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N.S. Reg. 89/99

Made: September 14, 1999

Filed: September 16, 1999

Designation of Raspberries as an Insurable Crop

Order in Council 1999-439 made September 14, 1999

Designation made by the Governor in Council

pursuant to clause 7(1)(a)

of the *Crop and Livestock Insurance Act*

The Governor in Council on the report and recommendation of the Minister of Agriculture and Marketing dated August 25, 1999, pursuant to clause 7(1)(a) of Chapter 113 of the Revised Statutes of Nova Scotia, 1989, the *Crop and Livestock Insurance Act*, is please to designate raspberries as an insurable crop.

N.S. Reg. 90/99

Made: September 14, 1999

Filed: September 16, 1999

Nova Scotia Crop and Livestock Insurance Plan for Raspberries and
Crop and Livestock Insurance Forms Regulations

Order in Council 1999-440 made September 14, 1999
Regulations made by the Governor in Council
pursuant to Section 6
of the *Crop and Livestock Insurance Act*

The Governor in Council on the report and recommendation of the Minister of Agriculture and Marketing dated August 25, 1999, pursuant to Section 6 of Chapter 113 of the Revised Statutes of Nova Scotia, 1989, the *Crop and Livestock Insurance Act*, is pleased to approve the making by the Nova Scotia Crop and Livestock Insurance Commission of

- (a) a crop insurance plan for raspberries in the form set forth in Schedule “A” attached to and forming part of the report and recommendation; and
- (b) regulations respecting crop and livestock insurance forms in the form set forth in Schedule “B” attached to and forming part of the report and recommendation.

Schedule “A”

Regulations respecting a crop and livestock insurance plan for raspberries made pursuant to Section 6 of Chapter 113 of the Revised Statutes of Nova Scotia, 1989, the *Crop and Livestock Insurance Act*

- 1 These regulations may be cited as the *Nova Scotia Crop and Livestock Insurance Plan for Raspberries*.
- 2 The purpose of this plan is to provide for insurance against a reduction in yield of raspberries resulting from one or more of the perils designated in Section 4.

Interpretation

- 3 (1) In this plan,
 - (a) “average insurable yield” means the potential production in pints per acre of raspberries as determined by the Commission from an insured person’s production records for the preceding 10 years, and where the required number of years’ production records are not available, the Commission shall index industry averages to the insured person’s existing records to determine values for the missing years using a method approved by the Commission;
 - (b) “contract of insurance” means a contract in Form 1 of the regulations respecting General (Field Crop) Insurance;

- (c) “eligible crop” means raspberry plantings that are at least 3 years of age;
 - (d) “raspberries” means all raspberry varieties produced in Nova Scotia that are recommended by the Department of Agriculture and Marketing;
 - (e) “total guaranteed production” means the guaranteed production as determined pursuant to Section 9.
- (2) For conversion purposes, 1 pint of raspberries weighs 0.3402 kg (0.75 lbs. or 12 oz.) and 1 kg equals 2.2046 lbs.

Designation of perils

4 The following are designated as perils:

- (a) winter injury;
- (b) frost;
- (c) hail;
- (d) disease;
- (e) drought;
- (f) excessive moisture;
- (g) unavoidable pollination failure;
- (h) off crop due to adverse weather;
- (i) wind;
- (j) insects;
- (k) wildlife.

Designation of crop year

5 The crop year is the period from November 1 in any year to October 31 in the following year.

Application

6 An application for a contract of insurance shall be

- (a) on a Contract of Insurance Application Form in Form A of the *Crop and Livestock Insurance Forms Regulations*;
- (b) accompanied by a premium deposit of at least \$50; and
- (c) filed with the Commission before the start of the first crop year to be insured.

Contract of insurance

7 For the purpose of this plan, the entire contract of insurance shall be comprised of

- (a) a contract of insurance;
- (b) a completed application filed pursuant to clause 6(a); and
- (c) a copy of this plan,

and if a document referred to in clause (a), (b) or (c) is subsequently amended while the contract of insurance is still in force, a copy of the amendment shall be delivered to the insured person.

Duration of contract

- 8** (1) A contract of insurance shall be in force for the crop year for which it is made and shall continue in force for each crop year after that until it is cancelled by an insured person or the Commission in the manner prescribed by subsections (2) and (3).
- (2) A contract of insurance may be cancelled by an insured person or the Commission by notice in writing to the other party by October 31 effective for the start of the next crop year.
- (3) A contract of insurance may be cancelled by the Commission by notice in writing to an insured person if the insured person is in arrears in the payment of the premium under the contract.

