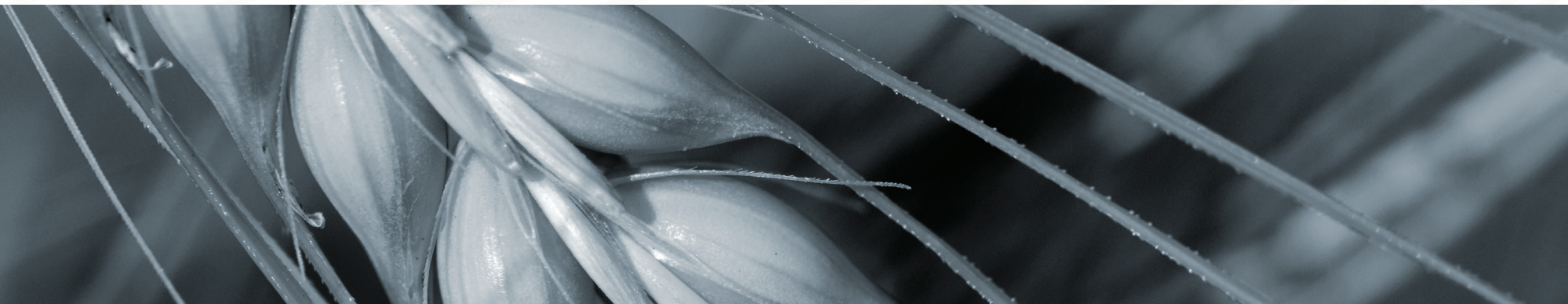




AgriStability

Interim Benefits Instruction Guide



How to Complete Your Interim Application

AgriStability participants who would like to apply for an interim benefit are required to complete the Interim Application form. The interim benefit option allows you to access funds prior to the completion of your fiscal period in the program year. The interim benefit is based on your estimated margin decline in the program year, relative to your estimated margin in your reference period.

- 1 Your SCIC ID and AgriStability PIN are different numbers. The AgriStability PIN is generated by the Federal Government for AgriStability and AgriInvest purposes, whereas the SCIC ID is unique to your Saskatchewan AgriStability account.

Note: Crop Insurance contract numbers are not to be used as either the SCIC ID or AgriStability PIN.

- 2 Please ensure all email addresses for the participant and contact persons are current and spelled correctly.
- 3 For AgriStability purposes, the main farmstead is where the majority of the gross farming income is derived; not your home quarter.
- 4 Fiscal year end is the end of your tax year, as reported to Canada Revenue Agency (CRA).

AgriStability

Saskatchewan Crop Insurance Corporation www.scic.ca
484 Prince William Drive Phone: 1-866-270-8450
PO Box 3000 Fax: 1-888-728-0440
Melville SK S0A 2P0 Email: agristability@scic.ca

Interim Application

SCIC ID:
1 AgriStability PIN:

Note: Deadline for submission is 90 days after program year-end.
Any questions, please contact us.

Mail: Saskatchewan Crop Insurance Corporation Phone: 1-866-270-8450
484 Prince William Drive Fax: 1-888-728-0440
PO Box 3000
Melville SK S0A 2P0

Section 1 - Participant Information

Name Home Phone

Address 1 Work Phone

Address 2 Cell Phone

City Province Postal Code Fax Number

Country E-mail

Legal land description of your main farmstead:

RM QTR SEC TWP RGE MER

Fiscal year-end: Day Month Year

Section 2 - Change Contact Person

Name Home Phone

Address 1 Work Phone

Address 2 Cell Phone

City Province Postal Code Fax Number

Country E-mail

Please check here to have a copy of your Calculation of Benefits (COB) sent to this contact person

Section 3 - Participant Declaration

By submitting this form, I understand an overpayment may occur if I fail to meet the related requirements. If any payment related to this application exceeds my final AgriStability benefit, I will be required to repay any overpayment.

I certify the information provided on this form to be true, correct and subject to the AgriStability Participant Initial Declaration. I am aware that to make a false statement is an offence.

Signature Printed Name
(Participant/Signing Officer)

Corporate Name Date
(if applicable)

The 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 with The Access Act. For all privacy concerns, please contact SCIC's Privacy & Security Commissioner by e-mail at securityofficer@scic.ca or phone at 306-728-7200.

5 Complete this area if someone else (e.g., spouse, common-law partner or accountant) has your consent to provide or ask for more information about your AgriStability and AgriInvest forms on your behalf. SCIC will communicate with your contact person as the first point of contact. Written correspondence will be sent to you and your contact person.

Note: A contact person will not be able to cancel your participation in the AgriStability Program, and they will remain on file until you authorize the change.

6 If you require additions or deletions of any contact persons receiving a copy of your Calculations of Benefits, please contact SCIC at 1-866-270-8450.

