Agri**Stability** 

## **AgriStability Program Appeal Submission Form**

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Please use this form to submit an appeal to the AgriStability Program. It is very important to note that this form should not be used to request an adjustment. To request an adjustment, use form T1275 - AgriStability and AgriInvest Programs Additional Information and Adjustment Request.

• Once complete, send the form and any attachments to: **AgriStability Program Appeals** 200 - 1690 Powick Rd Kelowna British Columbia V1X 7G5 Or Fax Toll Free: 1-877-605-8467 • For more information on submitting an appeal, please contact us toll free at 1-877-343-2767. Specify the program year(s) for which you are submitting an appeal: Program Year(s): Number of pages / attachments including this page: Section 1 - Personal Information Participant Identification Number (PIN): Name of Appellant: Telephone (days): Facsimile Number: If this appeal is being submitted on behalf of a partnership or combined operation, please provide the names of all appellants included in this appeal. NOTE: Shareholders of a corporation do not have to be listed.

Name of Co-appellant	Participant Identification Number (PIN)

Section 2 - Re	presentative's	Information
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If you are submitting this appeal on someone else's behalf, complete the section below:		
Name:		
Business Name:		
Telephone (days):	Facsimile Number:	

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	Section 3 - Nature of Appeal	
If the nature of the a	appeal is a missed deadline, please complete Box A.	
For all other appeal	s, please complete Box B.	
NOTE: An appeal re	equest must be submitted within 90 days from the notification of the rejection of your adjustment	
request or within 90	days from the notification of a decision which is subject to appeal.	
Box A - Missed	Deadline	
If you missed a dea	dline as a result of exceptional circumstances outside your control, please indicate the deadline that	
you missed and exp	plain the reason for missing the deadline. If you believe you met a deadline, but the Administration	
has indicated it doe	s not have a record of this, please describe the actions you took to meet the deadline and any	
evidence you have	of your actions.	
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## Box B - Program Treatment

If you are of the view that program rules were not correctly applied in the processing of your application, you may request a review. Program rules are outlined in the Program Guidelines, available using this link: Full Guidelines or by request at 1-877-343-2767.

In the space below, please explain which program rules you believe the Administration did not apply correctly in processing your application. NOTE: Disagreement with program rules is not valid grounds for appeal.

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	Section 4 - Documentation	
other correspond	provide supporting documentation for your appeal - examples would include copies of benefit notices or dence with the Administration, or evidence of circumstances related to missed deadlines. If you are ocumentation for this appeal, please list the documents on the numbered lines below. Please mark the	
front page of eac	ch document with the number you assign it to on the list.	
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		

9)

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A written request for an appeal may be made within ninety (90) days of the original Confirmation of Program Benefits or notification regarding adjustment request, whichever is later. Appeals must be sent to:

AgriStability Appeal Committee 200 - 1690 Powick Rd Kelowna British Columbia V1X 7G5 Or Fax Toll Free: 1-877-605-8467

- 15.2 The written appeal must:
  - · Clearly identify the nature of the appeal;
  - · Provide sufficient information and documentation to substantiate the appeal, and;
  - · Specify the remedy being sought
- 15.3 The AgriStability Appeal Committee must make recommendations in accordance with the agreements and legislation governing AgriStability.