



# Sustainable Canadian Agricultural Partnership

Competitive. Innovative. Resilient.

## Gopher Control Program (GCP)

### Claim Form

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

#### DEADLINE: July 31, 2024

Stakeholders must submit claims to the RM or First Nation office prior to the above deadline.

RMs and First Nations submit by the above deadline by email to Annette Ellert, Agriculture Program Administrator at

[aellert@sarm.ca](mailto:aellert@sarm.ca)

#### PART 1 - APPLICANT INFORMATION

RM/First Nation: \_\_\_\_\_ No.: \_\_\_\_\_

Stakeholder Name: \_\_\_\_\_

#### PART 2 – FINANCIAL VERIFICATION – ATTACH VALID INVOICES FOR REGISTERED GOPHER CONTROL PRODUCTS

(From January 1, 2024 to July 31, 2024)

Name of registered gopher control product: \_\_\_\_\_

Cost of registered gopher control product used by July 31, 2024 ( do not include GST & PST) \$ \_\_\_\_\_

#### PART 3 – RAPTOR PLATFORMS AND NEST BOXES INCLUDE INVOICES FOR MATERIALS (From January 1, 2024 to July 31, 2024)

Item Description	QTY	Paid per Unit	TOTAL PAID (no GST & PST)
_____	_____ X	\$ _____	\$ _____

LLD or GPS location(s) of installation: \_\_\_\_\_

#### PART 4 – CERTIFICATION

Stakeholder Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

DATE: \_\_\_\_\_ SIGNATURE\*: \_\_\_\_\_

*\* I/We confirm, as the stakeholder named above, I/we have adhered to The Pest Control Products Act and the program guidelines for the Gopher Control Program. I/We understand any personal information in this claim is collected under the authority of and is protected by and subject to the provisions of The Freedom of Information and Protection of Privacy Act (FOIP Act) and the federal Privacy Act. The ministry may share this information with Agriculture and Agri-Food Canada and other third parties for the administration of the Sustainable CAP programming, for policy and program development and evaluation and for research and statistical purposes.*

#### RM or First Nation Certification:

RM or First Nation: \_\_\_\_\_

Email: \_\_\_\_\_

DATE: \_\_\_\_\_ SIGNATURE\*\*: \_\_\_\_\_

(Administrator or Land Manager Signature)

*\*\* I/We confirm that, on behalf of the RM or First Nation named below, I/we have adhered to The Pest Control Products Act and the program guidelines for the Gopher Control Program. I/We understand any personal information in this claim is collected under the authority of and is protected by and subject to the provisions of The Freedom of Information and Protection of Privacy Act (FOIP Act) and the federal Privacy Act. The ministry may share this information with Agriculture and Agri-Food Canada and other third parties for the administration of the Sustainable CAP programming, for policy and program development and evaluation and for research and statistical purposes.*

#### FOR SARM USE ONLY

REBATE PAID \_\_\_\_\_ DATE: \_\_\_\_\_ AUTHORIZED BY SARM: \_\_\_\_\_

