

SCHEDULE D - 21
DECLARATION OF UNHARVESTED GRAIN
CROP YEAR _____

Name (s) : _____
Address: _____

<i>Production Insurance:</i> Contract/ Policy number: _____ Grower number: _____
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Details of Grain Not Harvested as of (date) _____

Crop	Insured Acres	Unharvested Acres	Swathed Acres	Unswathed Acres	Estimated Yield/Acre & Grade	
					Fall	Spring
Barley						
Canola						
Oats						
Peas						
Wheat						

Details of Land Not Harvested

Legal Description	Crop	Acres - Insured	Acres - not Insured

EXPLANATION:

1. The above information may be used to calculate an advance claim.
2. A final claim will be calculated after harvest is completed in the spring following the crop year listed above.
3. If harvest is not possible next spring you must notify us before putting the field to other use.
4. If your total production after spring harvest is greater than your insured guarantee any advance claims will have to be repaid.
5. In the case of interim claims, I certify that I will repay any amount determined to be an excess claim, by reason the final harvested yield to count exceeds the estimated yield used to calculate the interim claim.

DECLARATION:

- 1) I declare that the above is a true, accurate and complete record of all harvested production by the insured or which came into the insured's possession, whether produced from the insured farm or otherwise.
- 2) I authorize Production Insurance, Ministry of Agriculture and Lands to perform all audit procedures it deems necessary to prove this declaration and to appoint agents to perform those procedures.
- 3) **FORWARD THIS DECLARATION TO YOUR DISTRICT OFFICE UPON COMPLETING HARVEST.**

Policy Holder(s) Signature

Date