED ACRES		ESTIMATED YIELD/ACRE & GRADE		
			SWATHED	UNSWATHED	FALL	SPRING	
BARLEY							
CANOLA							
OATS							
PEAS							
WHEAT							
2) Inte 3) If tl 4) The oth 5) If y and  DECLARA  1) I de 2) I ui	erim Claim Pay here is an Assign e final claim with er than harvest you wish to deal obtain our with TION: eclare that the anderstand tha	ill be determined after for grain.  stroy or put unharves ritten permission to above is a true, accurate	o 50% of the estimation the Policy, all pall insured acres costed crop to use odo so.	ated final indemnity for ayments will be direct of a Crop Type have ei ther than harvest for cord of all unharvested	ted as assigned by Croj ther been harvested, d grain, you must noti		
Policy Holder Rece	eived by			Date	Date		





