



**Canada-Newfoundland and Labrador
Agricultural Policy Framework Agreement**

Soil, Air & Water Quality Conservation & Enhancement

**Funding Application
2008/2009**

All applications and supporting documentation, as well as the related applicant profile, must be submitted to:

**Agricultural Policy Framework Agreement
Attn: APF Program Manager
P.O. Box 2006
Corner Brook, NL
A2H 6J8**

Under the authority of the Agricultural Policy Framework Program, personal information is collected in order to assess applications submitted for funding. This information is kept confidential and handled as required by the *Access to Information and Protection of Privacy (ATIPP) Act*.

Any questions or comments can be directed to the APF Program Manager at (709) 637-2077.

SECTION 1 **ACTIVITY DETAILS**

1. Indicate the initiative(s) under which you are requesting financial assistance.

Soil, Air & Water Quality Conservation & Enhancement Program

- Nutrient Management Planning Initiative
- Integrated Pest Management Initiative
- Nuisance Management Initiative
- Soil Drainage & Water Resources Management Initiative

2. Indicate the APF objective(s) your project will meet.

Soil, Air & Water Quality Conservation & Enhancement Program Objectives

- Improve nutrient and pathogen management.
- Improve pest and pesticide management.
- Improve land and water management.
- Improve nuisance management.

How, specifically, will your project meet the indicated objectives? Please include a discussion of the commodity(s) to be involved, identify the target group, and the benefit of the project to the provincial industry.

7. Please detail how this project will benefit your operation and/or others in the agrifoods sector. Please quantify benefits where possible.

SECTION 2

FUNDING DETAILS

Project Expenses

Complete the following itemized budget request as it applies to your project.

Salary/Labour Expenses (including mandatory employer costs)

Total Expense

_____ \$ _____
(indicate type of position)

_____ \$ _____
(indicate type of position)

Travel

Ground Transportation \$ _____

Airfare \$ _____

Accommodations and Incidentals \$ _____

Capital Expenditures (itemized quotes/cost estimates must be attached)

_____ \$ _____
(type of building and dimensions)

_____ \$ _____
(type of equipment)

Other (please specify)

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

SECTION 2

FUNDING DETAILS ... CONT'D

Other (please specify) ... cont'd

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

Total Project Expenses

| |
|----|
| \$ |
|----|

Funding Sources

Identify all funding sources (cash and in-kind), the value of each and whether they have been officially approved:

| Source | Amount Approved | Yes | No |
|--------|-----------------|-----|----|
| | | | |
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| | | | |

TOTAL Funding Sources

| |
|----|
| \$ |
|----|

TOTAL APF Funding Requested

| |
|----|
| \$ |
|----|