7 Paper copies of the application must be signed by the participant or signing officer, not the form preparer. If the application is submitted through AgConnect, it is deemed password-protected and will be accepted as a signature.

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Note: Deadline for submission is 90 days after program year-end.
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PO Box 3000
Melville SK S0A 2P0

Section 1 - Participant Information

Name		Home Phone	
Address 1		Work Phone	
Address 2		Cell Phone	
City	Province	Postal Code	Fax Number
Country	E-mail		

Legal land description of your main farmstead:

RM	QTR	SEC	TWP	RGE	MER
----	-----	-----	-----	-----	-----

Fiscal year-end: Day Month Year

Section 2 - Change Contact Person

Name		Home Phone	
Address 1		Work Phone	
Address 2		Cell Phone	
City	Province	Postal Code	Fax Number
Country	E-mail		

Please check here to have a copy of your Calculation of Benefits (COB) sent to this contact person

Section 3 - Participant Declaration

By submitting this form, I understand an overpayment may occur if I fail to meet the related requirements. If any payment related to this application exceeds my final AgriStability benefit, I will be required to repay any overpayment.

I certify the information provided on this form to be true, correct and subject to the AgriStability Participant Initial Declaration. I am aware that to make a false statement is an offence.

Signature (Participant/Signing Officer)	Printed Name
Corporate Name (if applicable)	Date

The 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 with The Access Act. For all privacy concerns, please contact SCIC's Privacy & Security Commissioner by e-mail at securityofficer@scic.ca or phone at 306-725-7200.

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Agricultural Partnership

SCIC
SASKATCHEWAN CROP
INSURANCE CORPORATION

8 If you are involved in multiple farming operations, you must submit program forms for each operation and assign a different operation number for each one (e.g., 1, 2, 3, etc.). This operation number is used on your AgriStability applications to clearly identify each operation. It is important to use the same operation number for the corresponding farm each year.

9 To be eligible for an Interim Benefit, you must have:

- a)** completed a minimum of six consecutive months of farming activity*;
- b)** completed a production cycle*;
- c)** completed the majority of your farming in Saskatchewan and reported farming income as an individual, a corporation, co-operative, trust, communal organization or other entity to CRA; or be a Status Indian farming on a reserve;
- d)** enrolled in the AgriStability Program prior to the enrolment deadline; and
- e)** your estimated program year margin decline more than 30 per cent, relative to your estimated reference margin.

**The requirements of six months farming activity or completing a production cycle may be waived if this criteria cannot be met due to a disaster situation beyond your control (e.g., livestock disease, flooding, etc.).*

10 A "crop share" is an agreement between a landowner (landlord) and land operator (tenant) in which the crop is shared, rather than a cash rent agreement; however, cropping expenses may not be shared. The tenant should report any commodities being crop shared. Producers are to report only their share of acres and production associated with their percentage of the crop share. They must also report income and expenses associated with only their share.

For example, if they have 1/3 of the crop share, they only report 1/3 of the income, expenses, acres and production associated with their share.

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Interim Application

SCIC ID:
AgriStability PIN:

Farming operation of **8** (Complete this page for each farming operation)
Farming operation name: _____

Section 4 - Program Year Farming Activity

* A production cycle and six months of farming activity must be completed to be eligible unless you have experienced a major disaster.

i. Have you completed a production cycle and six months of farming activity in this fiscal year? Yes No **9**

ii. Did you participate as a crop/production share landlord in the program year? Yes No **10**

iii. Explain the reason you are applying for an interim benefit (e.g. flooding, drought, quality factors, etc.)

iv. Based on criteria set out in the AgriStability Program Handbook, should this operation be combined to reflect the whole farm? If yes, indicate the name and PIN of the other operations. Yes No

Name	PIN	Please explain
Name	PIN	

v. Have there been any changes in your farming operation? Yes No

Explain reason for changes (e.g. increased acres of crop, decreased livestock inventory).

vi. Indicate any program year payments you have received or may receive related to the program year.

Crop Insurance \$	AgriRecovery \$	Other Program Payments \$
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vii. Indicate any of your allowable expenses that have increased or decreased unexpectedly this year. (If you require more space, please attach additional sheets)

Expense Categories	No significant increase/decrease	Total Amount (\$) Purchased for	Year
Feed Purchase	<input type="checkbox"/>		
Fertilizers and Soil Supplements	<input type="checkbox"/>		
Pesticides and Chemical Treatments	<input type="checkbox"/>		
Machinery (gasoline, diesel fuel, oil)	<input type="checkbox"/>		
Other (please specify) _____	<input type="checkbox"/>		

* Do not include amounts pre-bought for the next year
* Should you have additional information that could impact your interim benefit, such as unseedable acres, or grain not harvested, etc. please attach an additional page with notes to explain your unique circumstances.

