



**Best Management Practices  
Support Program Project**

Personal information is collected for the express purpose of determining eligibility for PEI AWP BMP Support program assistance and will be shared with the Canadian Revenue Agency regarding the taxable benefit, and the PEI Watershed Alliance specifically for the management of claims, audits, and evaluation of this project. As per the initial funding agreement, recipients consent to the release of their name and the general nature of the project by the PEI AgriWatershed Partnership.

Full Name (including middle name)		
Organization/Business/Farm Name (if applicable)		
Make Payment to:	<input type="checkbox"/> Applicant's Name	<input type="checkbox"/> Business Name
Mailing Address (including civic number)		
Village/Town/City	Province PE	Postal Code
Telephone Number	E-mail Address	

**Please list each expenditure and attach invoices and proof of payment**

Item Description (outlet work)	Name of Supplier	Amounts (less GST)

For additional space please use Page 2	<b>Total Expenditures:</b>	<b>\$</b>
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<p><b>Applicants Certificate:</b></p> <p>I certify that the above noted amounts, supported by the attached documents, are for the work performed or material purchased in accordance with the terms and conditions of the Project Agreement.</p> <p>_____ Signature</p> <p>_____ Date</p>	<p><b>PEI Agri-Watershed Partnership Official:</b></p> <p>I have reviewed the expenditures of this claim and have verified with officials of the PEI Department of Agriculture &amp; Land, that they are in accordance with the terms and conditions laid out in the Project Agreement.</p> <p>_____ Signature</p> <p>_____ Date</p>
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<b>Dollars approved for this claim: \$:</b>
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<b>Authorization:</b>	<b>Date:</b>
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**Best Management Practices  
Demonstration Project**

**Additional Claim Items: Please list each expenditure (Attach invoices and proof of payment).**

Item Description (fieldwork)	Item Description (outlet work)	Name of Supplier	Amounts (less GST)
<b>Total Expenditures</b>		<b>\$</b>	

**Forward Claim with supporting documentation to:**

**AWP-BMP Support Program**  
PO BOX 701 Souris  
PE, COA 2B0  
Questions? Call (902) 394-7933