

ADVANCE RATES FOR COMMODITIES

Advance rates are effective **April 1, 2023** but are subject to change during the applicable production period.

Go to www.feederassoc.com or call 1-844-333-3377 to obtain the most recent advance rates.

FIELD CROPS	ALBERTA RATE/MT	SASKATCHEWAN RATE/MT	LIVESTOCK	ALBERTA RATE/HD	SASKATCHEWAN RATE/HD
Barley	\$160.05	\$155.20	Cattle Feeder Calf (400 - 700 lbs)	\$1,000.31	\$997.65
Canola	\$397.70	\$397.70	Cattle Feeder (700 - 900 lbs)	\$1,043.72	\$1,034.02
Corn	\$185.21	\$147.02	Cattle Finished (900 - 1250 lbs)	\$1,165.21	\$1,162.79
Durum	\$194.00	\$194.00	Cattle Finished (More than 1250 lbs)	\$1,517.57	\$1,514.17
Fababeans	\$194.00	\$194.30	Heifers Breeding Calf	\$800.96	\$800.96
Flax	\$300.70	\$300.70	Heifers Breeding Bred	\$1,154.32	\$1,154.32
Lentils	\$320.10	\$320.10	Cow Breeding Mature has calved	\$1,177.88	\$1,177.88
Mustard	\$829.22	\$829.22	Bull Breeding Mature Less than 2 yrs.	\$1,931.72	\$1,931.72
Oats	\$135.80	\$126.10	Bull Breeding Mature More than 2 yrs.	\$2,214.41	\$2,214.41
Peas - Dry	\$194.00	\$194.00			
Rye - Spring	\$116.40	\$116.40	Goats Kids (less than 50 lbs)	\$49.71	\$49.71
Rye - Fall	\$111.55	\$111.55	Goats Kids (50 - 70 lbs)	\$93.36	\$93.36
Wheat - Feed	\$145.50	\$145.50	Goats Goatings (more than 70 lbs)	\$108.16	\$108.16
Wheat	\$174.60	\$174.60			
Winter Wheat	\$135.80	\$135.80			
FORAGE/HAY	RATE/MT	RATE/MT	Lambs (61 to 79 lbs)	\$85.36	\$85.36
Alfalfa	\$106.70	\$106.70	Lambs (80 to 109 lbs)	\$107.67	\$107.67
Hay	\$87.30	\$87.30	Lambs (more than 110 lbs)	\$134.10	\$134.10
GRASS SEED	RATE/LB				
Clover Seed Alisike	\$0.5820	NA	Bison Feeder (650 - 750 lbs)	\$847.78	\$847.78
Clover S.C. Red	\$0.5335	NA	Bison Finished (900 - 1050 lbs)	\$1,198.19	\$1,198.19
Fescue Seed	\$0.5820	NA			
Creeping Red					
Fescue - Sheeps	\$0.5335	NA			
Alfalfa Seed	\$0.6790	NA			
Timothy Hay Seed	\$0.3395	NA			

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION: CROPS, FORAGE, HAY & GRASS SEED

In this Worksheet, Western Cash Advance Program Inc. is referred to as either the "Administrator" or "WeCAP" and other Advance Payment Program Administrators are referred to as "Other Administrators".

Use this application for Advances of Agricultural Products that are In Production other than Livestock using AgriInsurance, AgriStability, and/or Global Ag Risk Solutions as security.

INSTRUCTIONS

Advances in installments

- ✓ If the Advance is required to be given in two or more installments, use this application for the **first installment**.
- ✓ The Producer must submit their Seeded Acreage Report(s) (or any document providing the information on anticipated final production) accompanied by a completed **2nd installment form (Section 2 of this application)** to the Administrator prior to July 31, 2023 so as to not be considered in default.
- ✓ If the Production Insurance (PI) Agency does not provide a Seeded Acreage Report(s) for the Agricultural Product(s) on which the Producer is requesting an Advance and if the Administrator has the provision in the Advance Guarantee to issue the Advance in one installment, Sections 1.1 to 1.7 can be completed for the whole advance.
- ✓ For Storable Agricultural Products, once the Agricultural Product(s) is in storage, the Producer must complete the Agricultural Products in Post-Production and return it to the Administrator by December 31, 2023.

Security

- ✓ If, to secure the Advance, the Producer chooses to use:
 - only Production Insurance (PI), only Sections 1.1, 1.2, 1.3, and 1.7 of this Worksheet need to be completed;
 - only AgriStability, only Sections 1.1, 1.2, 1.4.1 to 1.4.5, and 1.7 of this Worksheet need to be completed; or
 - only Global Ag Risk Solutions, only Sections 1.1, 1.2, 1.6 and 1.7 of this Worksheet need to be completed.
- ✓ If the Producer chooses to use more than one program to secure an Advance, Section 1.5 of this Worksheet needs to be completed.
- ✓ The Producer must first use their PI (multi-peril coverage is required under APP) coverage to guarantee an Advance before using their AgriStability coverage or coverage from another program.
- ✓ Concerning PI, under Section 1.3, the Producer must indicate the insured value for each Agricultural Product or for the basket of products insured. This value compared with the calculation of the Advance based on the anticipated production, will determine the Maximum Eligible Advance amount.

