

SASKATCHEWAN MILK MARKETING BOARD

444 McLeod Street, Regina, SK S4N 4Y1

Telephone: (306) 949-6999 Fax: (306) 949-2605

APPLICATION FORM FOR PRIVATE QUOTA TRANSFER OR SALE

SELLER

Seller Name: _____ Producer I.D. # _____

The Seller hereby makes application to the Saskatchewan Milk Marketing Board (“**SaskMilk**”) to transfer or sell to the Buyer (*Buyer Name:* _____ *Buyer Producer I.D. #* _____) listed below:

_____ kilograms of quota **OR**
_____ kilograms of quota to an immediate family member ► State Relationship: _____

Requested Effective Date of transfer/sale: _____

Email: _____ Fax: _____ Phone: _____

Address: _____ City: _____ Prov: _____

Barn Land Location: _____ Postal Code: _____

Solicitor’s Name: _____

Solicitor’s Email: _____ Solicitor’s Phone: _____

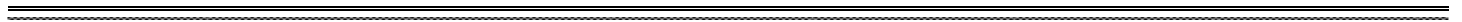
By signing the below, the Seller:

- 1) Certifies that each statement made by the Seller in this application is true and complete.
- 2) Certifies that the Seller is, and will continue to be after the completion of the transactions set forth in this Application, in compliance with *The Milk Marketing Plan Regulations* and all of SaskMilk’s published policies and orders.
- 3) Undertakes to notify SaskMilk if the Seller does not comply with *The Milk Marketing Plan Regulations* or any of SaskMilk’s published policies or orders at any time.
- 4) Acknowledges that private transfers of quota are administered in accordance with *The Milk Marketing Plan Regulations* and SaskMilk’s published policies and orders, including (but not limited to) the requirement that 15% of all transfers must be made through the Quota Exchange (except for transfers within immediate family or for a complete dairy unit).

Signature of Seller or Authorized Officer of Seller

Witness Signature

Print name of witness:



BUYER

Buyer Name: _____ Producer I.D. # _____

The Buyer hereby makes application to the Saskatchewan Milk Marketing Board (“**SaskMilk**”) to transfer or purchase from (*Seller Name* _____ *Seller Producer I.D. #* _____):

_____ kilograms of quota **OR**
_____ kilograms of quota from an immediate family member ► State Relationship: _____

Requested Effective Date of transfer/purchase: _____

Email: _____ Fax: _____ Phone: _____

Address: _____ City: _____ Prov: _____

Barn Land Location: _____ Postal Code: _____

Solicitor’s Name: _____

Solicitor’s Email: _____ Solicitor’s Phone: _____

By signing the below, the Buyer:

- 1) Undertakes to complete the Quota Limit Disclosure Form.
- 2) Certifies that each statement made by the Buyer in this application and the Quota Limit Disclosure Form is true.
- 3) Certifies that the Buyer is, and will continue to be after the completion of the transactions set forth in this Application, in compliance with *The Milk Marketing Plan Regulations* and all of SaskMilk’s published policies and orders.
- 4) Undertakes to notify SaskMilk if any of the information disclosed in the Quota Limit Disclosure Form changes.
- 5) Undertakes to notify SaskMilk if the Buyer does not comply with *The Milk Marketing Plan Regulations* or any of SaskMilk’s published policies or orders at any time.
- 6) Acknowledges that private transfers of quota are administered in accordance with *The Milk Marketing Plan Regulations* and SaskMilk’s published policies and orders, including (but not limited to) the requirement that 15% of all transfers must be made through the Quota Exchange (except for transfers within immediate family or for a complete dairy unit).

Signature of Buyer or Authorized Officer of Buyer

Witness Signature
Print name of witness:

DEADLINE

Applications for transfer of quota should be submitted as early as possible, and in no event later than midnight of the 6th of the month prior to the month in which the transfer is intended to become effective. The Saskatchewan Milk Marketing Board is required to undertake appropriate due diligence for every quota transfer in Saskatchewan and makes no guarantees that it will have sufficient time to complete such due diligence even if the Application is received by the 6th of the month prior to the month in which the transfer is intended to become effective. Buyers and Sellers should not assume that applications will be processed within such period.

Approved by: _____

Effective Date: _____