

Applicant: _____ Client No: _____

Co-Applicant: _____ Client No: _____

Address: _____ Postal Code: _____

Residence (Home Quarter): _____ Phone No: _____

Cell No.: _____ Fax No.: _____ E-mail: _____

Married: _____ # Dependents: _____ Ages: _____

Date of Birth: _____ Age: _____ SIN: _____

Other Occupation(s): _____ Annual Salary (Net): _____

APPLICATION IS BEING MADE FOR THE FOLLOWING PURPOSES	TERM	AMOUNT
HOG ASSISTANCE LOAN PROGRAM	8 Years	\$ _____

APPLICATION DECLARATION

I declare that the statements and information in this application, including, but not limited to statement of assets and liabilities, net worth statement, projections and historic income comparison are true and complete and I acknowledge that MASC will rely on such statements in assessing this application.

I declare that MASC has not paid out a claim under any of its guarantee programs and/or written off any loans on my behalf.

I authorize MASC to obtain personal information relating to my income, paying habits and outstanding credit obligations (including current balances) from any other person or entity (including any creditor, credit agency, financial institution, producer marketing board or government body) that has such information and that MASC considers necessary to verify my financial status, determine my credit worthiness and to administer this loan. I specifically authorize and consent to the other person or entity disclosing the information requested by MASC and I understand that this authorization and consent continues for as long as any loan granted in connection with this application remains outstanding.

- I will be retaining _____, from _____ to act on my behalf respecting this loan.
- When loan security is solely personal property (livestock), MASC may prepare and register security. I understand that I will pay a fee to cover MASC's costs for searches and registrations. I further understand that MASC's preparation and registration of the security does not represent legal advice.

Client Name

Date

Client Name

Date

BEGINNING & PRO-FORMA NET WORTH

Name: _____

Date: _____

ASSETS

	Beginning	Pro Forma
<u>CURRENT</u>		
Cash		
Investments		
Accounts Receivable		
Market Livestock		
Grain/Hay Inventory		
Supplies		
Prepaid Expenses		
Growing Crops		
Other Current Assets:		

SUB-TOTAL _____

INTERMEDIATE

Breeding Livestock
 Machinery & Equipment
 other:

SUB-TOTAL _____

FIXED

Land & Buildings
 Land/Building Purchase
 other:

SUB-TOTAL _____

TOTAL ASSETS _____

LIABILITIES

	Beginning	Pro Forma
<u>CURRENT</u>		
Operating Loan		
Demand Notes		
Accounts Payable		
CWB Advance		
Canola Council Advance		
Intermediate Debt Pmt		
Long Term Debt Pmt		
Arrears		
Taxes Due		
Other Current Liabilities:		
Credit Cards		

SUB-TOTAL _____

INTERMEDIATE

LESS: principal due _____
 SUB-TOTAL _____

LONG-TERM DEBT

LESS: principal due _____
 SUB-TOTAL _____

TOTAL LIABILITIES _____

NET WORTH _____

% EQUITY _____

DEBT EQUITY RATIO _____

CURRENT RATIO _____

WORKING CAPITAL _____

DEBT/CROPPED ACRE _____

Hog Assistance Loan Program
Actual and Estimated Sales Quantities
(October 1, 2007 to March 31, 2008)
Weanlings and Slaughter Hogs (Numbers)

Weanlings

Time Period (Month / Year)	Actual Monthly # of Weanling Sold	Estimated Monthly # of Weanling to be Sold
October-07		
November-07		
December-07		
January-08		
February-08		
March-08		
April-08		
May-08		
Total		

Slaughter Hogs

Time Period (Month / Year)	Actual Monthly # of Slaughter Hog Sold	Estimated Monthly # of Slaughter Hog to be Sold
October-07		
November-07		
December-07		
January-08		
February-08		
March-08		
April-08		
May-08		
Total		

Please provide actual number of pig sold to the month prior to application.

Please provide estimated number of pigs to be sold for the month of application until May 31, 2008.