Coverage

- 9** (1) All acreage of raspberries owned or operated by an insured person and to be harvested shall be offered for insurance coverage.
- (2) Despite subsection (1), the Commission may insure all or part of the acreage offered for insurance coverage.
- (3) The total guaranteed production is the total number of pints equal to 70 percent of the average insurable yield for the total acreage that is insured by the Commission pursuant to subsection (2).

Established prices

- 10** (1) The Commission shall determine 3 price options for raspberries and shall announce these options to an insured person before the start of each crop year.
- (2) An insured person may select an established price per pint for the purpose of calculating premium and indemnity.

Maximum indemnity

- 11** The maximum indemnity for which the Commission is liable under a contract of insurance shall be the amount obtained by multiplying the total guaranteed production by the established price selected pursuant to subsection 10(2).

Premium

- 12** (1) The base premium rate shall be determined by a method approved by the Commission and shall be reviewed annually.
- (2) The base premium rate shall be adjusted by giving a discount when indemnity is less than total premiums paid or adding a surcharge when indemnity exceeds total premiums, and adjustments will be calculated using the following formula:

$$(LR-1) \times (n \div (20+n))$$

where “LR” equals total indemnity divided by total premiums and “n” equals the number of years insured in the plan.

- (3) Despite subsection (2) the maximum discount shall be 50% and the maximum surcharge shall be 100%.
 - (4) Despite subsections (1), (2) and (3), the minimum annual premium payable by an insured person in each crop year is \$50.
 - (5) The premium determined pursuant to subsections (1), (2), and (3) includes premium payments made by the Government of Canada under the *Farm Income Protection Act* (Canada) and the Province under the Act.
- 13 (1) An insured person shall pay the premium less any premium deposit to the Commission not later than July 1 for the current crop year.
- (2) Interest of 1.5% per month or a minimum of \$5 per month will be charged by the Commission on an overdue account.

Incorrect acreage

- 14 (1) Despite Section 9, when the actual measured acreage of raspberries in a crop year is less than the insured acreage, the total guaranteed production and the amount of insurance shall be reduced accordingly and no refund of premium shall be made.
- (2) When the actual acreage of raspberries in a crop year exceeds the insured acreage, the measured area yield will be pro-rated to the insured acres in calculating the indemnity payable.

Harvesting

- 15 All acreage of an insured crop shall be harvested unless the Commission gives consent pursuant to clause 19(b).

Notice of crop loss or damage

- 16 In accordance with the contract of insurance, an insured person must notify the Commission in writing within 5 days of any loss or damage to the insured crop.

Final harvest date

- 17 The final date for harvest shall be August 31, or any other date determined by the Commission.

Harvest yield report

- 18 An insured person shall file a harvest yield report within 15 days of the completion of harvest on a Harvest Yield Report Form in Form B of the *Crop and Livestock Insurance Forms Regulations*.

Evaluation of loss

19 The reduction in yield in a crop year and the indemnity payable shall be determined as follows:

- (a) when the actual production is less than the total guaranteed production, the adjustment of loss shall be calculated by subtracting the actual production from the total guaranteed production and multiplying the difference by the established price per pint.
- (b) when the loss or damage occurs before the completion of harvest, the Commission may consent in writing to a written request to abandon damaged acreage, and shall determine the number of damaged acres and any potential production.

Notice of claim

20 (1) Despite subsection 12(1) of the terms and conditions of the contract of insurance, which specifies a 60-day filing period, a claim for an indemnity payable due to a reduction of yield shall be made to the Commission within 15 days of the completion of harvest on a Proof of Loss Form in Form C of the *Crop and Livestock Insurance Forms Regulations*.

(2) Before a payment for an indemnity pursuant to subsection (1) is made, a signed Claim Release Form in Form D of the *Crop and Livestock Insurance Forms Regulations* must be received by the Commission.

Arbitration notification

21 Where the Commission and an insured person have failed to resolve any dispute arising out of the adjustment of loss under a contract of insurance, and the requirements in subsection 20(1) respecting the filing of a Proof of Loss Form in Form C of the *Crop and Livestock Insurance Forms Regulations* have been complied with, and either party wishes the dispute determined by arbitration, it shall be the responsibility of that party to notify the other party in writing within 90 days after the end of the crop year that the dispute be determined in accordance with the requirements of the *Arbitration Proceedings Regulations*.

