

B.C. Farm Worker Safe Isolation Program (FWSIP)

Programme de Sites Sûrs D'isolement Pour Travailleurs Agricole en C.B.*

Application and Claim Form for Employers Multiple Workers



Ministry of
Agriculture
and Food

*This project is made possible through funding from the Public Health Agency of
Canada.*

*Ce projet est rendu possible grâce au financement de l'Agence de la santé publique du
Canada.*

The views expressed herein do not necessarily represent the views of the Public
Health Agency of Canada.

*** Tous les documents du programme sont disponibles en français
sur demande. Veuillez contacter AGRI.SIP@gov.bc.ca pour
demander les matériaux en français ou pour plus d'informations.**

Employer Application and Claim Form (Multiple Workers)

This *FWSIP Application and Claim Form* may be submitted for **multiple workers** for which you are requesting safe-isolation reimbursement, and **must be submitted along with the Employer Application and Claim (Multiple Workers) Excel Form**.

Please refer to the FWSIP Guide for Employers for complete program details including eligibilities. Submit your completed *FWSIP Application and Claim Form Employer* to:

AGRI.SIP@gov.bc.ca.

Claims for expenses that occur on or after December 1, 2021 must be received no later than 30 days following the last date of the worker's isolation period.

Only self-isolation expenses that occurred between April 1, 2021 and March 31, 2023 are eligible for reimbursement through the Program. The last day to submit a claim is April 30, 2023. Claims received after this date will not be considered for reimbursement.

FWSIP Application and Claim Form Submission Checklist

Your submission should contain the following:

1. Completed Application and Claim Form (Multiple Workers)
 - a. Applicant Declaration and Consent
2. Employer Application and Claim (Multiple Workers) Excel Form.
3. Hotel/motel receipt(s)
4. Verification of employment

Please email these materials to AGRI.SIP@gov.bc.ca or send via mail to:

Labour Unit
c/o Shannon Tucker
1767 Angus Campbell Rd
Abbotsford, BC
V3G 2M3

Section 1: Applicant Information

Registered Business Name	
Business registration /GST number	
Commodity/ies produced	
Farm Address	
Primary Contact for this Application	
First and Last Name	
Job Title/Position	
Phone Number (s)	
Applicant Email	
Mailing Address (if different from Farm Address)	
Has your farm implemented a Communicable Disease Prevention Plan (the "Plan")	<input type="checkbox"/> Yes <input type="checkbox"/> No * If you selected "No" you are required to develop a Plan ; contact Worksafe BC for support.
How many Temporary Foreign Workers do you employ during your peak operation period?	<input type="checkbox"/> 0 <input type="checkbox"/> 1 – 5 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 11 – 20 <input type="checkbox"/> 21 – 50 <input type="checkbox"/> 51 – 100 <input type="checkbox"/> 100+
How many B.C. residents do you employ during your peak operation period?	<input type="checkbox"/> 0 <input type="checkbox"/> 1 – 5 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 11 – 20 <input type="checkbox"/> 21 – 50 <input type="checkbox"/> 51 – 100 <input type="checkbox"/> 100+
How many Canadian residents from outside of B.C. do you employ during your peak operation period? (e.g. from Ontario, Quebec)	<input type="checkbox"/> 0 <input type="checkbox"/> 1 – 5 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 11 – 20 <input type="checkbox"/> 21 – 50 <input type="checkbox"/> 51 – 100 <input type="checkbox"/> 100+

Section 2: Assessment of Employer Isolation Obligations

Please check the boxes below to indicate confirmation of the associated statement. By checking the box, you are confirming that you and/or an appropriate representative of your business completed the following actions:

- I/we require any worker with [symptoms compatible with COVID-19](#) to remove themselves from the work environment and immediately report symptoms to the Infection Prevention and Control Co-Ordinator or the Communicable Disease Prevention and Control Co-Ordinator.
- I/we have reviewed the [Industrial Camps Order](#) and followed the employer obligations for worker-self isolation (see Appendix A for further resources).
- I/we arranged for the testing of any worker with symptoms of COVID-19 when testing is recommended by the medical health officer or another health professional.
- I/we worked with the regional Health Authority as needed to determine what measures may be necessary in order to reduce the risk of transmission of communicable disease and put in place any measures recommended.
- I/we promptly arranged the self-isolation of the worker for which this claim is made in a commercial accommodation (hotel/motel) that meets the self-isolation requirements described in the Industrial Camps Order or by a Medical Health Officer.
- I/we ensured that a worker in isolation had the supplies, support and services the worker needed to isolate, including the supply of prepared meals or meal supplies, potable water, medication, toiletries, cleaning supplies, laundry services, communication systems, and internet facilities where feasible, and provided any other supplies, support or services which the worker does not have, so as to enable the worker to remain in isolation.
- I/we provided the worker(s) for which this claim is being made with 3 complete meals per day and I/we provided healthy, diverse, and culturally appropriate food to the extent possible.
- I /we conducted twice daily check-ins of all isolating workers for which this claim is being made and connected the worker with a health provider for any medical concerns identified by the workers.
- I/we informed isolating workers of personal access to medical support for COVID-19 (i.e., 8-1-1) or their medical provider or a local virtual clinic if available.
- I/we did not allow workers in isolation to perform work-related duties.
- I/we immediately informed a health officer if I/we became aware that a worker required to self-isolate was not remaining in isolation.

