

SPECIES AT RISK PROGRAMS ENROLMENT FORM

I prefer future correspondence in English Langue de correspondance préférée français

Salutation	First Name	Initial	Last Name	Job Title
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Address (Line 1)	Primary Phone	Secondary Phone
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Address (Line 2)	Email Address	Fax Number
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City/Town	Province	Postal Code	Country	County/District	Municipality
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Gross Business Revenue <input type="checkbox"/> \$0-\$6,999 <input type="checkbox"/> \$7,000-\$9,999 <input type="checkbox"/> \$10,000-\$24,999 <input type="checkbox"/> \$25,000-\$49,999 <input type="checkbox"/> \$50,000-\$99,999 <input type="checkbox"/> \$100,000-\$249,999 <input type="checkbox"/> \$250,000-\$499,999 <input type="checkbox"/> \$500,000-\$999,999 <input type="checkbox"/> \$1,000,000 - \$1,999,999 <input type="checkbox"/> \$2,000,000 - \$2,999,999 <input type="checkbox"/> \$3,000,000 - \$3,999,999 <input type="checkbox"/> \$4,000,000 - \$4,999,999 <input type="checkbox"/> \$5,000,000 and over	Do you have a Premises ID? <input type="checkbox"/> Yes <input type="checkbox"/> No (Obtain your Premises ID at www.ontariopid.com)
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Business / Organization (This is the name under which the client operates)	Business Location - Address (Line 1) <input type="checkbox"/> Same as my mailing address
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Legal Name of Business / Organization (The complete legal name under which the client operates) <input type="checkbox"/> Same as above or:	Address (Line 2)
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Mailing Address <input type="checkbox"/> Same as above	City/Town	Prov.	Postal Code	Emergency Coordinates (911 Address)
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Address (Line 2)	County/District	Municipality	Country
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City/Town	Prov.	Postal Code	Country	Primary Phone	Secondary Phone
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County/District	Municipality	Fax Number	Website
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Ownership Structure Sole Proprietorship Registered Professional Partnership Incorporated Business Cooperative Community or other Not for Profit

Broader Public Sector Other Number of years using this ownership structure: _____

Indigenous Partners/Community

Yes No

Farm Business Registration Number (FBRN)

A Farm Business Registration Number (FBRN) for a qualifying farm business can be received by registering with the OFA, CFFO or NFU-O. This is a seven (7) digit number. Farm businesses that declare gross farm income of \$7,000 or more (for income tax purposes) are required by legislation to register their business.

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Exemption: If you do not have a FBRN, and qualify for religious, cultural or new farmer exemption, please select that option below. Further documentation may be required to verify your exemption status.

- Other
- My business / organization qualifies for religious exemption
- My business / organization qualifies for cultural exemption
- I am a new farmer

Is your business / organization certified organic (or in transition to become certified)?

- Yes, my business / organization is certified organic
- My business / organization is in transition towards organic certification
- No, my business / organization is not certified organic

Primary Commodity - Identify with Letter A Secondary Commodity - Identify with Letter B

This commodity contributes to the majority of gross income. Choose one.

This commodity contributes to at least 25% of gross income. Choose one

Crop Production

- ___ Oilseed and grain
- ___ Vegetable and melon
- ___ Fruit and tree nut
- ___ Greenhouse, nursery and floriculture
- ___ Other _____

- ___ Meat processing and meat product manufacturing
- ___ Beverage manufacturing
- ___ Seafood processing, preparation and packaging
- ___ Grain and oilseed milling
- ___ Bakeries and tortilla manufacturing

- ___ Resin, synthetic rubber, and artificial and synthetic fibres and filaments
- ___ Pesticide, fertilizer and other agricultural chemicals
- ___ Paint, coating and adhesives
- ___ Soap and cleaning compounds
- ___ Other _____

- ___ Food, beverage and tobacco merchant wholesaler
- ___ Machinery, equipment and supplies merchant wholesaler
- ___ Food and beverage stores
- ___ Other _____

Animal Production

- ___ Beef cattle, including feedlots
- ___ Dairy cattle and milk production
- ___ Hog and pig
- ___ Poultry and egg
- ___ Sheep and goat
- ___ Aquaculture
- ___ Horse and other equine
- ___ Other _____

- ___ Fruit and vegetable preserving/processing
- ___ Specialty food manufacturing
- ___ Sugar and confectionary product manufacturing
- ___ Animal food manufacturing
- ___ Other _____

General Manufacturing

- ___ Tobacco manufacturing
- ___ Fibre, yarn and thread mills
- ___ Fabric mills
- ___ Converted paper product manufacturing
- ___ Agricultural, construction and mining machinery manufacturing
- ___ Other _____

Other

- ___ Support activities for crop production
- ___ Support activities for animal production
- ___ Electric Power Generation
- ___ Water supply and irrigation
- ___ Rail transportation
- ___ Truck transportation
- ___ Warehousing and storage
- ___ Professional, Scientific and Technical Services
- ___ Other / Not Applicable

Food and Beverage Processing

- ___ Dairy product manufacturing

Chemical Manufacturing

- ___ Basic organic chemicals
- ___ Pharmaceutical and medicine

Wholesale and Retail Sales

- ___ Farm product merchant wholesaler

Authorized Signing Authority of Business/Organization I have signing authority for this business or organization.

First Signing Authority: Salutation _____ First Name _____ Last Name _____ Job Title _____

Second Signing Authority: Salutation _____ First Name _____ Last Name _____ Job Title _____

Livestock: Indicate the approximate number of livestock on the business / organization in the past twelve months.

Beef Cattle	Dairy Cattle	Hogs	Poultry	Other Livestock (description)

Farmland: Indicate farmland associated with your business / organization that you own, rent or lease.

Acres Owned (Crop or Pasture)	Acres Owned (Non-Crop or Non-Pasture)	Acres Rented/Leased	Number of Acres Irrigated

Summary

Please take a moment to review the information you have provided and ensure it is accurate.

Terms and Conditions

Notice to Collect Personal Information: Your personal information is collected under the authority of Section 33 of the Freedom of Information and Protection of Privacy Act and is protected by the privacy provisions of the Act.

For further SARPAL information, please refer to www.ontariosoilcrop.org or call 519-826-3035.

By checking the box below, I/We declare the information above to be true and correct and I/We agree to abide to all the program rules, procedures and conditions. I/We consent to the release of this information to Environment and Climate Change Canada, and associated program partners for the purposes of future programming, program promotion and program evaluation.

I have read and agree to all the preceding terms and conditions.

Name of Signing Authority _____ Signature of Signing Authority _____ Date _____

Submit your form to: Species at Risk Partnerships on Agricultural Lands
 1- 367 Woodlawn Road West, Guelph, ON N1H 7K9
OR
 Email: SARPAL@ontariosoilcrop.org

For Office Use Only

Received by: _____ Signature: _____ Date: (yyyy/mm/dd) _____