## **Production Insurance**

BC Ministry of Agriculture and Food

# Schedule W – 2: Forage – Additional Warranties and Information

FOR COMPLETION INSTRUCTIONS, PLE	ASE SEE THE REVERSE	OF THIS FORM.	Production Insurance:
Name of Applicant (please print)	Crop Ye	ear	Policy Number:
			Grower Number:
Part 1. Historical Yield Verification			
Type of Forage Harvest Equipment U	Jsed (i.e. balers, silage wago	ns)	
Equipment Make and Model Production Year(s) Used		action Year(s) Used	
1.			
2.			
3.			
4.			
Part 2. On-Farm Forage Use  Describe as accurately as possible, t	he class, number of livestock	k fed, and the carryo	ver for each year
Winter of		Number of Lives	•
	Normal Feeding Period	(of each cla	(in tons of Forage)
Part 3. Irrigation			
A. Do you irrigate?	<b>—</b>	Yes $\square$	No (Proceed to Part 4)
B. Do you irrigate some or all of your of C. Water Licence:	rops?	Some	All
Licence number:	Acre feet permitted:	1	Acres permitted to irrigate:
Water source:	Tiere reer permisses.	Application method (f	lood, wheel, move, etc.):
			, , , ,
D. Does lack of irrigation water ever Explain Limitations: (e.g.) seasons			(Explain) No (Proceed to Part 4)
Part 4. Fertilizer			
A. How often do you soil test?	Regularly (every		Regularly (every 4 – 7 years  Other
B. Do you fertilize your crops every ye	ar? Ye	s No (Pro	oceed to Part 5)
	C. Fertilizer applied last year:		
Fertilizer Type	Amount per acre	applied (lbs.)	Where purchased
Part 5. Harvesting Practices			
A. How many cuttings do you normally			
B. How much of your crop is regularly C. What silage storage method(s) do yo		Most L S	Some None (Proceed to Part 6)
T1.1 4.7/2 H1 C 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 1 . 1 . 1	1 1 6 4 1	
I declare that (a) all information provided is, to the and crops that I am applying to insure. I agree to			ect and (b) I have an insurable interest in all plants
and applying to moute. I agree to		u	rr tollie a pare
SIGNATURE OF APPLICANT(S)		·	DATE







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#### INSTRUCTIONS – GENERAL

The information on this form will be used to evaluate your current ability to produce reported forage yields. By signing this form, you certify that the information provided is complete and accurate and that you understand the information may be audited. Inaccurately reported information or failure to retain records and supporting documentation may result in assessment which may lead to a reduced probable yield, cancellation of insurance, and a requirement that you repay any indemnities. Individual information on the form will not be released to any party other than the insurer without the written consent of the insured.

#### HISTORICAL YIELD VERIFICATION – PART 1

Indicate the type of forage harvest equipment used (i.e. balers, silage wagons) by indicating in the table provided the equipment make and model and the production years in which the equipment has been used.

#### ON-FARM FORAGE USE – PART 2

In the table provided indicate as accurately as possible the class of livestock, number of livestock fed, and the forage carryover for the last four years if applicable.

#### IRRIGATION – PART 3

Question A	Indicate if you irrigate your forage by marking an "X" in the appropriate box. If you do not irrigate, bypass Questions B, C
	and D and proceed to Part 4.
Question B	Indicate if you irrigate some or all of your forage by marking an "X" in the appropriate box.
Question C	In the table provided, indicate your water license number, the number of acre feet permitted, the number of acres permitted
	to irrigate, the water source, and your irrigation application method.
Ouestion D	Indication whether a lack of irrigation water has ever reduced your yields by marking an "X" in the appropriate box.

#### FERTILIZER – PART 4

Question A	Indicate how often you soil test by marking an "X" in the appropriate box.
Question B	Indicate if you fertilize your crops every year by marking an "X" in the appropriate box. If you do not fertilize every year,
	bypass Question C and proceed to Part 5.
Question C	In the table provided, indicate the fertilizer type you used last year, amount (in lbs.) applied per acre, and where the

### HARVESTING PRACTICES – PART 5

fertilizer was purchased.

Question A	Indicate how many cuttings you usually harvest.
Question B	Indicate how much of your crop is regularly harvested as silage by marking an "X" in the appropriate box.
Question C	Indicate the type(s) of silage storage methods you use.

#### DECLARATION

- 1. Read the Declaration.
- 2. If you are in agreement with the Declaration Statement, sign and date on the lines indicated.

### Forward this completed form to your Production Insurance office before the application deadline:

<u>April 30</u>: Silage Corn and Forage Spring Plantings <u>November 30</u>: Perennial Forage Crops

If you have any questions, please contact our office or better yet, schedule an appointment to see us.

We look forward to serving you.





