

Reference #	Date Received
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Polar Vortex Industry Recovery Program Application Phase 1

Application intake:

October 6, 2023 – November 30, 2023

Step 1: Eligibility Requirements

I confirm that:

- √ our farm produces crops in Nova Scotia that are eligible crops listed in the Polar Vortex Industry Recovery Program Guidelines or my crop is not listed but I was impacted and wish to be considered on a case-by-case basis.
- √ we generate an annual eligible gross commodity income of at least \$10,000. The eligible commodity income will be based on the Statement of Farming Activities (T2042, T1273 or Schedule 125 - Farm Revenue: detailing sales by commodity revenue code).
- √ we are currently and properly registered in the correct income category under the *Farm Registration Act*.
- √ our fields are located within the regions where recorded low temperatures were at or below the crops cold tolerance temperature as listed in the Polar Vortex Industry Recovery Program Guidelines.

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

Step 2: Applicant Information

Business / Farm Name				
Applicant Name				
Phone Number				
Email				
Mailing Address				
City / Town		County		Postal Code

Select preferred method of correspondence: **Email** **Canada Post**

NEW Self Identification

Note: this information is not part of determining program eligibility and is voluntary

A) Applicant Self Identification (Owner/Operator)

Select all that Apply

- | | |
|---|---|
| <input type="checkbox"/> Youth (Individuals 40 years old and younger) | <input type="checkbox"/> African Nova Scotian |
| <input type="checkbox"/> Women | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> First Nation <input type="checkbox"/> Métis <input type="checkbox"/> Inuit | <input type="checkbox"/> Decline to identify |
| <input type="checkbox"/> Other: _____ | |

Step 3:

Check the streams that apply and provide the requested information for each stream.

Stream 1: Virus Testing (grapes)

Number of acres needing to be replanted		Expected maximum number of samples to test	
Vinifera		Vinifera	
Hybrid		Hybrid	

Stream 2: Maintenance Recovery

Eligible Crops	Number of Acres you had June 1, 2023 (Complete for all that apply to your farm & please be specific; this will be verified)
Cane (Blackberries)	
Cane (Raspberries)	
Grapes Hybrid	
Grapes Vinifera	
Peaches	
Plums	
Sour Cherries	
Sweet Cherries	

My crop is not listed, I require a case-by-case basis review. (List crop name)	Number of Acres you had June 1, 2023
Crop 1:	
Crop 2:	
Crop 3:	
Crop 4:	

Affidavit

To the best of my ability, I _____ (your name) _____ attest to growing:

Cane (Blackberries)

Cane (Raspberries)

Grapes Hybrid

Grapes Vinifera

Peaches

Plums

Sweet Cherries

Sour Cherries

My crop is not listed. I require a case-by-case basis review.

and my crops were negatively and significantly (more than 30% loss) impacted by the Polar Vortex event in February 2023.

Signed:

Dated:

Witness:

PID's & Maps

List PID numbers of the fields where your impacted crops grow.

Attach maps of the areas where your crops were impacted. Please include for all crops. In cases where it is difficult to reach a field by following the map, please include driving instructions.

How many maps are you including?

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 Horticulture Nova Scotia for audit and verification purposes;
- I consent to the use and disclosure of the information by Horticulture Nova Scotia 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 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 Horticulture Nova Scotia contacting me to discuss the results of the Program;
- I consent to Horticulture Nova Scotia 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.

Signature:

Email:

Applicant Name (print)

Applicant Signature

Date

Return completed Application to:

Horticulture Nova Scotia

32 Main Street

Kentville, NS

B4N1J5

info@horticulturens.ca

P: 902-678-9335

Cel: 902-403-7218

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