

BUFFALO LAKE METIS SETTLEMENT

AGRICULTURE ASSISTANCE

PROGRAM APPLICATION

Applicants of these programs **Must meet all criteria** set out in the Policy.

Name: _____ Date: _____

Address: _____ Phone: _____

Land Location: Section _____ TWP _____ Range _____ Meridian _____

Number of acres: _____

- Eligible applications may apply for ONLY ONE program.

- AMOUNT OF ASSISTANCE WILL BE DETERMINED BY THE AMOUNT OF ELIGIBLE APPLICANTS AND THE BUDGET.

- All applicants are responsible to monitor their grant. Should they exceed the amount allocated it is your responsibility to cover the additional cost.

Signature of Applicant: _____

OFFICE USE ONLY

APPLICATION APPROVED: YES _____ NO _____

COMMENTS: _____

Signature of Administrator: _____

Should any applicant to this program have breached any Agriculture Department Policies or owe any monies to the Buffalo Lake Metis Settlement for services rendered, they WILL NOT QUALIFY for this program.