Schedule "B"

**Regulations respecting crop and livestock insurance forms
made pursuant to Section 6 of Chapter 113 of the Revised Statutes of
Nova Scotia, 1989, the *Crop and Livestock Insurance Act***

1 These regulations may be cited as the *Crop and Livestock Insurance Forms Regulations*.

2 The forms for use in the administration of various crop and livestock insurance plans made pursuant to the Act are prescribed as follows:

- | | | |
|--------|---|--|
| Form A | - | Contract of Insurance Application Form |
| Form B | - | Harvest Yield Report Form |
| Form C | - | Proof of Loss Form |
| Form D | - | Claim Release Form |

- Form E - Tree Fruit Harvest Yield Report Form
- Form F - Tree Fruit Claim Release Form
- Form G - Seeding Report

Form A

NOVA SCOTIA CROP & LIVESTOCK INSURANCE COMMISSION
MacRae Library Building, NSAC, P.O. Box 1092 Truro NS B2N 5G9

APPLICATION FORM

CLIENT IDENTIFICATION

Name	Farm name
	Farm location
Address	Postal code
	☎ Home
Civic address	☎ Cellular
Type of operation	☐ Proprietorship ☐ Partnership
	☐ Corporation
	☎ Barn
SIN/tax ID#	☎ Fax
E-mail Address	
Contact Person	Telephone

INSURANCE PLANS

PLAN	COVERAGE LEVEL*	PRICE OPTION*
<input type="checkbox"/> Blueberry		
<input type="checkbox"/> Corn		
<input type="checkbox"/> Forage		
<input type="checkbox"/> Pea & Bean (processing)		
<input type="checkbox"/> Potato		
<input type="checkbox"/> Soybean		
<input type="checkbox"/> Spring Grain		
<input type="checkbox"/> Strawberry		
<input type="checkbox"/> Tree Fruit ☐ Apples ☐ Pears		
<input type="checkbox"/> Winter Grain		
<input type="checkbox"/> Other		

*Refer to Plan brochure for coverage levels and price options.

Do you currently hold a Crop Insurance Contract?
 Yes No

Have you ever held a Crop Insurance Contract?
 Yes No

Previous crop yield available?
 Yes No

PREMIUM DEPOSIT

Premium deposit of \$ _____ accompanies this application (refer to plan brochure for amount required).

DECLARATION AND SIGNATURE

I, the undersigned, certify that the information provided is accurate. I have read and agreed to the conditions outlined on the reverse of this application form.

Signature of applicant

Date

Commission representative

OFFICE USE

Effective date

Contract No

Telephone: Truro 1-902-893-6370

Kentville 1-902-679-6015

Toll Free 1-800-565-6371

Fax: 1-902-895-4622

E-mail: nsclie_info@nsac.ns.ca

INSURANCE PLANS

Plan	Final Date for Application	Final Date for Cancellation
Spring Grain	May 1	March 15
Corn	May 1	March 15
Potato	May 1	March 15
Pea & Bean (processing)	May 1	March 15
Soybean	May 1	March 15
Blueberry	November 15	October 31
Strawberry	November 15	September 15
Winter Grain	October 15	September 15
Tree Fruit	December 1	December 1

CONDITIONS

1. The land to be insured is land that I (we) own, lease or operate.
2. I shall offer for insurance, all of the area planted in each crop year to an insured crop(s) on the farm or farms owned or operated by me in Nova Scotia.
3. I am obligated to pay premium on the entire insured area, as calculated by the N.S. Crop & Livestock Insurance Commission using the premium rate schedule for the current year.
4. I must notify the N.S. Crop & Livestock Insurance Commission of any claims for loss as follows:
 - (a) Re-seeding - area must be inspected by a Commission Representative prior to being worked down and/or re-seeded.
 - (b) Pre-harvest Yield Loss Claims - area must be inspected by a Commission Representative before being pastured, cut for purposes other than threshing, worked down or otherwise destroyed. Should I do so, insurance will no longer apply on the portion of the crop destroyed and the premium shall be deemed earned.
 - (c) Post-harvest Yield Loss Claims - within 15 days of completion of harvesting of the insured crop
 - (d) Complete the Proof of Loss Report when filing for a claim.
5. I must file a Harvest Yield Report when harvesting is completed whether filing a claim or not.
6. If my application is accepted by the N.S. Crop & Livestock Insurance Commission, the Contract of Insurance shall be in effect from the date the Commission accepts the application, and from year to year thereafter unless terminated by either the Commission or myself, by giving the other party notice in writing of termination on or before the date specified in the regulations for each plan.