Sales receipts are not required to be submitted with the application.

We may ask at a later date if the application is selected for verification.

Monday, March 10, 2008

MASC ENVIRONMENTAL QUESTIONNAIRE

(To be completed by the Borrower and/or the Guarantor)

Name(s): _____ Address: _____ _____ _____	Legal Description(s): _____ _____ _____
(Complete all sections as directed.)	

FARM DECIPTION (Tick those that apply)	
Confinement Feeding Facilities or Feedlot (Hog or Cattle)	
Farrowing Facilities	
Dairy Facilities	
Poultry Facilities (Laying, Pullet, Broiler, Turkey & Others)	
Aquaculture Facilities (Ponds, Holding Tanks, etc.)	
Waste Holding or Treatment Facilities (Lagoons, Pits, Structure or Other)	
Crop Storage Facilities	
Crop Processing or Seed Treatment Facilities	
Commercial (Other than production agriculture) (Describe overleaf)	
Other	

USES OF ANY NON-PRODUCTIVE OR WASTE AREAS (Tick those that apply)	
Not Used	
Farm Dumpsite	
Commercial Landfill/Dumpsite	
Other	

IF ANSWERING YES TO ANY OF THE FOLLOWING QUESTIONS, PLEASE PROVIDE DETAILS ON PAGE 3	YES	NO
A. Are noxious weeds present? If yes, please specify the following information:		
Which parcel of land is infested?		
<input type="checkbox"/> How much land is infested?		
<input type="checkbox"/> Which type of weed is present?		
<input type="checkbox"/> How long has it been present?		
<input type="checkbox"/> What control measures have been used?		
B. Have any environmental assessments of the property been carried out in the last 5 years?		
C. Are there any conditional use and/or special compliance permits required?		
D. Has the property ever had a non-agricultural use?		
E. Are there any past, pending or threatened actions/investigations by any government environmental agency involving conditions on the farm?		
<input type="checkbox"/> Against you?		
<input type="checkbox"/> Involving conditions on adjacent properties?		
<input type="checkbox"/> Has the problem been satisfactorily corrected?		
F. Are there any cross property easements/entitlements, i.e. railway, pipeline, oil well, etc. are they in use at this time?		
G. Do your operations involve the generation, handling, disposal or other use of chemical hazardous materials other than agricultural chemicals?		
H. Do your operations involve storage of bulk quantities of agricultural chemicals such as pesticides and fertilizer other than for your own use?		
Have bulk quantities of same ever been stored on the farm in the past Other than for your own use?		
I. If your operations involve the use of irrigation, are additional substances applied other than water?		
J. Does the farm contain any of the following:		
(1) Above ground or underground storage tanks? If yes, please provide the following details:		
<input type="checkbox"/> Is there a program for the registration of such tanks and are your tanks registered?		
<input type="checkbox"/> The location of each tank.		
<input type="checkbox"/> Are the tanks in use?		
<input type="checkbox"/> The approximate age of the tanks.		
<input type="checkbox"/> Have the tanks been inspected or repaired?		
<input type="checkbox"/> Are any of these tanks known to leak?		

Continued	YES	NO
(2) An operating or inactive lagoon or manure pit or other surface impoundment? If yes, please provide the following details.		
<input type="checkbox"/> The location of manure storage sites.		
<input type="checkbox"/> How the manure is stored and the ultimate disposition of same.		
(3) An operating or former dump, landfill or other waste disposal area? If yes, please details.		
(4) Ground water wells?		
(a) If yes, specify uses:		
<input type="checkbox"/> Livestock		
<input type="checkbox"/> Human Consumption		
<input type="checkbox"/> Aquaculture		
(b) Have any wells been tested for the presence of hazardous materials? Please provide date and results of tests.		
(5) A septic system, drain field, dry well, oil separator, etc.?		
(6) Surface water (stream, river, wetlands, etc.)?		
(7) Irrigation dugouts or storage ponds?		
K. Has municipal or industrial sludge ever been used as fertilizer on the property?		
L. Are there gravel pits, manure pits, silage pits or other excavations on the property?		
M. Does your insurance cover environmental incidents? If yes, please indicate amount of insurance coverage.		
N. Describe how you dispose of pesticide/herbicide containers and waste oil. (If more space is expand on Page 3.)		