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- 11 Provide a brief explanation of why you are expecting a decline in your income and applying for an interim benefit (e.g., market prices, drought, etc.).
- 12 The income, expenses and inventory information of two or more operations may be combined if the operations are not legally, financially or operationally independent; or if all or some of the transactions between the operations are above or below fair market value. If you are farming with multiple operations, please list these here and explain the nature of your relationship.
- 13 If you significantly altered the size or type of your farming operation during the program year, please select "Yes" and provide an explanation. Changes to the farm may include downsizing your operation (e.g., leasing out land), increasing your cattle herd significantly or switching from grain to forage production.
- 14 Report any amounts you received, or expect to receive, related to the program year. The following is included as income in the calculation of any interim benefit:
 - a) Crop Insurance payments
 - b) other program payments*

**Please identify what the other program payments are for. Payments from private insurance programs, where premiums are fully producer-funded, are non-allowable in the Program Year. Indemnities from programs such as hail insurance, Global Ag Risk Solutions, Just Solutions or the Western Livestock Price Insurance Program are excluded when calculating allowable income.*

Please refer to the Commodity Code Guide for additional program payments, available at scic.ca/agristability/publications

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Interim Application

SCIC ID:
 AgriStability PIN:

Farming operation ____ of ____ (Complete this page for each farming operation)
 Farming operation name: _____

Section 4 - Program Year Farming Activity

* A production cycle and six months of farming activity must be completed to be eligible unless you have experienced a major disaster.

i. Have you completed a production cycle and six months of farming activity in this fiscal year? Yes No

ii. Did you participate as a crop/production share landlord in the program year? Yes No

iii. Explain the reason you are applying for an interim benefit (e.g. flooding, drought, quality factors, etc.) 11

iv. Based on criteria set out in the AgriStability Program Handbook, should this operation be combined to reflect the whole farm? If yes, indicate the name and PIN of the other operations. Yes No 12

Name	PIN	Please explain
Name	PIN	

v. Have there been any changes in your farming operation? 13 Yes No

Explain reason for changes (e.g. increased acres of crop, decreased livestock inventory).

vi. Indicate any program year payments you have received or may receive related to the program year.

Crop Insurance \$	AgriRecovery \$	Other Program Payments \$ 14
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vii. Indicate any of your allowable expenses that have increased or decreased unexpectedly this year. (If you require more space, please attach additional sheets)

Expense Categories	No significant increase/decrease	Total Amount (\$) Purchased for	Year
Feed Purchase	<input type="checkbox"/>		
Fertilizers and Soil Supplements	<input type="checkbox"/>		
Pesticides and Chemical Treatments	<input type="checkbox"/>		
Machinery (gasoline, diesel fuel, oil)	<input type="checkbox"/>		
Other (please specify) _____	<input type="checkbox"/>		

* Do not include amounts pre-bought for the next year
 * Should you have additional information that could impact your interim benefit, such as unseedable acres, or grain not harvested, etc. please attach an additional page with notes to explain your unique circumstances.

Page 2 of 5

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15 For each expense category, please indicate either “no significant increase or decrease” by selecting the check box or provide the total expected dollar amount of the expense (not just the amount of the increase or decrease). Include only expenses that pertain to the program year. Do not include any amounts that were pre-bought for the next program year.

16 If you have other allowable expenses that have shown a significant change, indicate the expense as “Other” and specify the total amount purchased.

For a list of allowable expenses, please refer to the AgriStability Program Handbook available at scic.ca/agristability/publications

17 If you have additional information you would like to add to your interim application which may impact the calculation, please include an additional page indicating your unique circumstances.

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Interim Application

SCIC ID:
 AgriStability PIN:

Farming operation _____ of _____ (Complete this page for each farming operation)
 Farming operation name: _____

Section 4 - Program Year Farming Activity

* A production cycle and six months of farming activity must be completed to be eligible unless you have experienced a major disaster.

i. Have you completed a production cycle and six months of farming activity in this fiscal year? Yes No

ii. Did you participate as a crop/production share landlord in the program year? Yes No

iii. Explain the reason you are applying for an interim benefit (e.g. flooding, drought, quality factors, etc.)

iv. Based on criteria set out in the AgriStability Program Handbook, should this operation be combined to reflect the whole farm? If yes, indicate the name and PIN of the other operations. Yes No

Name	PIN	Please explain
Name	PIN	

v. Have there been any changes in your farming operation? Yes No

Explain reason for changes (e.g. increased acres of crop, decreased livestock inventory).

vi. Indicate any program year payments you have received or may receive related to the program year.

