

Contract Number	Crop Year	Home RM	Ver	Page	Date	Form ID
			1	1 of 1		

Name _____ Telephone Number(s) _____
 Address _____ Home Quarter _____
 City _____ Prov _____ Postal Code _____ Power of Attorney _____

Contact Information	Local Number	Toll-Free Number	Fax Number
		1-888-935-0000	
www.scic.ca			

IU Code	Crop	Endorsed		Dollar Coverage			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> \$150	<input type="checkbox"/> \$175	<input type="checkbox"/> \$250	<input type="checkbox"/> \$350
882	Corn Rainfall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To endorse Corn Rainfall crop: select 'Yes' in the Endorsed column.
 To delete a Corn Rainfall endorsement: select 'No' in the Endorsed column.
 To select dollar coverage, select 'x' in applicable dollar coverage box.

Monthly Weighting

Code	May	June	July	August
1	20%	40%	40%	0%
2	15%	35%	35%	15%
3	0%	20%	40%	40%

Capping
<input type="checkbox"/> 125%
<input type="checkbox"/> 150%

Refer to the Weather-based Programs Guide or online at www.scic.ca for information relating to weighting and capping percent options.

Note: The Corn Rainfall Insurance Program is continuous. No selections may be made or changed after March 31, 2020.

Land Code	RM	Legal Land Description	Acres	Weather Station*	Weighting Code	Capping Percent

*A map of eligible weather stations is available in the Guide, online at www.scic.ca or by contacting your local office.

Payment(s) to be deferred? Yes No Deferred Date: _____ (max. of one year from claim calculation)
DD/MM/YY

If unsure, select 'yes' to defer and enter a date. Should you wish to change your deferral selection, contact your local customer service office.
 To defer the entire claim amount your account must be paid in full prior to the claim calculation.

Customer Acknowledgement: I acknowledge that this endorsement, with any approved changes, constitutes my Corn Rainfall Insurance Program selections for the 2020 crop year and agree to the terms and conditions stated in the Crop Insurance contract, regulations and policies.

Saskatchewan Crop Insurance Corporation (SCIC) recognizes the importance of your personal information and the privacy surrounding it. Depending on the program offered by SCIC, and pursuant to provincial legislation and regulations, SCIC will not share or disclose any of your information unless otherwise required by law or for the purpose of programs offered by SCIC. SCIC will secure your information and may archive it indefinitely in accordance to The Archives Act. For all privacy concerns, please contact SCIC's Privacy Manager by e-mail at scic.ca or phone 306-728-7200.