General

- ✓ Use the Advance Rate(s) provided by the Administrator
- ✓ The Producer must not have more than one million dollars (\$1,000,000) in outstanding Advances, including as a result of the overlap between Program Years and amounts issued to Related Producers.
- ✓ The interest-free Advances are limited to the first two hundred fifty thousand dollars (\$250,000) issued per Program Year and will be limited by other interest-free amounts issued to the Producer and/or other Related Producers.
- ✓ Advance amounts issued above the first two hundred fifty thousand dollars (\$250,000) issued in a Program Year shall be interest-bearing.

Section 1

A. Agricultural Product in Production - Intended Seeding Advance

If you have or will be obtaining crop insurance, please provide documents from your insurer to verify your coverage and the payment of your premium. If you are using AgriStability send your 2023 Program Enrollment/Fee Notice and the Production Margin Summary for the Reference Margin, including Schedules 2 & 3 with your Application.

1.1 Agricultural Product Info.			1.2 Eligible Advance Based on Anticipated Production			1.3 Eligible Advance Based on Production Ins.		
Agriculture Product	Security Type		Adv. Rate per Unit (a)	Anticipated Production		Advance. based on the Anticipated Production per Product (a x b) (A)	PI Contract No.	Maximum Eligible Advance per Product (lesser of (A) and (B)) (C)
	Crop Ins.	Ag Stab.		Quantity (b) (# Acres)	Unit of Measure (MT/AC)			
PI Coverage per Product (single coverage including only one product)								
(1)	<input type="checkbox"/>	<input type="checkbox"/>					\$	
(2)	<input type="checkbox"/>	<input type="checkbox"/>					\$	
(3)	<input type="checkbox"/>	<input type="checkbox"/>					\$	
(4)	<input type="checkbox"/>	<input type="checkbox"/>					\$	
(5)	<input type="checkbox"/>	<input type="checkbox"/>					\$	
Sub-total						A1	B1	C1

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION CONTINUED

Agriculture Product	Crop Ins.	Ag Stab.	Adv. Rate per Unit (a)	Anticipated Production		Advance. based on the Anticipated Production per Product (a x b) (A)	PI Contract No.	Maximum Eligible Advance per Product (lesser of (A) and (B)) (C)
				Quantity (b) (# Acres)	Unit of Measure			
PI Coverage per Product (single coverage including only one product)								
(6)	<input type="checkbox"/>	<input type="checkbox"/>					\$	Maximum Eligible Advance for all of those Products (lesser of A2 or B2)
(7)	<input type="checkbox"/>	<input type="checkbox"/>						
(8)	<input type="checkbox"/>	<input type="checkbox"/>						
Sub-total						A2	B2	C2 \$
Total						A	(A1+ A2)	(B1 + B2)
						A \$	B \$	
Maximum Eligible Advance through PI (total of C1 + C2)							D	\$

B. Calculation of Maximum AgriStability

Instructions

AgriStability ID: _____

- ✓ If the AgriStability Administrator has provided the Producer's
- Final Reference Margin with Allowable Expenses go to Section 1.4.1, then to Section 1.4.3 of the Application; or
 - Only the Enrolment Notice go to Section 1.4.2 to calculate the Reference Margin and Allowable Expenses, then to Section 1.4.3 of the Application
 - For Olympic Average calculations, remove the highest and lowest Program Year Margins prior to averaging the Program Year Margins for the remaining three years. Remove the Allowable Expenses for the corresponding highest and lowest Program Year Margin years and average the Allowable Expenses for the remaining three years.
 - If the Producer does not have five years of Program Year Margins and Allowable Expenses, calculate the averages based on the information for the years provided.
 - If the Producer ends up with a negative AgriStability Reference Margin, go to Section 1.4.4.
 - If the Producer has received any interim payments for the AgriStability Program Year, they must be deducted from the coverage available under the program in Section 1.4.5.

1.4.1 Producer's Reference Margin – if Provided by the AgriStability Administrator

AgriStability Reference Margin (If known enter \$0.00)	E	\$
AgriStability Allowable Expenses	F	\$

1.4.2 Calculations when estimating AgriStability Coverage from the Producer's Enrolment Notice

AgriStability Reference Margin and Allowable Expenses Calculation	Calculate using the Olympic Average (excluding the High and Low PYM and corresponding AE years)			Average (\$)	
Program Year Margin (PYM)	\$	\$	\$	E	\$
Allowable Expenses (AE)	\$	\$	\$	F	\$

1.4.3 Use this calculation if the Reference Margin (E) is Positive (greater than 0)

Estimated AgriStability Positive Margin Coverage	E x 49%	G	\$
Estimate AgriStability Negative Margin Coverage	F x 70%	H	\$
Estimate Total AgriStability Coverage	G + H	I	\$
AgriStability Coverage Limit	(greater of E or I)	J	\$

