

Buy Local Partnership Program Application

Applications will be accepted between **April 1, 2022** and **September 30, 2022**

Section 1 - Eligibility Requirements Checklist:

1. Program Funding Registration Form
 - New client to programs since 2018 to complete form
 - Returning client to update form as necessary
2. Is a farm that is currently and properly registered in the correct income category under the *Farm Registration Act* or is an agri-business or agricultural industry organization/association
3. Generate an annual eligible gross income of **\$30,000 or more** (unless not-for-profit)
Proof of income (as defined in the Program Guidelines) is attached.
4. Is at least 19 years of age
5. Consultant quotes attached

NOTE: The above requirements must be met or the application will not be processed. Reference program guidelines for eligible projects, project timelines, claim dates, etc.

File Number	Date Received
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Section 2 - Applicant Information

Business/Farm Name	Applicant Name
Phone Number	Email Address

Select preferred method of correspondence: Email Canada Post

County of Project Location (select one)					
<input type="checkbox"/> Annapolis	<input type="checkbox"/> Antigonish	<input type="checkbox"/> Cape Breton	<input type="checkbox"/> Colchester	<input type="checkbox"/> Cumberland	<input type="checkbox"/> Digby
<input type="checkbox"/> Guysborough	<input type="checkbox"/> Halifax	<input type="checkbox"/> Hants	<input type="checkbox"/> Inverness	<input type="checkbox"/> Kings	<input type="checkbox"/> Lunenburg
<input type="checkbox"/> Pictou	<input type="checkbox"/> Queens	<input type="checkbox"/> Richmond	<input type="checkbox"/> Shelburne	<input type="checkbox"/> Victoria	<input type="checkbox"/> Yarmouth

Section 3 – Details about your Proposed Project(s)

1. Product marketing support to aid in new local market expansion/penetration:			
Projects	Consultant	Quote attached?	Total Project Cost
Marketing Strategy		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Specialized Product Testing		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Product Packaging Design		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Label Design		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Total			\$

2. Food Safety Plan:
<p>Refer to the Business Advisory Services Program for all projects under this section https://novascotia.ca/programs/business-advisory-services/</p>

Declaration, Authorization and Consent

By submitting this application form, I acknowledge and agree with the following:

- I have disclosed accurate, true and complete information to the program administration to date and I will continue to provide accurate, true and complete information which is not misleading;
- that I have read the Program Guidelines and, if the application is approved in whole or in part, I agree to abide by the terms and conditions as set out in the Program Guidelines;
- I consent to the audit and verification of the information at any time prior to project commencement, during work, or upon completion of the project. Such audit and verification may be performed by the Province of Nova Scotia, Government of Canada or other parties chosen by the Nova Scotia Department of Agriculture for audit and verification purposes;
- I consent to the use and disclosure of the information by officials of the Nova Scotia Department of Agriculture, officials of programs offered by the Government of Canada or Province of Nova Scotia, and cooperating funding partners, where the information is relevant for the purposes of audit, analysis, evaluation, program development and determining program funding;
- I agree to repay any amount determined through audit or inspection that is deemed to have been provided in excess of the program funding to which I am entitled;
- I consent to the release of my name and the amount of any funding received under the Program as public information, to be actively disseminated by the Province of Nova Scotia and Government of Canada;
- I acknowledge that any other information provided, unless disclosed in the manner and for the purposes to which I have consented above, will be subject to the provisions of the *Freedom of Information and Protection of Privacy Act (FOIPOP)*;
- I consent to representatives of the Nova Scotia Department of Agriculture contacting me to discuss the results of the Program;
- I consent to the Nova Scotia Department of Agriculture publishing the results of the Program with respect to the farm which may include my name, my farm location, the amount received and details about the projects associated with this Program; and
- I confirm that I have the authority to bind the applicant.

Applicant Name (print)

Applicant Signature

Date

Return completed form and documents above to:

Nova Scotia Department of Agriculture

Programs

74 Research Drive

Bible Hill, NS B6L 2R2

Questions? Call 902-893-6377 or 1-866-844-4276, Fax: (902) 893-7579

Email: prm@novascotia.ca Website: novascotia.ca/programs

Je préfère recevoir tous les formulaires en français.