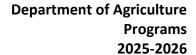


Reference No.:	Date Received

	tions will be accepted between Apr			
Step 1: Eligibility R	Requirements			
Returning applicants r ☐ A farm that is curre activities in Mi'kmaw o ☐ A farm that is certificertified organic.	Programs since 2023 must complete must update the form as needed. ntly registered under the <i>Farm Reg</i>	nistration Act, on	Mi'kmaq conducting farming	
	ments must be met, otherwise the a gible projects, project timelines, and nformation		not be processed. Reference	
Business/Farm Name				
Applicant Name				
CRA Business Number				
Phone Number				
Email				
Mailing Address				
City/Town		County	Postal Code	
		_		
Self Identification The following section is voluntary and does not affect program eligibility. If completed, Department of Agriculture will share the provided information, identified only by a business name (farm name) or HST/GST ID, with Agriculture and Agri-Food Canada. This information will be used to improve the program and address access barriers for underrepresented and marginalized groups.				
Select all that apply	☐ Youth (Individuals 40 years old		☐ African Nova Scotian	
	☐ Women	- ,	□ Not applicable	
	□ Mi'kmaq □ Métis □ Inuit		☐ Decline to identify	
	□ Other:		·	





Step 3: Details about your Business

County of Project Location (select one)							
☐ Annapolis☐ Guysborough☐ Pictou	☐ Antigonish☐ Halifax☐ Queens	□ Cape Breton□ Hants□ Richmond	□ Colchester□ Inverness□ Shelburne	□ Kin	mberland gs toria	□ Digby □ Luner □ Yarm	nburg
Is this your first year being certified organic (2025-2026)?						□ No	
If no, what year did you first become certified organic?							
If transitioning to certified organic, what year of transition are you currently in?					□ First	□ Second	☐ Third
Step 4: Attachments Required							

- ☐ Copy of current Organic Certificate.
- ☐ Copy of paid invoice for Organic Certification fees or Organic Certification transitioning fees.
- ☐ Proof of payment of invoice for Organic Certification or transitioning fees.
 - E-transfer confirmation, debit slips, cleared cheques, or credit card/bank statements. Invoices that are marked paid and signed by the supplier are not accepted.



Declaration, Authorization and Consent

• I confirm that I have the authority to bind the applicant.

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

Applicant Name (print)	Applicant Signature	Date	

Return completed application to: Nova Scotia Department of Agriculture Programs Office

74 Research Drive
Bible Hill, NS B6L 2R2
Phone 902-893-6377 or toll-free 1-866-844-4276
Email: prm@novascotia.ca
Website: novascotia.ca/programs/

Je préfère recevoir	tous les	formulaires	en français