# Application for Agricultural Lease and Grazing Allocation Auctions, Assignments, Grazing Associations and Renewals

### PART 1 – TYPE OF APPLICATION (check the appropriate box). **INDIVIDUAL** (lease will be issued in the name of a single applicant). First name \_\_\_\_\_ Middle name \_\_\_\_\_ Last name \_\_\_\_\_ Address \_\_\_\_\_\_ City or town \_\_\_\_\_ Province \_\_\_\_\_ Postal code\_\_\_\_\_ Phone No. \_\_\_\_\_ Cell No. \_\_\_\_ Email \_\_\_\_\_\_ OR **CO-LESSEE** (lease will be issued in the names of all applicants). Each co-lessee will have an equal and undivided interest to use and possession of all of the leased lands. Please indicate if the co-lessees are to be tenants in common or joint tenants. Tenants in common - if a tenant in common dies, the interest passes to the estate of the deceased - the estate holds an equal interest until the estate is settled. Joint tenants - if a joint tenant dies, his/her interest in the lease dies as well; the survivor continues to hold a full interest - joint tenants have the 'right of survivorship'. **Primary Contact:** First Name Middle name Last name Address \_\_\_\_\_ City or town \_\_\_\_\_ Province \_\_\_\_ Postal code \_\_\_\_ Phone No. \_\_\_\_\_Cell No. \_\_\_\_Email \_\_\_\_\_ **Co-lessee Contact:** Middle name Last name \_\_\_\_\_ First Name\_\_\_\_\_ Address \_\_\_\_\_City or town \_\_\_\_\_Province \_\_\_\_Postal code\_\_\_\_\_ Phone No. \_\_\_\_\_Cell No. \_\_\_\_Email \_\_\_\_ Does this Co-lessee require copies of all correspondence and invoices? Yes No **Co-lessee Contact:** First name \_\_\_\_\_\_Middle name \_\_\_\_\_\_Last name \_\_\_\_\_\_ Address \_\_\_\_\_\_Province \_\_\_\_Postal code \_\_\_\_\_ Phone No. Cell No. Email Email



Does this Co-lessee require copies of all correspondence and invoices?

Yes

No

Registered Name of Corpora	ation			
Address	City or town	Province _	Postal code	
Phone No.	Cell No	Email		
Shareholder Name	% of Shares Held	Address		Phone No.
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## **PART 5 - LIVESTOCK PREMISES IDENTIFICATION (PID) NUMBER for grazing and hay leases. (**For more information call the Agriculture Knowledge Centre at 1-866-457-2377.)

Saskatchewan Premises ID No.

#### PART 6 - PASTURE ASSOCIATION GRAZING ALLOCATION (includes grazing co-ops and pasture grazing associations).

- 1. Do you hold an active pasture association allocation? Yes No
- 2. If yes, which pasture association(s) is your allocation with?
- 3. If yes, what is your total livestock allocation per pasture association?

### PART 7 – ELIGIBILITY, CONFIRMATION, AUTHORIZATION AND SIGNATURE.

Applicants for agricultural lease or grazing allocation must:

- 1. Be at least 18 years of age;
- 2. Actively manage the leased lands for agricultural purposes;
- 3. Meet all requirements set out under The Saskatchewan Farm Security Act;
- 4. Have legal access to the leased land or written agreements for crossing any adjacent lands;
- 5. Have any existing accounts with the ministry in an acceptable status;
- 6. Complete the required application form and submit any supporting documentation that the ministry requests; and
- 7. In the case of a grazing or hay lease, have or will obtain a Saskatchewan Premises Identification Number.

This information is supplied for the purpose of obtaining an agricultural lease or grazing allocation. Information is to be current as of the date of application. Any lease or grazing allocation issued as a result of a false application will be subject to cancellation. By signing this application form I certify I meet the eligibility requirements above and the information provided to be true and I consent to:

1. Submit any supporting documentation that the Ministry requests; and

Visit saskatchewan.ca/crownlands for more information or to contact your local regional office.

2. The Ministry of Agriculture obtaining information from Saskatchewan Crop Insurance Corporation, Programs Branch and other lending institutions for the purpose of determining my/our credit worthiness and verifying the accuracy of any information contained in or provided with this application.

Applicant	Witness	Date
Applicant	Witness	Date
Applicant	Witness	Date