1.4.4 Use this calculation if the Reference Margin (E) Negative (less than 0)

Calculated AgriStability Negative Margin Coverage	E + F	K	\$
AgriStability Coverage Limit Used to Calculate the APP Advance	K x 70%	L	\$

1.4.5 Reference Margin Adjustments

AgriStability Interim Payments Received To-Date (if none entered \$0.00)	M	\$
Maximum AgriStability Security Available to Secure an APP Advance ((J or L) less M)	N	\$
Maximum Eligible APP Advance (lesser of A and N)	O	\$

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION CONTINUED

1.5 Eligible Advance Based on Using 2 Programs to Guarantee an Advance

Maximum security available through PI and AgriStability (B+O)	P	
Maximum Eligible Advance is the lesser of (A) and (P)	Q	\$

1.6 Eligible Advance Based on Global AG Risk Solutions (GARS) Cost Production Insurance

GARS Contract No.	Policy Effective Date	Policy Expiry Date
Enter Value of GARS Insurance Contract	R	
Maximum Eligible Advance Issued (lesser of A and R)	S	

1.7.1 Maximum Eligible Advance – 1st Installment

- ✓ The Advance can be issued in one installment (i.e., 100%) if the seeded acreage can be confirmed prior to requesting the Advance.
- ✓ If the Advance is issued in two installments, the 1st Advance instalment cannot exceed 60% of the Maximum Eligible Advance.

Enter Maximum Eligible Advance (Enter Maximum Eligible Advance from Sections 1.3 1.4 1.5, or 1.6)		\$
Proportion of Advance attributed to 1 st Installment (to be filled in by the Administrator)		%
1 st Installment of Production Advance	=	\$
Advance Requested by Producer	Advance Issued by Administrator	
\$	\$	

The legal description (section-township-range) of land you intend to seed:

Section 2

A. Agricultural Product in Production: Actual Seeded Advance (Second Installment)

Use this section for the SECOND INSTALLMENT of advances on Agriculture Products that are In Production other than Livestock using AgriInsurance, AgriStability, and/or Global Ag Risk Solutions as security.

Advances in Installments

If the advance is required to be given in two or more installments, use this application for the **second installment** when submitting the Seeded Acreage Report(s) (or any document providing the information on the final production). The application above was for the first installment. If you have elected to use Production Insurance as security for this Advance, provide a Seeded Acreage Report together with a statement of crop insurance policy for coverage of the balance of the Eligible Advance you have claimed by no later than July 31, 2023 together with this Worksheet.

If you have used AgriStability as security for your Advance, you must provide a BRM Program Coverage Report which must be witnessed and sworn before a Commissioner for Oaths and must be received no later than July 31, 2023.

For Storable Agricultural Products, once the Agricultural Product(s) is in storage, the Producer must complete the Post-Production Report Form and return it to the Administrator by December 31, 2023.

INSTRUCTIONS

- ✓ Complete this section for the second installment (if applicable) when submitting the Seeded Acreage Report(s) (or any document providing the Information on anticipated final production).

Security

If, to secure the Advance, the Producer chooses to use:—

- only Production Insurance (CPI), only Sections 2.1, 2.2, 2.3, and 2.7 of this Worksheet need to be completed;
- only AgriStability, only Sections 2.1, 2.2, 2.4.1 to 2.4.5, and 2.7 of this Worksheet need to be completed; or
- only Global Ag Risk Solutions, only Sections 2.1, 2.2, 2.6 and 2.7 of this Worksheet need to be completed.
- ✓ If the Producer chooses to use more than one program to secure an Advance, Section 2.5 of this Worksheet needs to be completed.
- ✓ The Producer must first use their PI (multi-peril coverage is required under APP) coverage to guarantee an Advance before using their AgriStability coverage or coverage from another program.
- ✓ Concerning PI, under Section 2.3, the Producer must Indicate the insured value for each Agricultural Product or for the basket of products Insured. This value compared with the calculation of the Advance based on the anticipated production, will determine the Maximum Eligible Advance amount.
- General
- ✓ Complete Section 2.1 using the Advance Rates in effect at the time of the Seeded Acreage Report in order to confirm the value of the Agricultural Product in storage is sufficient to cover the value of the outstanding Advance.
- ✓ The Producer must not have more than one million dollars (\$1,000,000) in outstanding Advances, including as a result of the overlap between Program Years and amounts issued to Related Producers.
- ✓ The interest-free Advances are limited to the first two hundred and fifty thousand dollars (\$250,000) issued per Program Year and will be limited by other interest-free amounts issued to the Producer and/or other Related Producers.
- ✓ Advance amounts issued above the first two hundred and fifty thousand dollars (\$250,000) issued in a Program Year shall be interest-bearing.

