

## 2025 AgriStability Interim Application

### Section A: Participant Information

Name (Last, First or Corporation Entity)

AgriStability PIN

Primary Contact Number

Email

### Section B: Farm Information

Fiscal year end:

dd/mm/yyyy

Why are you applying for an interim payment?

1. Have you completed a production cycle or six months of farming activity this fiscal year?
2. Were you unable to complete a production cycle due to circumstances beyond your control?
3. Have you submitted a complete AgriStability application for the prior year?
4. Do you have Production Insurance for the program year?
5. Do you have uninsured acres?
6. Has your productive capacity changed during the program year?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Partnership Information (if applicable):

Enter the Participant identification number (PIN) for each of your partners. Enter the first and last names for individual partners. Enter the corporation's name for corporate partners. Your partnership's total shares must equal 100%.

Your % share of the partnership

AgriStability PIN	Individual's first name	Individual's last name	Corporation name	% share
				%
				%
				%
				%



## Section C: Program Year Farming Information

### Income (indicate all that apply)

Income Categories	Estimated Total Received
Production Insurance Claim	\$
Livestock Price Insurance Program	\$
AgriRecovery and other Program Payments	\$
Agricultural Contract Income	\$

### Expense (indicate significant changes in allowable expenses for the program year)

Expense Categories	Increase or Decrease (Y/N)	Estimated Total Expense Amount
Feed Purchase		\$
Livestock Purchases		\$
Seed and Plant Purchases		\$
Fertilizers, Pesticides, Soil Supplements		\$
Machinery (gasoline, fuel, oil)		\$
Arm's length Salaries		\$
Electricity		\$
Freight/Shipping		\$
Other allowable expenses (specify)		\$
		\$

### Livestock Production (see the Interim Application Guide C3)

Description	Number of Births	Estimated Income
Breeding Cows		
Hog Farrowing		
Description	Number of Feed Days	Estimated Income
Custom Fed Cattle		
Custom Fed Hogs		
Description	Number of Animals	Estimated Income
Hogs, Farrow to Finish		
Feeder Cattle, fed up to 900 lbs		
Finished Cattle, fed over 900 lbs		
Poultry	Kilograms Produced	Estimated Income
Chicken, Broilers		
Turkey, Broilers		
Poultry	Number of Layers	Estimated Income
Chicken, Eggs for Hatching		
Chicken, Eggs for Consumption		

### Crop Production (see Interim Application Guide C4)

Crop Description	Production Acres or m2	Estimated Total Production (Tonnes, lbs, Shrubs)	Unseedable Acres	Estimated Production Intended for Sale	Estimated Income
					\$
					\$
					\$
					\$
					\$
					\$
					\$

### Crop and Livestock Inventory (see the Interim Application Guide C5).

Description	Opening Inventory (Units)	Estimated Ending Inventory (Units)



**Section D: Participant Declaration**

By submitting this application form I

- certify that the information provided is complete and correct.
- understand and agree that as a condition of receiving an interim payment, I will meet all AgriStability participation requirements for the program year.
- agree to repay any amount received as an interim payment in excess of the final AgriStability payment for the program year.
- understand and certify that where I have provided information about other individuals and entities, I have been authorized by those individuals or entities to provide that information. I also understand and consent that where I have provided information about other individuals or entities, that should they request to see the information I have submitted about them, they will be given access to that information
- understand that the BC Ministry of Agriculture and Food has the right to deduct any payment pursuant to this application any amount due and owing to the BC Ministry of Agriculture and Food and that, under some conditions, there may be a right of deduction in favour of Canada or B.C. or both.

\_\_\_\_\_  
*Signature (participant/authorized signatory)*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Date (dd/mm/yyyy)*

The British Columbia Ministry of Agriculture and Food (BCMAF) recognizes the importance of your personal information and the privacy surrounding it. Pursuant to provincial legislation and regulations BCMAF will not share or disclose any of your information unless otherwise required by law or for the purpose of programs offered by BCMAF. For all privacy concerns, please contact the Office of the Information and Privacy Commissioner for British Columbia (web site: [www.oipc.bc.ca](http://www.oipc.bc.ca))

