

**Application for Alberta Milk's  
2012 New Entrant Assistance Program**

Name of Applicant (as it will appear on the Alberta Milk Licence)

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Given Name(s) (if above is a business or corporate name)

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Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Contact Phone Number(s) \_\_\_\_\_

E-mail Address(es) \_\_\_\_\_

Fax Number(s) \_\_\_\_\_

## Application for Alberta Milk's 2012 New Entrant Assistance Program

Please confirm that you have met the minimum criteria by initialing the appropriate boxes:

	Yes	No
All of the applicants are Canadian citizens or landed immigrants?	<input type="checkbox"/>	<input type="checkbox"/>
All of the applicants are permanent residents of Alberta and have filed at least one Alberta tax return?	<input type="checkbox"/>	<input type="checkbox"/>
All of the applicants are at least 18 years of age?	<input type="checkbox"/>	<input type="checkbox"/>
All of the applicants are not and have never been licensed dairy farmers or owned a dairy farm?	<input type="checkbox"/>	<input type="checkbox"/>
Have you included a detailed description of the facility you plan to use?	<input type="checkbox"/>	<input type="checkbox"/>
Have you included a 2-year financial business plan?	<input type="checkbox"/>	<input type="checkbox"/>
Have you included a 10-year implementation plan to outline your longer-term goals?	<input type="checkbox"/>	<input type="checkbox"/>
Have you included a letter from your lender indicating their satisfaction with the business plan and their willingness to finance this operation?	<input type="checkbox"/>	<input type="checkbox"/>

**Declaration:**

The undersigned certify the information herein contained is complete, true and correct in all respects.

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_