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION CONTINUED

2.1 Agricultural Product Info.			2.2 Eligible Advance Based on Anticipated Production				2.3 Eligible Advance Based on Production Ins.		
Agriculture Product	Security Type		Adv. Rate per Unit (a)	Anticipated Production		Advance, based on the Anticipated Production per Product (a x b) (A)	PI Contract No.	Maximum Eligible Advance per Product (lesser of (A) and (B)) (C)	
	Crop Ins.	Ag Stab.		Quantity (b) (# Acres)	Unit of Measure (MT/AC)		Insured Value (B)		
PI Coverage per Product (single coverage including only one product)									
(1)	<input type="checkbox"/>	<input type="checkbox"/>					\$		
(2)	<input type="checkbox"/>	<input type="checkbox"/>					\$		
(3)	<input type="checkbox"/>	<input type="checkbox"/>					\$		
(4)	<input type="checkbox"/>	<input type="checkbox"/>					\$		
(5)	<input type="checkbox"/>	<input type="checkbox"/>					\$		
Sub-total						A1		B1	C1
PI Coverage per Basket of Crops (single coverage including more than one product)									
(6)	<input type="checkbox"/>	<input type="checkbox"/>					\$	Maximum Eligible Advance for all of those Products (lesser of A2 or B2)	
(7)	<input type="checkbox"/>	<input type="checkbox"/>							
(8)	<input type="checkbox"/>	<input type="checkbox"/>							
Sub-total						A2		B2	C2
Total							(A1 + A2)	(B1 + B2)	
						A	\$	B	\$
Maximum Eligible Advance through PI (total of C1 + C2)								D	\$

B. - Calculation of Maximum AgriStability

Instructions

AgriStability ID: _____

- ✓ If the AgriStability Administrator has provided the Producer's
- Final Reference Margin with Allowable Expenses go to Section 2.4.1, then to Section 2.4.5 of the Application; or
 - Only the Enrolment Notice go to Section 2.4.2 to calculate the Reference Margin and Allowable Expenses, then to Section 2.4.3 of the Application.
 - For Olympic Average calculations, remove the highest and lowest Program Year Margins prior to averaging the Program Year Margins for the remaining three years. Remove the Allowable Expenses for the corresponding highest and lowest Program Year Margin years and average the Allowable Expenses for the remaining three years.
 - If the Producer does not have five years of Program Year Margins and Allowable Expenses, calculate the averages based on the information for the years provided.
 - If the Producer ends up with a negative AgriStability Reference Margin, go to Section 2.4.4.
 - If the Producer has received any interim payments for the AgriStability Program Year, they must be deducted from the coverage available under the program in Section 2.4.5.

2.4.1 Producer's Reference Margin – if Provided by the AgriStability Administrator

AgriStability Reference Margin (If known enter \$0.00)	E	\$
AgriStability Allowable Expenses	F	

2.4.2 Calculations when estimating AgriStability Coverage from the Producer's Enrolment Notice

AgriStability Reference Margin and Allowable Expenses Calculation	Calculate using the Olympic Average (excluding the High and Low PYM and corresponding AE years)			Average (\$)	
Program Year Margin (PYM)	\$	\$	\$	E	\$
Allowable Expenses (AE)	\$	\$	\$	F	\$

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION CONTINUED

2.4.3 Use this calculation if the Reference Margin (E) is Positive (greater than 0)

Estimated AgriStability Positive Margin Coverage	E x 49%	G	\$
Estimate AgriStability Negative Margin Coverage	F x 70%	H	\$
Estimate Total AgriStability Coverage	G + H	I	\$
AgriStability Coverage Limit	(greater of E or I)	J	\$

2.4.4 Use this calculation if the Reference Margin (E) Negative (less than 0)

Calculated AgriStability Negative Margin Coverage	E + F	K	\$
AgriStability Coverage Limit Used to Calculate the APP Advance	K x 70%	L	\$

2.4.5 Reference Margin Adjustments

AgriStability Interim Payments Received To-Date (if none entered \$1.00)	M	\$
Maximum AgriStability Security Available to Secure an APP Advance ((J or L) less M)	N	\$
Maximum Eligible APP Advance (lesser of A and N)	O	\$

2.5 Eligible Advance Based on Using 2 Programs to Guarantee an Advance

Maximum security available through PI and AgriStability (B+O)	P	\$
Maximum Eligible Advance is the lesser of (A) or of (P)	Q	\$

2.6 Eligible Advance Based on Global AG Risk Solutions (GARS) Cost Production Insurance

GARS Contract No.	Policy Effective Date	Policy Expiry Date
Enter Value of GARS Insurance Contract		R
Maximum Eligible Advance Issued (lesser of A and R)		S

2.7 Maximum Eligible Advance – 2nd Installment

- ✓ Should the actual Seeded Acreage Report or the production the Agricultural Product(s) was not sufficient to justify the intended first installment Advance, the Administrator shall, where the overpayment shall be repaid in accordance with the terms of the Repayment Agreement.
- ✓ The second installment shall be equal to no more than the lesser of the Maximum Eligible Advance at the time of the first installment or the recalculated Maximum Eligible Advance (if applicable)

