

Schedule D-15: Declaration of Production

Name:

Policy Number:

Crop Year:

Grower Number:

SEEDED CROP REPORT

DECLARATION OF PRODUCTION

Field Name	Legal Description	Crop	Variety	Acres Seeded	Seeding Date	Estimated Yield/Acre	Unharvested Acres	

In what units are you reporting your yield?

- Tonnes
 Bushels

Did you purchase or come into possession of any grain from sources other than those fields which you have insured?

- Yes
 No

Crop	Producing Acres	Stored on Farm	Quantity Sold	Grade
Barley				
Canola				
Fall Rye				
Field Peas				
Oats				
Wheat				
Winter Wheat				

I declare that the above is a true, accurate, and complete record of all Grain produced, harvested, sold, and which otherwise came into possession of or was disposed of by the Insured, whether insured or not. I authorize Production Insurance, Ministry of Agriculture, Food and Fisheries, to perform all audit procedures it deems necessary to prove this declaration and to appoint its agents to perform these procedures.

Signature of Applicant(s) _____ Date (yyyy/mm/dd) _____ Production Insurance Representative Initials _____

Additional forms appended? Yes No (if yes, number of additional forms: __)

