

# Actual Seeded/Anticipated Honey Report

## Pre-Harvest Crops

Commodity	Crop Ins.	Ag Stab	Soil Type*	Have you completed seeding?	Number of Acres	Production Insurance Coverage Rate MT/acre or lb/acre	CCGA Advance Rate	\$ Amount
				<input type="checkbox"/> yes				
				<input type="checkbox"/> yes				
				<input type="checkbox"/> yes				
				<input type="checkbox"/> yes				
				<input type="checkbox"/> yes				
				<input type="checkbox"/> yes				
<b>Total of Pre-Harvest Crop Commodities</b>								

## Sweetener

Commodity	Quantity (lb)	CCGA Advance Rate	\$ Amount
Honey			

Total Value of Commodities

\*Soil types are different per production insurance agency.  
 AFSC/SCIC - stubble/summer fallow/irrigated  
 MASC - MB soil zone, alphanumeric (e.g. A01, B01, C01)  
 BCPI/GARS/AgriStability - not required

Indicate your intentions. Choose **ONE**.

- Issue maximum eligible funds
- Issue maximum eligible **interest-free** funds only
- Issue specific amount:
- Transfer only. **No additional funds will be issued.**

Based on information provided, the requested advance amount may change due to BRM eligible amounts, or correction of calculations.

**I acknowledge that the AMPA Regulations were amended on March 25, 2024, to increase the interest-free benefit for all 2024 advances from \$100,000 to \$250,000.**

**I have completed, signed and attached a new Priority Agreement for the additional advance amount indicated above.**

**I agree to comply with all of the terms and conditions included in the original Application form and Repayment Agreement and this amending agreement.**

**I acknowledge that this document is to be read together with, and forms part of, the Application and Repayment Agreement. All terms of the Application and Repayment Agreement and any subsequent amendments thereto, that have not been modified by this document remain in full force and effect.**

**Refer to updated section 8.0 Temporary Increase to Interest-Free Benefit in this Agreement or on the Application Forms page at ccga.ca.**

I declare that the above information is true and accurate at the time of completion and agree to repay the Administrator any difference where applicable.

Signature of Producer	Name of Producer (Please print)	Date	APP ID #

The Actual Seeded Advance or Anticipated Honey Advance and/or additional application will become a part of your 2024/25 Cash Advance Application using all rules and regulations set forth by the 2024/25 Terms & Conditions of this Application & Repayment Agreement. For existing 2024/25 advances, this form must be completed and returned to CCGA by July 31, 2024, otherwise the advance will be repayable immediately.