Enter Maximum Eligible Advance	\$
1 st Installment of Production Advance	- \$
Total of Advances issued by other Administrator(s) (if applicable)	- \$
2 nd Installment of Production Advance	= \$
Advance Requested by Producer	Advance Issued by Administrator
\$	\$

The legal description (section-township-range) of land you have seeded are:

Section 3

A. Other Advances

The outstanding balance for other Advances Issued to the Producer or applied for by the Producer under the APP:

- 2022 APP Advances payable to WeCAP (all categories) \$
- 2023 APP outstanding Advances owing to WeCAP (all categories) \$

ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION CONTINUED

- 2022 APP outstanding Advances owing to other Administrators (all categories) \$ _____
- 2023 APP Advances outstanding to Other Administrators and applied for (whether issued or not) to Other Administrators \$ _____
- Total: \$ _____

The following are the names of each of the Other Administrators and the Advances which are either outstanding or have been applied for from them:

B. Attached Documents

The following documents are attached and have been signed by an authorized signatory of the entity referred to therein. **[Check applicable.]**

- ☐ Priority Agreement for Agricultural Input Supplier(s)
- ☐ Agriculture Financial Services Corporation Assignment of Indemnity Form for Insurance
- ☐ Saskatchewan Crop Insurance Corporation Assignment of Indemnity
- ☐ Global Ag Risk Solutions Loss Payable Assignment form
- ☐ Business Risk Management Program Proceeds Assignment Agreement

C. Agreement and Declaration – 1st Installment

I understand and agree that this Worksheet will be part of my Advance Payments Program Application and Repayment Agreement for 2023/24 with the Administrator.

I hereby declare that the information provided above (excluding the omitted information in Section 2) is complete and correct and that I am not in Default the APP with the Administrator or any Other Administrators.

Signature of Producer	Name of Producer (Please print)	Date	APP ID#
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D. Agreement and Declaration – 2nd Installment

I understand and agree that this Worksheet will be part of my Advance Payments Program Application and Repayment Agreement for 2023/24 with the Administrator.

I hereby declare that the information provided above, including the information provided in Section 2 is complete and correct and that I am not in Default the APP with the Administrator or any Other Administrators.

Signature of Producer	Name of Producer (Please print)	Date	APP ID#
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ADVANCE WORKSHEET FOR AGRICULTURAL PRODUCT IN PRODUCTION CONTINUED**E. Affidavit (for actual Seeded Advance for Producers using AgriStability as Security)**

I hereby swear that the information set out above is complete and correct and that I have sworn it to be complete and correct before a Commissioner for Oaths at _____, in the Province of _____.

Signature of Producer	Name of Producer (Please print)	Date	APP ID#
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Signature of Commissioner for Oaths	Name of Commissioner for Oaths (Please print)	Expiry Date	Date
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WeCAP Use ONLY	Total Advance Approved by Administrator	\$	Acct. Rep.	Initial	Date
	Initial Advance 60% Intended Seeded	\$	GM	Initial	Date
	Remaining Installment (40% once Actual Seeded Report received or 100%)	\$			
	APP ID #				
	Administrator Signature				

STATEMENT OF INVENTORY

Basic Information

Producer Name (the Producer)

APP ID

Instructions

- ✓ Complete information with respect to all of the Producer's inventory.
- ✓ Add additional sheets if necessary.

FORAGE AND HAY

Number of Acres in Production _____

Description	Acres (Seeded or Harvested)	Quantity (on Hand)	Units (lbs., Bus, MT, other)	Price per Unit	Total Value (\$)

Legal land Locations

CROP INVENTORY (CEREALS, OILSEEDS, PLUSES OR GRASS)

Number of Acres in Production _____

Description	Acres (Seeded or Harvested)	Quantity (on Hand)	Units (lbs., Bus, MT, other)	Price per Unit	Total Value (\$)

Legal land Locations

BISON

Number of Cows to Calve this Year _____

Description	Quantity (on Hand)	Weight	Price per Unit (\$/lb, \$/Head, Other)	Total Value (\$)

Legal land Locations

STATEMENT OF INVENTORY – CONTINUED

CATTLE

Number of Cows to Calve this Year _____

Description	Quantity (on Hand)	Weight	Price per Unit (\$/lb, \$/Head, Other)	Total Value (\$)
Legal land Locations				

SHEEP

Number of Ewes to Lamb this Year _____

Description	Quantity (on Hand)	Weight	Price per Unit (\$/lb, \$/Head, Other)	Total Value (\$)
Legal land Locations				

GOATS

Number of Nannies to Kid this Year _____

Description	Quantity (on Hand)	Weight	Price per Unit (\$/lb, \$/Head, Other)	Total Value (\$)
Legal land Locations				

I/WE/THE PRODUCER hereby declare that the information provided above is complete and correct.

I/We certify that the information provided is true, and that the information is given for the purpose of assuring the administrator as to the ownership, condition, location, and value of the said goods and/or livestock for the purposes of obtaining an advance under the Advance Payment Program (APP) from Western Cash Advance Program Inc. (WeCAP).