Crop Insurance \$	AgriRecovery \$	Other Program Payments \$
-------------------	-----------------	---------------------------

vii. Indicate any of your allowable expenses that have increased or decreased unexpectedly this year. (If you require more space, please attach additional sheets)

Expense Categories	No significant increase/decrease	Total Amount (\$) Purchased for	Year
Feed Purchase	<input type="checkbox"/> 15		
Fertilizers and Soil Supplements	<input type="checkbox"/>		
Pesticides and Chemical Treatments	<input type="checkbox"/>		
Machinery (gasoline, diesel fuel, oil)	<input type="checkbox"/>		
Other (please specify) _____	<input type="checkbox"/> 16		

* Do not include amounts pre-bought for the next year

17 * Should you have additional information that could impact your interim benefit, such as unseedable acres, or grain not harvested, etc. please attach an additional page with notes to explain your unique circumstances.

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25 For cow/calf producers: Record the total number of cows that calved or are expected to calf in the program year. Next, record the number of calves born or expected to be born, excluding deaths. Do not include calves held over from the previous year.

26 For fed cattle: To be considered a fed animal, you must have made an appreciable contribution to the growth and maturity of the animal in the program year. This excludes all breeding animals, culls and weaned animals born in the program year.

For cattle, an appreciable contribution is defined as 90 kg (200 lbs) weight gain or a minimum of 60 days on feed. For fed cattle, this includes both animals born on the farm and purchased animals. Do not include calves entered in the Cow/Calf Production section.

27 For custom fed cattle: Report only the Number of Animal Feed Days. For example, 50 animals fed for 100 days equals 5,000 feed days (50 × 100 = 5,000). Animal feed days begin post weaning and end with either the sale, expected estimated time of sale or the end of your fiscal period, whichever is earlier.

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AgriStability PIN:

Farming operation _____ of _____ (Complete this page for each farming operation)
Farming operation name: _____

Section 4 - Program Year Farming Activity (continued)

Livestock Productive Capacity

Code	Cow/Calf Production	Number of Cows Calved	Estimated Average Sale Weight	Estimated Number of Calves Intended for Sale	Average Price per Head

25

Code	Fed Cattle	Number of Animals Intended for Sale <i>(do not include purchased animals sold)</i>	Estimated Average Weight	Average Price per Head

26

Additional Information

Code	Fed Cattle	Number of Animal Feed Days	Number of Animals Fed

27

Code	Purchased Animals	Head Purchased	Purchased Head Intended for Sale (if any)	Estimated Average Weight Sold	Average Price per Head Sold

Page 4 of 5

28 For feeder hogs: You must have made appreciable contribution to the growth and maturity of the animal in the program year. If you own nursery or feeder hogs, use codes 124 (fed over 51 lbs) and 125 (fed up to 50 lbs). Report Animal Feed Days within the program year. This is calculated by using the number of expected animals multiplied by the number of expected days each animal will be fed. For example, 50 animals fed for 3 months (or 90 days) equals 4,500 feed days ($50 \times 90 = 4,500$).

Under Number of Animals Fed, report the number of animals you fed to appreciable weight gain. For example, if you sold 600 animals under 50 lbs and 400 animals over 51 lbs, report "600" under line code 125 and "400" under line code 124. For custom fed hogs only, enter the Number of Feed Days.

29 For hog production, line code 145 Hogs, Farrowing (weanlings or isoweans), provide the number of sows that birthed (or are expected to birth) in the program year, the number of animals born (or expected to be born) and the average wean weight in pounds.

For line code 123 Hogs, Farrow to Finish, report the number of sows that birthed or are expected to birth in the program year and the number of animals born or are expected to be born. If you cannot determine the number of sows that birthed in the program year, estimate by dividing the births or expected births by your average birth rate per sow per year. For example, $5,000 \div 20 = 250$ sows.

30 Other estimated livestock production should be listed in detail. Please refer to the Productive Capacity List in the Commodity Code Guide for a list of codes and descriptions. For example, list "Hives Producing" and possibly "Beeswax", rather than just "Bees".

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Farming operation _____ of _____ (Complete this page for each farming operation)
 Farming operation name: _____

Section 4 - Program Year Farming Activity (continued)

Code	Fed Hogs	Number of Animal Feed Days	Number of Animals Fed

28

Code	Hog Production	Number of Animals Born	Number of Sows that Birthed	Average Wean Weight

29

Additional Information

Code	Other Livestock Products: Specify	Production	Productive Capacity

30

Additional Information

Page 5 of 5

CONTACT INFORMATION

AgriStability Call Centre

Toll Free: 1.866.270.8450

Fax: 1.888.728.0440 (Toll-Free)

Email: agristability@scic.ca

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Saskatchewan Crop Insurance Corporation

Head Office

484 Prince William Drive

Box 3000

Melville, SK S0A 2P0

Office Hours

Monday to Friday, 8 a.m. to 5 p.m.

Closed statutory holidays

All program forms and guides can
be found at scic.ca/agristability