

Reference #	Date Received
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Polar Vortex Industry Recovery Program Application Phase 2

Application intake:

March 15, 2024 – May 30, 2024

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
- √ we are currently and properly registered in the correct income category under the *Farm Registration Act*.

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

Step 3:

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

<input type="checkbox"/> Stream 1: Virus Testing (grapes)
Number of virus tests to be completed:
Cost:

<input type="checkbox"/> Stream 2: Maintenance Recovery	
Eligible Crops	Number of Acres that will require extraordinary pruning this winter season. (Do not include acres that you are leaving to be replanted.) (Complete for all that apply to your farm & please be specific; this will be verified)
Cane (Blackberries)	
Cane (Raspberries)	
Grapes - Vinifera	
Grapes - Hybrid	
High Bush Blueberries	
Peaches/Nectarines	
Plums	
Sour Cherries	
Sweet Cherries	



Stream 3: Replant Recovery Support

Crop	Number of trees/plants/vines that died from PV	Number of trees/plants/vines that were damaged from PV and will need to be replaced.	Number of trees/vines/plants you replanted in 2023 to recover from PV	Number of trees/vines/plants you plan to replant in 2024 to recover from PV	Number of trees/vines/plants you plan to replant in 2025 to recover from PV
Cane (Blackberries)					
Cane (Raspberries)					
Grapes - Vinifera					
Grapes - Hybrid					
High Bush Blueberries					
Peaches/Nectarines					
Plums					
Sour Cherries					
Sweet Cherries					

Affidavit

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

- Cane (Blackberries)
- Cane (Raspberries)
- Grapes Hybrid
- Grapes Vinifera
- High Bush Blueberries
- Peaches & Nectarines
- Plums
- Sweet Cherries
- Sour Cherries

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

I applied for Phase 1

If you did not apply for Phase 1, please list PID numbers of the fields where your impacted crops grow.

Submission Check list:

- Application form is complete
- Virus testing paid invoices attached
- Vine/Tree/Plant material invoice and proof of paid deposit.
- Affidavit is signed
- PID are listed for new applicants.

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.

Applicant Name (print)

Applicant Signature

Date

Return completed Application to:
Horticulture Nova Scotia
32 Main Street Kentville, NS B4N1J5
patricia@horticulturens.ca
P: 902-678-9335 F: 902-678-1280
Cel: 902-403-7218