

# 1.1 ALTERNATIVE LAND USE SERVICES (ALUS) PROGRAM



**Sustainable Canadian  
Agricultural Partnership**

Competitive. Innovative. Resilient.

Date Received (Office Use Only):
Project/Client # (Office Use Only):

## Step 1 – Application Requirements Checklist

- Complete and Sign Application Form – General
- Complete the Appendix A: *ALUS New Feature Enrollment (Step 5.1)*
- Existing ALUS participants: Complete the *ALUS Feature Renewal Appendix (Step 5.2)*
- Submit your completed application package (**Application Form – General and Appendices**) to [ALUS@gov.pe.ca](mailto:ALUS@gov.pe.ca) (See **Step 12** for more information)

## Step 2 – Applicant Contact Information

<b>Applicant Name (Business Name or Individual Name (including middle name))</b>			
<b>Contact Name</b>			
<b>Secondary Contact</b>			
<b>Email</b>			
<b>Phone Number</b>		<b>Alt. Phone Number</b>	
<b>Mailing Address</b>			
<b>City/Town/Village</b>			
<b>Province</b>		<b>Postal Code</b>	

## Step 3 – Type of Business or Organization (Choose one and complete the required Social Insurance, Business, or Registration Number)

<b>Individual Proprietorship</b> Social Insurance Number:	
<b>Incorporated Company</b> Revenue Canada Business Number:	
<b>Partnership</b> Revenue Canada Business Number:	
<b>Registered Charitable Organization / Not-for-Profit</b> Registration Number:	

**Step 4 – Partnerships** (If you indicated “Partnerships” as your type of business in Step 3, please list the partner name(s) and their ownership per cent in the table below).

Name all partners (for partnerships)	Per cent of ownership
<b>Total (must total 100%)</b>	

## Step 5 – Project Details

### 5.1 New ALUS Participants

- Please complete Appendix A: *ALUS New Feature Enrollment* (pg. 6) to enroll properties in the ALUS program. Indicate whether properties are leased or owned.

### 5.2 Existing ALUS Participants

- Please complete the *ALUS Feature Renewal Appendix* (specific to you and sent to you by mail) to re-enroll existing ALUS features. For each feature, indicate whether you want to re-enroll it in ALUS, and whether you'd like to enhance the feature to manage for greater biodiversity or have trees and shrubs planted.
- Please complete the *ALUS New Feature Enrollment Appendix* to enroll new properties in the ALUS program, and/or to add new ALUS features to properties already enrolled in the program.

## Step 6 – Additional Sources of Project Funding

Have you, or will you, secure any other Provincial and/or Federal Government Funding for this project?

Yes                       No

If yes, please provide detailed information as indicated below

Source	Dollar Amount

## Step 7 – Recipient Type (Applicant chooses one of the following options)

- |  |   |
|--|---|
| <input type="checkbox"/> Agricultural Landowner      | <input type="checkbox"/> Primary Producer   |
| <input type="checkbox"/> Processor                   | <input type="checkbox"/> Industry Organizations   |
| <input type="checkbox"/> Research Body (Institution) | <input type="checkbox"/> Provincial/Territorial/Municipal Government  |
| <input type="checkbox"/> Retailer/Wholesaler         | <input type="checkbox"/> Indigenous (First Nations, Inuit, Métis) Group<br>(government, community, and/or including Tribal Councils, associations, organizations) |
| <input type="checkbox"/> Student                     |   |

## Step 8 – Type of Industry

(I.e. Dairy, potato, beef, hog, grains and oilseeds).

## Step 9 – Declaration and Consent to Personal Information

By submitting this form for project funding, I/We:

- understand that personal information on this form is collected under Section 31c of the *Freedom of Information and Protection of Privacy Act* R.S.P.E.I. 1988 c. F-15.01 as it relates directly to and is necessary for the Sustainable Canadian Agricultural Partnership program being delivered as part of the Canada-Prince Edward Island Sustainable Canadian Agricultural Partnership Framework and Bilateral Agreement. It will be used for determining eligibility for program assistance and will be shared with the Canada Revenue Agency regarding the taxable benefit and Agriculture and Agri-Food Canada, regarding program management, claims, audits, and evaluation of this program;
- agree that information provided for purposes of the Sustainable Canadian Agricultural Partnership may be shared with the Canada Revenue Agency as it pertains to any potential taxable benefits, as well as with Agriculture and Agri-Food Canada or its agent regarding claims, audits and evaluations as it relates directly to and is necessary for this contract being delivered as part of the Canada-Prince Edward Island Sustainable Canadian Agricultural Partnership Framework and Bilateral Agreements;
- agree to participate in an evaluation and/or audit of the program;
- understand that projects funded may be communicated through the Department's public and social media channels;
- understand that failing to comply with all application requirements may delay the processing of the application, or may render me ineligible for receiving assistance under the program;
- understand that the Social Insurance Number, Business Number and/or Charity Registration Number is collected under the authority of the *Income Tax Act* for the purposes of reporting income;
- acknowledge that my/our completing this application form and by receiving advice from the PEI Department of Agriculture or other program delivery agent does not oblige the PEI Department of Agriculture or other delivery agents to provide funding; and
- understand that expenses incurred prior to the submission of an approved application are not eligible for assistance under this program.

I certify that the information given on this application is to the best of my knowledge complete, true, and accurate.

