

NOVA SCOTIA CROP AND LIVESTOCK INSURANCE COMMISSION

MacRae Library Bldg., P.O. Box 1092 Truro NS B2N 5G9

Truro: 893-6370 Kentville: 1-902-679-6015/6028 Toll Free: 1-800-565-6371 Fax: 1-902-895-4622 E-mail: nsclic@gov.ns.ca

Canada/NS Wildlife Compensation Program Application Form

Part A - Applicant

Name		
Address	Postal Code	☐ Home
Civic Address		☐ Cellular
SIN/Tax ID#		☐ Fax
E-mail Address		
Farm Registration Number		
Contact Person (if different)	Telephone	

Part B: Claim for Compensation

Damage Caused by: _____
Damage Caused to (commodity): _____ Date Damage Noted: _____
Location of Loss (if different than Part A) _____
Briefly describe the loss _____ _____
Estimated Value of Loss: _____

Do you currently have crop insurance? Yes No If yes, indicate contract no.? _____
Do you currently have dairy insurance? Yes No

Declaration and Signature

I certify that the information entered on this form is correct and hereby authorize the Nova Scotia Crop and Livestock Insurance Commission or it's agents to inspect the damage and verify this information as required.	
Signature of Claimant	Date (dd/mm/yyyy)

Aussie disponible en francais.