DECLARATION
I hereby declare that the information provided is a true and accurate statement concerning any potential environmental hazards connected with the property and the operations carried out hereon.
_____ (Borrower's Signature) _____ (Date)
_____ (Borrower's Signature) _____ (Date)

MASC INTERNAL USE ONLY		
Based on a visual inspection, please complete complete Sections A, B, and D and if necessary complete section C.	YES	NO
A. This Environmental Questionnaire reflects the conditions observed on the property.		
B. Adjacent Properties: Are there visible practices or activities which could affect the environmental assessment on the property offered as security?		
C. Limiting Conditions: _____ Snow Covered _____ Crop Covered _____ Building & yard site only _____ Other/Specify		
D. Risk Factor: _____ Negligible (No visible contamination) _____ Moderate (Minor visible contamination but no effect on property market) _____ Severe (Visible contamination with potential effect on property market)		
<i>(Please detail any observation on Page 3 as required.)</i>		
Date of Inspection: _____		
_____ (Lending Representative's Signature)	_____ (Date of Signature)	

MASC
Pre-Authorized Chequing & Direct Deposit Form

Primary Applicant:
Co-Applicant:
Address:

Client Number:
Field Office:
Regional Office:
Loan Number:

Fax/E-mail

Frequency:

MONTHLY

QUARTERLY

SEMI-ANNUAL

PREAUTHORIZED PAYMENTS

Subject to the general conditions outlined below, I/we hereby request and authorize the financial institution identified on the attached void cheque to debit my/our account, for the duration of my/our loan, for any scheduled payments payable to Manitoba Agricultural Services Corporation.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

Subject to the general conditions outlined below, I/we hereby request and authorize the Manitoba Agricultural Services Corporation to deposit, by Electronic Funds Transfer, directly to my/our account at my financial institution identified on the attached void cheque, any payment(s) payable to me/us, in such amounts as determined by, or agreed to, by the Manitoba Agricultural Services Corporation. This authorization is will remain in effect until the purpose for the deposit no longer exists or is revoked by me or by the Manitoba Agricultural Services Corporation, in writing, at least 14 days prior to the next scheduled payment.

GENERAL CONDITIONS

I/we agree that if any change is made to my/our account, I/we will inform the Manitoba Agricultural Services Corporation, in writing, at least 14 days prior to the next scheduled payment. In such case I/we agree to complete a new authorization form, accompanied by a new void cheque and forward same to the Manitoba Agricultural Services Corporation at least 14 days prior to the next scheduled payment. Any transaction rejected by my/our financial institution will be subject to a handling fee.

Primary Applicant's Signature: _____ **Date:** _____

Second Signature (if required): _____ **Date:** _____

You will be notified of the calculated amount and payment schedule prior to the first payment date.

ATTACH VOID CHEQUE HERE

For MASC Use: Date Entered: _____ By: _____

Manitoba Agriculture Food and Rural Initiatives (MAFRI)
Extension Services

MAFRI has staff available to meet with Manitoba hog producers to confidentially discuss their farm business and production situation.

MAFRI staff are ready to discuss with producers the following (please check client requests):

Farm Business Management

- Cost of Production Analysis
- Financial and Cashflow Management
- Credit
- Succession Planning
- Agri Stability and Agri Invest
- Environmental Sustainability
- Livestock Production

Client Name: _____

Town: _____

Telephone: _____

When MAFRI and MASC staff meet with applicants for the Manitoba Hog Assistance Loan, please complete the checklist before the client leaves the office.

Completed by: _____

Staff: Please forward completed form to Grant Palmer, BDS, MAFRI, Fax: 482:4383