\_\_\_\_\_  
Name of Applicant/Signing Officer  
(Please print)

\_\_\_\_\_  
Signature of Applicant/Signing  
Officer

\_\_\_\_\_  
Date (yy/mm/dd)

## Step 10 – Applicant Demographic Information

Your response to the following questions will assist the Department in Understanding demographic profile of Sustainable CAP clients.

Please select which gender you identify as				
<input type="checkbox"/> Man	<input type="checkbox"/> Woman	<input type="checkbox"/> Non-binary	<input type="checkbox"/> Gender not listed	<input type="checkbox"/> Prefer not to say
What is your first language?				
<input type="checkbox"/> English	<input type="checkbox"/> French	<input type="checkbox"/> Other	<input type="checkbox"/> Prefer not to say	
Are you proficient in languages other than English or French?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Are you a senior (age 65 or older?)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Are you a youth (age 29 or under?)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Do you identify as a:				
Person with a disability?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Member of the Island's Acadian community?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Member of an Indigenous group?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Newcomer to Canada?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	
Part of another under-represented group?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to say	

## Step 11 – Company/Organization Demographic Information

**1a) Is your company/organization owned (50% or more) by one of the following groups? Select all that apply.**

- |   |   |
|---|---|
| <input type="checkbox"/> Indigenous Person/Persons – First Nations                  | <input type="checkbox"/> Indigenous Person/Persons – Inuit          |
| <input type="checkbox"/> Indigenous Person/Persons – Métis                          | <input type="checkbox"/> Indigenous Person/Persons – Unknown/Unsure |
| <input type="checkbox"/> Woman/Women  | <input type="checkbox"/> Youth                                      |
| <input type="checkbox"/> Person(s) with disabilities                                | <input type="checkbox"/> Visible minority(ies)                      |
| <input type="checkbox"/> Gender Parity (50% women and/or non-binary people or more) | <input type="checkbox"/> Not applicable                             |
| <input type="checkbox"/> Decline to Identify  |   |

**1b) Does your organization's Board of Directors have a diverse composition with significant representation (30% or more) from one of more of the following groups? Select all that apply.**

- |   |   |
|---|---|
| <input type="checkbox"/> Indigenous Person/Persons – First Nations                  | <input type="checkbox"/> Indigenous Person/Persons – Inuit          |
| <input type="checkbox"/> Indigenous Person/Persons – Métis                          | <input type="checkbox"/> Indigenous Person/Persons – Unknown/Unsure |
| <input type="checkbox"/> Woman/Women  | <input type="checkbox"/> Youth                                      |
| <input type="checkbox"/> Person(s) with disabilities                                | <input type="checkbox"/> Visible minority(ies)                      |
| <input type="checkbox"/> Gender Parity (50% women and/or non-binary people or more) | <input type="checkbox"/> Not applicable                             |
| <input type="checkbox"/> Decline to Identify  |   |

**2) Indicate any of the following groups who will directly benefit from with project's activities. Select all that apply.**

- |  |   |
|--|---|
| <input type="checkbox"/> Indigenous Person/Persons – First Nations | <input type="checkbox"/> Indigenous Person/Persons – Inuit          |
| <input type="checkbox"/> Indigenous Person/Persons – Métis         | <input type="checkbox"/> Indigenous Person/Persons – Unknown/Unsure |
| <input type="checkbox"/> Woman/Women                               | <input type="checkbox"/> Youth                                      |
| <input type="checkbox"/> Person(s) with disabilities               | <input type="checkbox"/> Visible minority(ies)                      |
| <input type="checkbox"/> Not applicable                            | <input type="checkbox"/> Decline to Identify                        |

## Step 12 – Submitting the Application

Please complete the required appendices and submit together with the general application.

Completed applications may be submitted to the attention of the Program Officer via regular mail or email.

### **Email Applications:**

Once you have completed the application, you may email a signed copy in PDF to the **Alternative Land Use Service Program** at [ALUS@gov.pe.ca](mailto:ALUS@gov.pe.ca)  
Please include the program name in the subject line.

### **Regular Mail Applications:**

Applications may be submitted via regular mail at:  
PEI Department of Agriculture  
11 Kent Street  
PO Box 2000  
Charlottetown PE C1A 7N8  
(902) 368-4880 (telephone)

*Questions?*

Please email the **Alternative Land Use Services Program** at [ALUS@gov.pe.ca](mailto:ALUS@gov.pe.ca)

## Appendix A: ALUS New Feature Enrollment

Please identify all properties to be considered for enrollment in the ALUS program, indicate whether those properties are owned or leased, and indicate which types of ALUS features you'd like to enroll (please see guidelines for more information). You will be contacted for more information about each new feature.

**ALUS Feature # (For each Property you'd like to enroll in ALUS, please check all that apply in the table below):**

- Transition from annual crop production to perennials (forages, biodiversity mixes or trees & shrubs) in:
  - (1) Expanded buffer zones,**
  - (2) Seasonally wet cropland,**
  - (3) High slope cropland**
- **(4) Field margin** enhancement through pollinator and wildlife friendly plant mix/tree/shrub plantings.
- **(5) Soil conservation structure** maintenance
- **(6) Exclusion of livestock from watercourses/wetlands** through fence maintenance
- **(7) Delayed hay cutting or deferred grazing** until after July 15<sup>th</sup> to protect ground-nesting birds.
- **(8) Innovative agroforestry system** establishment and maintenance

Property Identification #	Owned	Leased	(1) Expand Buffer	(2) Wet Land	(3) High Slope	(4) Field Margin	(5) Soil Cons	(6) Fence Livestock	(7) Delay hay/Graze	(8) Agro- Forest
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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