I/We certify that I/We maintain multi-peril insurance coverage on our farming operation which includes the entire Eligible Agricultural Product for which all Advances are made under APP. This coverage must be enough to cover the full extent of the Advances until the Producer's liability is repaid with WeCAP and APP. If Eligible Agricultural Product is stored off-farm at a commercial facility, the Producer acknowledges that the commercial facility has such insurance.

I/We do certify that I am/we are the owner of the above-mentioned goods and/or livestock; that all of them are now in my/our possession. I/We certify that the goods and/or livestock dedicated to WeCAP and APP are free from any mortgage, lien or charge except any security held by your administrator and except as set out above, and that there are no judgments or executions against me/us except as set out hereunder:

All the said goods, livestock, or both, charged, mortgaged, assigned, or any and all, to WeCAP as security for advances made to me/us are now situated on or about the premises provided in this document.

Signature of Producer or Authorized Representative of the Producer		Date	
Printed Name	Title	Phone	Fax

Assignment of Indemnity Form for Insurance (Excluding Livestock Price Insurance – LPI)

Branch Office Use Only

Identification Number		Year
8 7 0		2023

Client Information

Business Name _____

Contact Person (Must be a Client, or Shareholder of the company) _____

Instructions for Completing Assignments of Indemnity

1. Ensure all information is recorded clearly and accurately. Accuracy in completing the assignment will ensure that it is registered to the correct business.
2. A \$45 nonrefundable registration fee for each assignment is required. Make cheques or drafts payable to Agriculture Financial Services Corporation.
Note: Due to previous collection agreements, grain companies will not be required to pay the administration fee.
3. Mail the completed form with payment to:
Agriculture Financial Services Corporation
Finance
5718 56 Avenue
Lacombe, Alberta T4L 1B1
4. When completed documents are received the assignment will be registered and acknowledgement sent to the insured and the assignee. The assignment is not valid unless accepted and acknowledged in writing by Agriculture Financial Services Corporation.
5. Assignments will expire on the date indicated.
6. Ensure that the Identification Number, Subscription Number(s) and Subscription Type field(s) have been completed.

This Assignment covers Insurance subscriptions for Annual and Perennial Programs administered by Agriculture Financial Services Corporation, excluding LPI.

For valuable consideration, the Insured hereby assigns to: Western Cash Advance Program Inc.
Name of Assignee

Of 100, 5908 50 Street Leduc, AB. Postal Code T9E 0R6
Complete Mailing Address including Postal Code

Assignee Contact Info: WeCAP Telephone 587-635-5669
Name

an undivided 100% of all monies up to an amount of \$ _____ which may be payable by AFSC as a result of a payable loss on Identification Number (870) recorded above, for the time period ending March 31, 2025.

Do Not Use
This Area

Date Stamp – primary

Date Stamp – secondary

Assignment of Indemnity Form for Insurance (Excluding Livestock Price Insurance – LPI)

Identification Number			Year
8 7 0 _____			2023

Freedom of Information and Protection of Privacy Act and Client Declaration

The information on this form, and any information you provide to us in the future related to this form, is collected under the authority of the *Agriculture Financial Services Act* (Alberta) and the *Freedom of Information and Protection of Privacy Act* (Alberta) (the "FOIP Act"). The collected information, whether personal information or business information, will be used: (i) to evaluate your eligibility for the program to which this form relates; (ii) for the administration of the program; and/ or (iii) for the administration of any other AFSC program or benefit in which you participate. Your personal information is subject to the provisions of the FOIP Act.

By submitting this form, you are providing your consent to AFSC disclosing and sharing the information contained on this form, whether personal information or business information, or any other information that will be provided in the future by you or your authorized representative, to the following third parties: B.C. Ministry of Agriculture, Alberta Ministry of Agriculture and Forestry, Saskatchewan Ministry of Agriculture, Saskatchewan Crop Insurance Corporation, Manitoba Ministry of Agriculture and Resource Development, Manitoba Agriculture Services Corporation, Agriculture and Agri-Food Canada, Canada Revenue Agency and Statistics Canada. You consent that such disclosed and shared personal information and business information may be used in the following ways: (i) for the administration of all current and future AFSC, federal and provincial programs related to agriculture, AFSC lending programs and AFSC insurance programs; (ii) for AFSC, federal and provincial policy and program development; (iii) for AFSC, federal and provincial policy and program evaluation; (iv) for AFSC, federal and provincial program compliance; (v) for research development; and (vi) for statistical purposes.

If you have any questions about this form and the collection and use of your information, please contact AFSC at 5718 - 56 Avenue, Lacombe AB T4L 1B1, 1.877.899.2372.

This assignment is subject to section 55.1 of the *Agriculture Financial Services Act* and section 95 of the *Financial Administration Act* (Alberta). Agriculture Financial Services Corporation is not bound by this assignment unless the assignment has been consented to by an acknowledgement in writing from Agriculture Financial Services Corporation. The Insured understands that indemnity cheques, up to the amount stated in this Assignment of Indemnity, will be made payable to the assignee and forwarded directly to the assignee. This assignment is subject to the deduction of any monies which may be owing to Agriculture Financial Services Corporation.

