

Applicant Information

Legal Surname		Full Legal Name			
Date of Birth (YYYY-MM-DD)		SIN (Optional)		Drivers License Number	
Address		Town/City		Province	Postal Code
Home Telephone Number		Business Telephone Number		Cell Number	
Fax Number		Email Address			

Banking Information

Bank, Treasury Branch or Other Financial Institution Which Member Maintains an Account at (please provide name, address and telephone number):

Loan Purpose

Credit Amount Requested	Approximate Number of Head
<input type="text"/>	<input type="text"/>

Heifer Calves
 Bred Heifers
 Bred Cows (under 5 yrs of age)
 Cow/Calf Pairs (under 5yrs of age)
 Bred Cows (over 5yrs of age)
 Cow/Calf Pairs (over 5yrs of age)
 Ewe Lambs
 Yearling Ewes

Experience in Cow/Calf Operation (# years): _____ Cows Calved (# Previous year or years): _____

Cattle Location

Will the cattle be held at a 3rd party location? Yes NO

Legal Land Description Where Breeding Stock Will Be Held

Directions From Nearest Town (include name of nearest town)

Where will the cattle be pastured?

Owned Land: Rented Land Community Pasture: Not being pastured:

If other please explain:

Calf Price Insurance Program - Optional

The Cattle Price Insurance Program for Calves offers price insurance that is intended to insure calves born in the spring and sold in the fall. Producers will have the ability to evaluate coverage options from February to May to tailor insurance coverage to their operation and intended calf marketings for September to December.

I would like more information on the Calf Price Insurance Program.

Yes

No

I would like to participate in the CPIP Program.

Yes

No

Authorization

I am making this application for Loan(s) to Alberta Breeder Finance Inc.. If my Application is accepted I will be required to complete a Loan Agreement, Security Agreement, Promissory Note and to Provide other documents and Information to obtain the Loan(s).

Alberta Breeder Finance Inc. may disclose the particulars of my Loan(s) to other for the purpose connected with my Loan(s). I authorize and consent to the receipt and exchange of credit information about me from time to time, including the exchange and sharing of credit information with any credit reporting agency, credit bureau or person with whom I may have financial affairs which they may require.

I certify that all information I have provided in this application is accurate and is a true representation of my financial position.

Signature of Applicant

Date

Print Name of Applicant

For Office Use ONLY

Member of Feeders Association

Yes

No

Please Specify Association: _____

Please Specify Feeder Loan Limit: \$ _____

Producer Recommended (attach letter)

Yes

No

Credit Amount Approved

\$ _____

Administrators Signature

Date

Directors Signature (if required)

Date