

Macrorie Irrigation Development Application

Request for Technical Assistance

Client Information

Applicant's Name (Please Print): _____
(Hereinafter referred to as "The Client")

Business Name: _____

Address: _____ City/Town: _____

Province: _____ Postal Code: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____ Fax: _____

☐ New Irrigator ☐ Existing Irrigator

Project Information

Project Legal Land Description

Registered Land Owner(s) (as listed on ISC)

Proposed Acres

Current land use: Cultivated

Pasture

RM: _____

(If additional land locations are required, please fill out page two.)

District Use Only

District Water Source: _____

Turnout #: _____

I (We) authorize the Ministry of Agriculture to provide information in this application to Irrigation Saskatchewan for research, statistical purposes and irrigation project support, as well as receiving information on irrigation programming and services from Irrigation Saskatchewan.

I (We) hereby make application for services and assistance in accordance with the provisions of the current Irrigation Development Process, as shown on the Government of Saskatchewan's website saskatchewan.ca/agriculture and I (we) acknowledge it is my (our) responsibility to obtain and pay for any and all approvals, agreements, licences, permits or other authority required pursuant to relevant federal, provincial or municipal regulations or bylaws prior to commencing the development.

I (We) hereby authorize the Ministry of Agriculture, its employees and agents, to enter upon the lands identified in this application to conduct all necessary field inspections, tests and surveys, including the right to take such soil (and plant) samples as may be required to determine the feasibility of irrigating the lands listed in this application and for post construction monitoring.

Note: Before you enter information it is recommended this application be saved to your computer.

<i>Signature of Client</i>	<i>Day / Month / Year</i>
<i>Signature of Land Owner(s)</i> <i>(Signatures of all registered Land Owners required.)</i>	<i>Day / Month / Year</i>
<i>Signature of Irrigation District</i>	<i>Day / Month / Year</i>

Submit your completed application by:
Email: mid1@sasktel.net
Mail: Macrorie Irrigation District Box 553
 OUTLOOK SK S0L 2N0
 For Inquiries: **Phone:** 306-860-8777

<i>Legal Land Description</i>	<i>Registered Land Owner (as listed on ISC)</i>	<i>Proposed Acres</i>
<i>Current Land Use:</i> Cultivated Pasture RM:		
<i>Signature of Registered Land Owner(s)</i>	<i>Day / Month / Year</i>	

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<i>Current Land Use:</i> Cultivated Pasture RM:		
<i>Signature of Registered Land Owner(s)</i>	<i>Day / Month / Year</i>	

The option for additional land locations continues on following pages if required.

Additional Land Locations (Cont.):

<u>Legal Land Description</u>	<u>Registered Land Owner (as listed on ISC)</u>	<u>Proposed Acres</u>
Current Land Use: Cultivated Pasture RM: _____		
_____ Signature of Registered Land Owner(s)	_____ Day	_____ Month
	_____ Year	

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