Dated at _____ in the Province of Alberta this _____ day _____ 20____
City or Town Date Month Year

Insured's Signature: _____ Witness Signature: _____

Insured's Printed Name: _____ Witness Printed Name: _____

Insured's Printed Address: _____

Central Office Use Only

Consent and Acknowledgement

Agriculture Financial Services Corporation consents to the above assignment, subject to the deduction of any monies which may be owing to Agriculture Financial Services Corporation.

Dated in Lacombe, Alberta this _____ day of _____ 20____.

Signed by: _____ for Agriculture Financial Services Corporation.

Administration fee received ☐ (\$45).

Third Party Representative Authorization

Identification Number		Year
8 7 0		2023

Client Information

Business Name _____

Part 1: Who is receiving authorization? (one per form)

Name of person or business Western Cash Advance Program Inc.

Address 100, 5908 50 Street Leduc, AB. T9E 0R6

Email wecap@feederassoc.com

Office Phone Number 587-635-5669

Cell NA

Fax 587-635-5672

Part 2: Select the AFSC product line(s) that you are authorizing the Third Party Representative to access.

☐ AgriInvest

☐ AgriStability

☐ Insurance

☐ Lending

☐ Livestock Price Insurance

Consent Statement and Client Declaration

I understand that:

- The Third Party Representative has authority to engage with AFSC on my behalf in the following ways: they can view, receive and submit all information for the selected product line(s), and complete transactions online.
- The Third Party Representative is not permitted to: cancel contracts, update my personal information or banking information.
- This authorization does not override the terms and conditions of the program or product the client has agreed to with AFSC.

It is my responsibility to contact AFSC and terminate this authorization if for any reason I no longer want the person/business named in Part 1 to access my information.

By signing this form, you authorize the Third Party Representative identified in Part 1 for the product line(s) selected in Part 2 to engage with AFSC on your behalf and AFSC to engage with the authorized Third Party Representative.

Print Name _____

Client Signature _____ Date _____

Do Not Use This Area	Date Stamp – primary	Date Stamp – secondary



ASSIGNMENT OF INDEMNITY

Contract Number:

Customer Name:

Address:

Town / City:

Province:

Postal Code:

For value received, I/We hereby transfer, assign and set over unto:

Assignee Name: **Western Cash Advance Program Inc. (WeCAP)**

Address: **100, 5908 50 Street**

Town / City: **Leduc**

Province: **Alberta**

Postal Code: **T9E 0R6**

Branch Phone Number: **587-635-5669**

Email Address:

All my right, title and interest to all benefits from any program administered by the Saskatchewan Crop Insurance Corporation, except establishment indemnities, applicable to the 2023 crop year as determined by the Saskatchewan Crop Insurance Corporation, up to the amount of \$ 9,999,999.99 (For total indemnity put \$9,999,999.99)

Customer Signature

Print Customer Name

Date

Co-Customer Signature

Print Co-Customer Name

Date

The Corporation hereby consents to the above assignment subject to all the provisions, terms, conditions and stipulations contained in:

A) The Contract of Insurance under which the indemnity arises.

B) The Saskatchewan Crop Insurance Act, the Agricultural Safety Net Act, and the regulations made thereunder as they may exist from time to time, and any other relevant provincial legislation.

It is the responsibility of the contract holder/assignor to inform the assignee of any changes in the status of the contract holder's crop insurance contract with the Corporation.

The consent of the Corporation is subject to the Corporation first recovering any monies owing by the customer to the Corporation whether before or after the date of the assignment from any indemnity that may become payable to the customer.

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 The Freedom of Information and Protection of Privacy 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 Archives and Public Records Management Act. For all privacy concerns, please contact SCIC's Privacy Manager by e-mail at securityofficer@scic.ca or call 306-728-7200.

Approval Date

For Saskatchewan Crop Insurance Corporation

Head Office Use Only

ASSIGNMENT PRIORITY

Please have the assignee forward the completed assignment form to Saskatchewan Crop Insurance Corporation by fax at (306) 728-7219 or mail to: Box 3000, Melville, SK, S0A 2P0.

Contract Number	Crop Year	Home RM	Ver	Page	Date	Form ID

Customer Name _____

THE UNDERSIGNED, (in addition to any rights, obligations, consents or authorizations contained within the statutory contract of crop insurance attached as Appendix "A: to The Crop Insurance Regulations as amended from time to time), by executing this Authorization hereby consents to and authorizes Saskatchewan Crop Insurance, its successors or assigns to:

- Obtain, gather, update and collate any information respecting the agricultural operations of the undersigned and
- Release or disclose any information within its possession, power or control pertaining to Crop Insurance contract number listed above including, but not limited to, any and all information Crop Insurance may have with respect to the agriculture operations of the undersigned listed below.

