

Production Insurance

BC Ministry of Agriculture

Schedule W – 2: Forage – Additional Warranties and Information

FOR COMPLETION INSTRUCTIONS, PLEASE SEE THE REVERSE OF THIS FORM.

Name of Applicant (please print)	Crop Year
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<i>Production Insurance:</i>	
Policy Number:	_____
Grower Number:	_____

Part 1. Historical Yield Verification

Type of Forage Harvest Equipment Used (i.e. balers, silage wagons)

Equipment Make and Model	Production Year(s) Used
1.	
2.	
3.	
4.	

Part 2. On-Farm Forage Use

Describe as accurately as possible, the class, number of livestock fed, and the carryover for each year

Winter of	Normal Feeding Period	Number of Livestock Fed (of each class)	Carryover (in tons of Forage)

Part 3. Irrigation

- A. Do you irrigate? Yes No (Proceed to Part 4)
B. Do you irrigate some or all of your crops? Some All
C. Water Licence:

Licence number:	Acre feet permitted:	Acres permitted to irrigate:
Water source:	Application method (flood, wheel, move, etc.):	

- D. Does lack of irrigation water ever reduce your yields? Yes (Explain) No (Proceed to Part 4)
Explain Limitations: (e.g.) seasonal supply, limited storage, priority right:

Part 4. Fertilizer

- A. How often do you soil test? Regularly (every 3 years or less) Regularly (every 4 – 7 years) Other
B. Do you fertilize your crops every year? Yes No (Proceed 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 harvest? _____
B. How much of your crop is regularly harvested as silage? Most Some None (Proceed to Part 6)
C. What silage storage method(s) do you use? _____

I declare that (a) all information provided is, to the best of my knowledge and belief, true and correct and (b) I have an insurable interest in all plants and crops that I am applying to insure. I agree to abide by the terms of the contract of which this application forms a part.

SIGNATURE OF APPLICANT(S)

DATE

Production Insurance

BC Ministry of Agriculture

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.
- Question 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 fertilizer was purchased.

HARVESTING PRACTICES – PART 5

- 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:

April 30: Silage Corn and Forage Spring Plantings

November 30: 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.