

PRODUCTION COST INSURANCE

Authorization for Release of Information from SCIC

Customer ID	
Farm Name	
Address	
City	
Province	
Postal Code	

Saskatchewan Crop Insurance Contract/ Identification Number (shared with SCIC)

AUTHORIZATION TO COLLECT AND DISCLOSE INFORMATION

I/we consent that Saskatchewan Crop Insurance Corporation (“SCIC”) and Global Ag Risk Solutions (“GARS”) may disclose to each other my information, including personal information within the meaning of The Freedom of Information and Protection of Privacy Act, for the purposes of GARS’ Insurance Products. The information is limited to customer identification data (i.e., name address, contract/customer number), crop yields and acreages of insured crops from the years specified below and details of the origin of the yield data (i.e., bin measurement or producer declaration).

I/we acknowledge that SCIC may also collect from GARS and disclose to GARS information (related parties and/or contracts) for these purposes.

I/we acknowledge that in signing this authorization I have the obtained the appropriate permissions of all stakeholders in this farm unit. I/we also acknowledge that neither GARS nor SCIC will be responsible for any misrepresentation in the completion of this Authorization for Release of Information.

The UNDERSIGNED expressly acknowledges and agrees that this authorization is to provide:

- Yield data for all insured crops, annually, from 2011 to 2020 inclusive.
- This data to be used exclusively by GARS for insurance application and underwriting purposes.
- This authorization to be used only once.

By: _____
Participant of Contract – Print Name

By: _____
Participant of Contract – Print Name

Signature

Signature

Date

Date

Relationship

Relationship

