



Application Form

PEI AgriWatershed Partnership Beneficial Management Practices Support Program

Personal information is collected for the express purpose of determining eligibility for program assistance under the PEI AgriWatershed Partnership BMP Support Program. This form will also act as consent to a preliminary property review with the understanding that any data assembled will be used solely for determining eligibility for AWP-BMP program assistance.

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------|
| Full Name (including middle initial) | | |
| Organization/Business/Farm Name/Watershed Group (if applicable) | | |
| Mailing Address (including civic number): | | |
| Village/Town/City | Province | Postal Code |
| Telephone Number | E-mail Address | Property ID # |
| <i>If applicant is property owner/farmer:</i> Have you been in contact with your local watershed organization regarding this application? | Y: <input type="checkbox"/> N: <input type="checkbox"/> | Name of contact: |
| | | Email or phone # |
| <i>If applicant is watershed organization:</i> Have you been in contact with the property owner/farmer regarding this application? | Y: <input type="checkbox"/> N: <input type="checkbox"/> | Signature of property owner/farmer: |
| | | Name Date: |
| | | Email or phone # |
| <i>Applicants signature:</i> _____ Name Date | | |
| Note: If neither applicant is the property owner, please have property owner sign here: _____ Name Date | | |

Forward applications by **MAIL: AWP-BMP Support Program** **EMAIL: info@PEIAWP.com** **FAX: (902) 961-7298**
 PO BOX 701 **PHONE: (902) 394-7933**
 Souris, PE, C0A 2B0

The PEI AgriWatershed Partnership is supported through funding from the Province of Prince Edward Island