SECTION 1 - Personal Information

☐ This information is for my personal use and will remain in effect until expressly cancelled in writing by the undersigned. This information can be sent to the following fax number and email address:

Fax: _____ Email: _____

SECTION 2 - Third Party Information

☒ Name of individual, organization or institution to which information may be disclosed and a fax number or email address the undersigned wishes information to be sent to.

Name: Western Cash Advance Program Inc. (WeCAP) 100, 5908 50 Street Leduc, AB. T9E 0R6

Fax: 587-635-5672 Email: wecap@feederassoc.com

THE UNDERSIGNED expressly acknowledges and agrees that this authorization is:

<input type="checkbox"/> For crop year	_____
<input type="checkbox"/> Specific information	_____
<input type="checkbox"/> Continuous and will remain in effect until expressly cancelled in writing by the undersigned.	
<input type="checkbox"/> Expiry date of	_____ unless otherwise revoked by the undersigned.

Declaration:

By signing below, THE UNDERSIGNED understands that transmitting personal information via fax or email is not a secured method of transport. By completing, signing and sending the "Authorization for Release of Information" form back to Saskatchewan Crop Insurance Corporation, the undersigned will indemnify and hold harmless SCIC for any breaches that may result.

<input type="checkbox"/> Individual	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Partnership	<input type="checkbox"/> Ltd. Company	<input type="checkbox"/> Co-operative
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I am acting on behalf of the parties involved in the above listed contract.

By: _____
Participant of Contract (Print Name)

Signature Field

Date

Relationship

By: _____
Participant of Contract (Print Name)

Signature Field

Date

Relationship

By: _____
Participant of Contract (Print Name)

Signature Field

Date

Relationship

By: _____
Participant of Contract (Print Name)

Signature Field

Date

Relationship

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 & Security Manager by e-mail at securityofficer@scic.ca or phone 306-728-7200.



Loss Payable Assignment Form

Loss Payable Assignment Clause

Assignment of proceeds from Northbridge General Insurance Company

Policy Number:	Policy Expiry Date:
Customer Name:	
Address	
Town/City:	
Province:	Postal Code:

For value received, I/We hereby transfer, assign and set over all of my right to claims or payments from the above policy number through Northbridge General Insurance Company, up to the amount of \$_____ (leave blank for total assignment of policy proceeds) unto:

Assignee Name: Western Cash Advance Program Inc. (WeCAP)	
Address: 100, 5908 50 Street	Physical Address:
Town/City: Leduc	
Province: Alberta	Postal Code: T9E 0R6
By signing below, the undersigned hereby consents to disclosure by Global Ag Risk Solutions and/or Northridge General Insurance Company of any information relating to or received from the undersigned, including, without limitation, personal information that may be subject to federal or provincial privacy legislation.	

Customer Signature	Witness Signature	Date
<hr/>		
Printed Customer	Printed Witness	

For Office Use Only	<i>The insurer hereby approves the foregoing assignment.</i>	
	Dated this _____ day of _____, 20____.	
	GARS Finance Rep's Name (Print) _____	Signature _____
	GARS Finance Rep's Name (Print) _____	Signature _____

APPLICATION CHECK LIST

Please confirm that the following items have been completed or acquired to submit with your application.

- ✓ Completed main application for Sole Proprietor or Partnership/Corporation
- ✓ Valid Government Identification for all applicants
- ✓ A void cheque for direct deposit (optional - without this information, funds will be mailed)
- ✓ All signature boxes signed
- ✓ Priority Agreements from banks, financial institutions, lenders, and others to with a security interest in the commodity used for WeCAP
- ✓ Intended Seeding/Confirmation of Insurance and Coverage documents for First Installment
- ✓ Actual Seeded Acres Advance/Statement of Premiums and Coverage documents for Second Installment
- ✓ Saskatchewan residents signed Waiver of Exemption Protection

Additional Information Required for Corporations

- ✓ Personal/Corporate Guarantees (valid for 5 years from signing date and held on file for existing customers)
- ✓ Certificate of Incorporation and/or Certificate of Continuance (held on file for existing customers)
- ✓ The most recent Annual Corporate Return confirming all shareholder and director ownership percentage.

Required Signed Documents (Supplied in this application, choose the applicable document)

- ✓ AFSC Assignment of Indemnity
- ✓ SCIC Assignment of Indemnity
- ✓ Global AG Risk Solutions Loss Payable Assignment

Total Requested Advances (complete all applicable categories)

Advance Worksheet for Agricultural Product in Production: Spring Advance for Field Crops, Forage, Hay, Grass Seeds \$ _____

Advance Worksheet for Agricultural Product in Post-Production: Post Harvest/Fall Advance for Field Crops, Forage, Hay, Grass Seeds (Storable) \$ _____

Advance Worksheet for Livestock Advance: Livestock Price Insurance (LPI Option) OR Advance Worksheet for a Livestock Advance: LPI Renewal \$ _____

Advance Worksheet for Livestock Advance: AgriStability Option OR Advance Worksheet for Livestock Advance: AgriStability Option Renewal \$ _____

Total Advance Requested by the Producer \$ _____