FORM B

**THE NOVA SCOTIA CROP AND LIVESTOCK INSURANCE
COMMISSION HARVEST YIELD REPORT FOR _____
(crop)**

Name: _____

Contract #: _____

Address: _____

Area insured: _____

Date harvesting completed : _____ Total area harvested: _____

Stored yield: _____

Yield sold: _____

Total yield: _____

Please indicate the units used for reporting this yield (eg. lbs., kgs, pints, quarts, etc):

Next year I plan to harvest _____ acres.

Please indicate desired price option for next year: _____

Please indicate desired coverage level option for next year (if available): _____

I certify that the above information is a correct statement of my yield and cropping plans and authorize the Nova Scotia Crop and Livestock Insurance Commission to verify this yield information with:

_____ (purchaser of the crop).

DATE: _____
(Day//Month//Year) INSURED PERSON, AGENT, ASSIGNEE

NOTE: A COMPLETED PROOF OF LOSS FORM MUST BE SUBMITTED IF YOU ARE MAKING A CLAIM

Nova Scotia Crop & Livestock Insurance Commission
 MacRae Library Building, NSAC Telephone: 893-6370
 P.O. Box 1092 Truro NS B2N 5G9 Facsimile: 895-4622

FORM C - PROOF OF LOSS FORM

Insured: _____ Contract No. _____

Insurance Plan: _____ Crop Year: _____

1. Date when notice of loss or damage was given
2. Date or period when loss or damage occurred
3. Specific location where loss or damage occurred

4. Indicate percentage of loss caused by each peril totalling 100%. NOTE: Some perils not applicable to all crops.		5. Briefly describe loss damage
%	excessive moisture	
%	drought	
%	snow	
%	spring frost	
%	fall frost	
%	flood	
%	excessive heat	
%	winter injury	
%	hail	
%	wind	
%	wildlife	
%	insects (specify)	
%	disease (specify)	
%	unavoidable pollination failure (pea/bean, blueberries, strawberries only)	
%	adverse weather (pea/bean, blueberries, strawberries only)	

6. Total actual production from this crop: _____
 (units: lbs., kg, cwt., bu.)

NOTE: PLEASE SUBMIT WEIGHT SLIPS.

7. I hereby warrant that:

- a) the statements made above are true to the best of my knowledge and belief, and I authorize the Commission to verify yield information as required; and
- b) the loss or damage to the crop for which this claim is made was not caused by negligence, misconduct or poor farming practices of the insured person, his agents or employees or, unless otherwise stated in paragraphs 4 or 5, by a peril not insured under this policy.

DATE: _____
(da/mo/yr)

INSURED PERSON, AGENT,
ASSIGNEE

The preparation and furnishing of this form or any other act of any agent or member of the N.S. Crop & Livestock Insurance Commission shall not be considered an admission of liability on the part of the Commission, or a waiver of any of its rights.

Agriculture and
Agri-Food Canada

Toll Free: 1-800-565-6371 (NS only) E-Mail: nslic@fox.nstn.ca

Nova Scotia

WHITE - COMMISSION YELLOW - CLIENT

FORM D

THE NOVA SCOTIA CROP AND LIVESTOCK INSURANCE COMMISSION CLAIM RELEASE FOR _____

(crop)

Claim Release #: _____

Name: _____

Contract #: _____

Address: _____

Crop year: _____

Date: _____

Date of loss: _____

Date of loss notice: _____

Date harvesting completed: _____

Cause of loss: _____

Is this an original inspection of crops insured for this crop year? _____

Date of preliminary inspection: _____

Date of pre-harvest inspection: _____

Any loss of yield from uninsured causes? _____

NOTE: If measured acreage exceeds insured acreage, the harvest yield will be pro-rated to the insured area. If measured acreage is less than insured acreage, the guaranteed production and the amount of insurance shall be reduced in the proportion that measured acreage bears to the declared acreage.