If there are any boxes on the above page you have left unchecked, please explain why:

Section 3: Worker Isolation Information

Section 3 involves the collection of personal information from the worker. This information is necessary for program delivery and for the Ministry to assess your eligibility and the eligibility of your expenses for reimbursement.

Please complete Section 3 in the Employer Application and Claim (Multiple Workers) Excel Form. If you are not comfortable with using Excel please contact AGRI.SIP@gov.bc.ca for support.

Section 4: Expenses

Please complete the following table summarizing all eligible expenses and requested claim amounts. Please do not exceed the maximum allowable claim amounts. If more than the maximum amount was spent for a given category, enter only the maximum allowable claim amount in the table. Any costs incurred beyond the maximum claim amounts are the responsibility of the applicant.

Employers should submit a claim for the specific number of days for which a worker is in isolation, up to a maximum of 14 days.

Please complete Section 4 in the Employer Application and Claim (Multiple Workers) Excel Form. If you are not comfortable with using excel please contact AGRI.SIP@gov.bc.ca for support.

Hotel/Motel Receipts

Hotel/motel receipts must be attached to the claim submission to be reimbursed. We do not require the original receipt, you may submit a scan, a photocopy, a photo, a PDF, etc. of the receipts. Receipts are not required for food, laundry, and 'other' expenses.

Terms and Conditions

1. The information provided on this application form and its attachments (the “Application”) will be used to assess the applicant’s eligibility for funding under the BC Farm Worker Safe Isolation Program (the “Program”).
2. Applicants who provide false or misleading information to the Ministry related to the Program forego all program funding and are liable to repay all program funding they have received to the Province of B.C. (the “Province”). The Ministry can deny an Application if there is evidence of misrepresentation of pertinent information.
3. The Province makes no representations, commitments or guarantees with respect to the timing, number or value of any payments that may be provided to an applicant. The Province does not guarantee that by submitting an Application, an applicant will receive any or all of the reimbursement requested from the Province even where all eligibility criteria are met. The Province has the sole discretion to determine eligibility and to approve or limit the reimbursements made.
4. Reimbursements to be made under the Program are subject to the availability of funding provided by the Public Health Agency of Canada.
5. The Program may be terminated or amended by the Province at any time, without prior notice.
6. Any personal information collected by the Ministry in relation to the Program is for the purposes of administering the program, including making payments to applicants, as well as for the administration, evaluation and development of Ministry programs, and to advise you about Ministry programs and services. It is collected under the authority of sections 26(c), 26(e) and 27(a)(c)(iii) of the *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165. Further information about the collection or use of this information may be obtained from Shannon Tucker, Labour Project Lead, B.C. Ministry of Agriculture and Food, either by phone at 778-945-1364 or by email at Shannon.Tucker@gov.bc.ca.
7. Under no circumstances will the Province, the Ministry, or their officers, servants or agents be liable to any person or business entity for any direct, indirect, special, incidental, consequential, or other damages arising out of any participation in the Program or arising from any inspection, advice, operation or any other activity related to the Program, including, without limitation, any lost profits, business interruption, or loss of programs or information, even if the Province or the Ministry has been specifically advised of the possibility of such damages.
8. The information provided in the BC Farm Worker Safe Isolation Program *Guide for Employers* are additional terms and conditions of the Program.

Applicant Declaration and Consent

By submitting this application and claim form for benefits under the British Columbia Ministry of Agriculture, Food and Fisheries’s B.C. Farm Worker Safe Isolation Program, I:

- represent that I am the duly authorized representative of the applicant;
- authorize the Province and the Government of Canada, its employees or agents to use the information contained within this application and data relating to my/the applicant's agriculture operation to verify this application and to administer, audit, analyze, evaluate, and improve the programs administered by the Province and the Government of Canada;
- declare that the applicant is currently operating as a primary agriculture producer growing or raising land-based plant or animal agricultural products in British Columbia which are intended for sale;
- declare that I/ the applicant have not knowingly submitted any false or misleading information and that the information provided in this application and attachments are true and correct in every respect to the best of my knowledge;
- understand that failing to comply with all application requirements may delay the processing of this application or may make the applicant ineligible to receive reimbursement under the Program;
- agree to participate in an evaluation and/or audit of the Program; and
- represent that I/ the applicant have read and understood the terms and conditions of the Program as set out in this application form and the BC Farm Worker Safe Isolation Program *Guide for Employers* (the "Terms and Conditions") and I/ the applicant agree to be bound by the Terms and Conditions.

I Agree	I DO NOT Agree
<input type="checkbox"/>	<input type="checkbox"/>

Name:	Click here to enter text.
Date:	Click here to enter text.

Forward the completed application and supporting documentation to the Program Administrator:

By	<i>Labour Unit</i>	By	AGRI.SIP@gov.bc.ca	By	250-356-7279
Mail:	<i>c/o Shannon Tucker 1767 Angus Campbell Rd Abbotsford, BC V3G 2M3</i>	Email:		Fax:	

For further information please contact AGRI.SIP@gov.bc.ca