

AgriStability and AgriInvest Programs Additional Information and Adjustment Request

If you farm in British Columbia, Saskatchewan, Manitoba, New Brunswick, Nova Scotia, Newfoundland and Labrador or the Yukon, use this form to request an adjustment or to submit additional information to the AgriStability and AgriInvest programs. Please see the "How to submit additional information for AgriStability and Agrilnvest" section of the 2010 Harmonized Guide for importantant information regarding Saskatchewan and British Columbia participants.

Do not use this form to request an adjustment to your income tax return.

- If this adjustment affects your net income, the Administration may require that the adjustment is first accepted by the Canada Revenue Agency (CRA). Requests for adjustments to your tax return should be sent separately to your CRA office.
- Once complete, fax or send the form and any attachments to the appropriate address listed below:

For the Federal Administration AgriStability and AgriInvest Administration P.O. Box 3200 Winnipeg, Manitoba R3C 5R7 Toll Free Fax: 1-877-949-4885

For the British Columbia Administration British Columbia Ministry of Agriculture and Lands Saskatchewan Crop Insurance Corporation **AgriStability Administration** 200-1500 Hardy Street Kelowna, BC V1Y 8H2 Toll Free Fax: 1-877-605-8467

For the Saskatchewan Administration P.O. Box 3000, 484 Prince William Drive Melville, SK S0A 2P0 Toll Free Fax: 1-888-728-0440

| Please identify the information you are sending in by checking the applicable box(es) below: | | | | | | | |
|--|---|--|--|--|---------------------|----------------|--------------|
| Additional information submitted at the same time as your programs forms | | | | | | | |
| An adjustment to information previously submitted on program forms | | | | | | | |
| A response to a request from the Administration | | | | | | | |
| Indicate which program year(s) you are requesting the adjustment to be made to: | | | | | | | |
| | | | | | | | |
| Attention: Number of pages/attachments including this page: | | | | | | | |
| 1 Identification | | | | | For office use only | | |
| Participant Identification Number (PIN) | | | | | Date Received | Date Processed | Employee ID |
| Name: | | | | | | | |
| Telephone (days): Facsimile Number: | | | | | | | |
| 2 | Adjustment details | | | | | | |
| Indicate the details of your requested adjustment below. Adjustments to information reported on your AgriStability and AgriInvest program forms must be made within the adjustment timeframe indicated on your original Calculation of Program Benefits (COB) or your AgriInvest Notice. Please ensure you indicate the year(s) you are adjusting. | | | | | | | |
| Section on the form | ection on the form Description of the item to be adjusted | | | | Previous Amount Rev | | vised Amount |
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| Other details or explanations (attach an extra sheet if required) | | | | | | | |
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Note: If you would prefer to show your adjustments using a page from the T1273 rather than filling in part 2 of this form, attach the page(s) from the T1273 to this form.



Agriculture and Agri-Food Canada (AAFC) and the Canada Revenue Agency (CRA) are committed to protecting the privacy of your information. The information on this form will be used exclusively for the purposes of administering your participation in the AgriStability and AgriInvest programs, determining your eligibility for benefits, verifying the information submitted, administering the premium adjustment linkage between production insurance and the AgriStability program, as well as for the purposes of administering benefits under other farm income and special assistance programs, and for purposes of audit, analysis, and evaluation of the AgriStability and AgriInvest and other farm income and special assistance programs.

By completing this form, you authorize the Minister of Agriculture and Agri-Food to share the information on the form and any additional information that you provide as your application is processed, with provincial ministers of agriculture and with the administrators of other federal/provincial farm programs.

In addition, by submitting this form for benefits under the AgriStability and AgriInvest programs, you:

- 1) certify that the information provided is complete and correct;
- 2) declare that the structure of this farming operation has not been altered or created for the purpose of manipulating program benefits or avoiding prescribed maximum limits on program payments;
- 3) understand and agree that any interim payment of AgriStability program funds will be deducted in the calculation of a final AgriStability Program payment;
- 4) agree that you will repay any amounts paid to you by the AgriStability and AgriInvest programs that are in excess of the amount calculated under the program rules and understand that any amount you owe to the Crown may be substracted from any payments to be sent to you by the Crown;
- 5) understand that interest will be charged on overpayments at the 90-day Federal Treasury Bill rate + 2% per annum;
- 6) understand and agree that the information you submit may be combined with the information of other participants for the purposes of determining AgriStability and AgriInvest benefits, and consent to the disclosure of information pertaining to you or your financial affairs to the other participants who are being combined with your information;
- 7) understand and certify that where you have provided information about other individuals or entities you have been authorized by those individuals or entities to provide that information;
- 8) understand and agree that where you have provided information about other individuals or entities, if they request to see the information you have submitted about them, the Administration will give them access to that information;
- 9) consent to third parties, CRA, and other government programs disclosing to the Administration, upon its request, any information pertaining to you or your financial affairs which the Administration considers necessary for the purpose of verifying the AgriStability and AgriInvest benefit or the information provided on this form;
- 10) understand that it is a criminal offense to make a false statement in application for program benefits and any declarations made are subject to audit.

The personal information collected on this form is protected under the *Privacy Act* and is stored in the personal information bank numbers AAFC PPU 183 and CRA PPU 005.