(a) Insured area:	
(b) Measured area:	
(c) Guaranteed production per unit area:	
(d) Total guaranteed production:	(c) multiplied by the lesser of (a) or (b).
(e) Total harvested yield:	
(f) Adjusted yield:	if (b) > (a), then [(e) / (b)] x (a), otherwise, (e)
(g) Deficit	(d) minus (f)
(h) Price:	
(i) Total claim amount:	(g) multiplied by (h)
(j) Less outstanding premium:	
(k) Net claim payable:	(i) minus (j)

**CLAIM RELEASE
(READ CAREFULLY)**

1. I hereby agree that the preparation and furnishing of this form by the adjuster, or any other act of the adjuster, agent or any member of the Nova Scotia Crop and Livestock Insurance Commission shall not be considered an admission of liability on the part of the Commission, or a waiver of any of its rights.
2. I hereby agree that payment of the amount claimed above to me or in accordance with any valid assignment filed with the Nova Scotia Crop and Livestock Insurance Commission shall constitute a full and complete satisfaction of my claim for indemnity.
3. I hereby warrant that
 - a) the yield declared as harvested represents the entire production of the insured acreage in the crop year;
 - b) the loss or damage to the crop for which claim is made was not caused by negligence, misconduct or poor farming practices of the insured person, his agents or employees or by an uninsured peril.

4. I understand that the amount stated herein is the sole consideration for this release and that the amount is accepted voluntarily as a full and final settlement of the claim for the crop loss specified above.

DATED AT _____ this _____ day of _____, _____ .
(place) (day) (month) (year)

 WITNESS

 INSURED PERSON, AGENT, OR
 ASSIGNEE

FORM E

**THE NOVA SCOTIA CROP AND LIVESTOCK
 INSURANCE COMMISSION
 TREE FRUIT HARVEST YIELD REPORT FOR _____
(year)**

Name: _____ Contract #: _____
 Address: _____ Area insured: _____
 Crop: _____ Total area harvested: _____

1. Date harvesting completed: _____
2. Production for the current year: _____
 - a) Fresh lbs: _____
 - b) Processing lbs: _____
 - c) Juice lbs: _____
 - d) Total lbs: _____
3. Total pounds produced from immature orchard: _____ lbs.
 (This is yield from trees aged 3 to 12 years and should be included in totals reported above.)
4. Income for the current year:
 - a) Processing income: _____
 - b) Juice income: _____
5. Income for last year:
 - a) Fresh income for last year: _____
 - b) Total income for last year: _____

To assist us in writing coverage for the next crop year, please complete any sections below that apply to your orchard.

6. If any trees have been removed since last year's harvest, please complete this section:
- a) Number of trees removed since last harvest: _____
 - b) Approximate age of these trees: _____
 - c) In what month were these trees removed: _____
 - d) Estimated average yield from these trees over the past 10 years: _____
 - e) Are any additional removals anticipated before the next harvest?
Yes ___ No ___
7. If any trees have been planted this year, please provide the following details:
- a) Total number of trees planted _____
 - b) Tree spacing _____
 - c) Rootstock(s) _____
 - d) Varieties _____
 - e) Location of block(s) or fillers _____
8. Do you expect any other change in production due to sale, lease or purchase of orchard? _____

I certify that the above information is a correct statement of yield and production changes and authorize the Nova Scotia Crop and Livestock Insurance Commission to verify this yield information with _____ (where the crop is stored).

Date (Year//Month//Day)

Insured Person, Agent, Assignee

NOTE: A COMPLETED PROOF OF LOSS FORM MUST BE SUBMITTED IF YOU ARE MAKING A CLAIM

FORM F

**THE NOVA SCOTIA CROP AND LIVESTOCK
INSURANCE COMMISSION
CLAIM RELEASE FOR TREE FRUIT**

Claim Release #: _____

Name: _____
Address: _____

Contract #: _____
Crop year: _____
Crop: _____
Date: _____

Date of loss: _____

Date of loss notice: _____

Date harvesting completed: _____

Cause of loss: _____

Is this an original inspection of crops insured for this crop year? _____

Date of preliminary inspection: _____

Date of pre-harvest inspection: _____

Any loss of yield from uninsured causes? _____

Grade	Pounds harvested	Established price	Est. price adjustment	Adjusted price	Yield value
Fresh					
Processing					
Juice					

- (a) Total yield value: _____
- (b) Insured price: _____
- (c) Pro-rated yield, (a) / (b): _____
- (d) Total guarantee production: _____
- (e) Yield deficit, (d) - (c): _____
- (f) Total claim amount, (b) x (e): _____

Less outstanding premium: _____

Net claim payable: _____

**CLAIM RELEASE
(READ CAREFULLY)**

1. I hereby agree that the preparation and furnishing of this form by the adjuster, or any other act of the adjuster, agent or any member of the Nova Scotia Crop and Livestock Insurance Commission shall not be considered an admission of liability on the part of the Commission, or a waiver of any of its rights.
2. I hereby agree that payment of the amount claimed above to me or in accordance with any valid assignment filed with the Nova Scotia Crop and Livestock Insurance Commission shall constitute a full and complete satisfaction of my claim for indemnity.
3. I hereby warrant that
 - a) the yield declared as harvested represents the entire production of the insured acreage in the crop year;
 - b) the loss or damage to the crop for which claim is made was not caused by negligence, misconduct or poor farming practices of the insured person, his agents or employees or by an uninsured peril.

4. I understand that the amount stated herein is the sole consideration for this release and that the amount is accepted voluntarily as a full and final settlement of the claim for the crop loss specified above.

DATED AT _____ this _____ day of _____, _____.
(place) (day) (month) (year)

 WITNESS

 INSURED PERSON, AGENT, OR ASSIGNEE

FORM G

NOVA SCOTIA CROP & LIVESTOCK INSURANCE COMMISSION
 MacRae Library Building, NSAC, P. O. Box 1092, Truro N S B2N 5G9
 Telephone: Truro 1-902-893-6370 Kentville 1-902-679-6015
 Toll Free: 1-800-565-6371 Fax: 1-902-895-4622
 E-mail: nsclie_info@nsac.ns.ca

SEEDING REPORT

Crop Name:
 Address:
 Contract number:
 Crop year:
 Coverage level:
 Premium discount:

Crop name	Average insurable yield	Insured price	*Premium rate(s)	Office use only

* Base rate adjusted for applicable discount/surcharge.

Field name or number	Crop	Variety	Ha <input type="checkbox"/>		Seeding		Fertilizer		Previous crop
			Ac <input type="checkbox"/>	Date	Rate	Grade	Rate		

<p>1. Is the area listed on this form the total area seeded to crops covered under this plan? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain: _____</p> <p>2. For grains, is any area listed on this form underseeded to another crop: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate the fields: _____</p> <p>3. (a) If corn, please indicate in the crop column: silage (S), grain (G) or HMEC (H) (b) If wheat, please indicate in the crop column: milling (MWH) or feed (FWH)</p> <p>4 (a) Was certified seed used? <input type="checkbox"/> Yes <input type="checkbox"/> No (b) Source of seed used _____</p>	
DATE:	SIGNATURE:

Please file this report 10 days after completion of seeding.

White-Commission Yellow-Agent Pink-Client

N.S. Reg. 91/99

Made: February 9, 1998

Filed: September 22, 1999

Nova Scotia Community Pastures Regulations

Order dated February 9, 1998
made under Section 178 of the
Agriculture and Marketing Act

CERTIFICATE OF APPROVAL
pursuant to subsection 3(2) of the Regulations Act

I hereby approve of an amendment made by the Nova Scotia Community Pasture Board to the regulations respecting the fee schedule for community pastures made by the Minister of Agriculture and Marketing on July 18, 1997, in the manner set forth in an Order of the Nova Scotia Community Pasture Board dated _____, 1999, a certified copy of which is attached.

Signed at _____, Nova Scotia
_____, 1999

Signed: *Ernest L. Fage*
Hon. Ernest Fage, Minister
Agriculture and Marketing

Order
made under Section 178 of the
Agriculture and Marketing Act

The Nova Scotia Community Pastures Board, acting under the authority of the *Agriculture and Marketing Act*, this 19th day of February, 1998, HEREBY ORDERS that the Nova Scotia Community Pastures Regulations be amended by striking out “40” and substituting “42” after the word “Cattle”.

I certify that the attached regulation as described herein is a true copy of the regulation as it was made.

Dated at Truro, Nova Scotia
August 30th, 1999

Signed: *R. M. Phillips*
Dr. Robin Phillips, Chair
Community Pastures Board