



The CFS board will NOT accept transfer forms that have been altered.

Checklist:

1. To be considered for approval at a board meeting, your request must reach the CFS board office before the quota transfer deadline, check schedule at Saskatchewanchicken.ca or contact the board office.
2. Must be accompanied by a cheque for **\$350.00**.
3. If there is a "Letter of Acknowledgment" in your file, a discharge letter from your lending organization must accompany this form.
4. All outstanding levies, over-marketed penalties of transferor shall be paid prior to the transfer taking place (Section 1, F, Order No. 84/21. Base Quota Transfers)
5. The Transferor shall retain the production sleeve addition or reduction of kilograms of the transferee for the first 6 cycles (Order No. 100/23)

**** CFS accepts no responsibility related to the Sale and Purchase Agreement in any manner including the terms thereof or enforcement of any breach. CFS shall only be responsible for effecting transfer of the quota to the Transferee as of the effective date. ****

FORM A (to be completed by Transferor):

Full Name of Licensed Producer: _____ License _____

Mailing Address: _____

Postal Code: _____ Phone: _____ Fax: _____

Legal description of current production site:

Section _____, Township _____, Range _____, West of _____,
Meridian or Lot _____, Block _____, Plan _____, Village/Town/City_____.

Who are you transferring the base quota to? _____

Will the transferred production remain on this site? _____

What production **CYCLE** will the transfer become effective? _____

How much base quota is being transferred? _____ kilograms of A Quota

Dated at _____, Saskatchewan, this _____ day of _____, 20__.

Quota Holders Signature

Please complete the following declaration before a Commissioner for Oaths or Notary Public.

I, _____, do solemnly declare that the information given above is true and complete in every respect.

Declared before me at _____, in the Province of Saskatchewan, this _____ day of _____ A.D., 20_____.

A COMMISSIONER FOR OATHS in and for the Province of Saskatchewan. My commission / certificate expires _____.



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FORM B (to be completed by Transferee)

CFS accepts no responsibility related to the Sale and Purchase Agreement in any manner including the terms thereof or enforcement of any breach. CFS shall only be responsible for effecting transfer of the quota to the Transferee as of the effective date.

Full Name of Proposed Transferee: _____ License # (if applicable) _____

List all shareholders or members of corporations, co-operatives, companies, etc. on Form 'C'

Mailing Address: _____

Postal Code: _____ Phone: _____ Fax: _____

Email: _____

Who is transferring the quota to you? _____

What production **CYCLE** will the transfer become effective? _____

Legal description of proposed production site:

Section _____, Township _____, Range _____, West of _____

Meridian or Lot _____, Block _____, Plan _____, Village/Town/City _____

What other species are being produced on this land location? _____.

Is the production site OFFSAP and Animal Care Program certified? _____.

Do you agree to comply with all policies related to stocking density, animal care and OFFSAP? _____.

Are you aware of all CFS policies and fees related to the production and marketing of chicken? _____.

Which processor do you intend to market this base quota production to? _____.

Please list names of firms, farms or other operations involved in the poultry industry or related to the poultry industry in which you have any financial or other interest (e.g. processing, manufacture of feed, poultry or egg production, etc.)

_____.

What number of kilograms is being transferred? _____ kilograms of A Quota.

Please note: There may be over/under adjustments from previous production periods that you are responsible for. It is the responsibility of the Transferee to obtain the adjustment from the Transferor if applicable.

Dated at _____, Saskatchewan, this _____ day of _____, 20__.

Proposed Transferee Signature

Please complete the following declaration before a Commissioner for Oaths or Notary Public.

I, _____, do solemnly declare that the information given above is true and complete in every respect. Declared before me at _____, in the Province of Saskatchewan, this _____ day of _____ A.D., 20_____.

A COMMISSIONER FOR OATHS or NOTARY PUBLIC in and for the Province of Saskatchewan. My commission / certificate expires _____.



Form C for Purchaser

* Any corporation, partnership, cooperatives, or any other manner including an agreement in trust, must complete the following declaration form before any transfer or quota can take place.

Name of Business: _____

Address of Business: _____ (Street and/or Box Number)

_____ (City and Province)

_____ (Postal Code)

_____ (Phone number)

_____ (Fax Number)

_____ (Email Address)

Declaration of Ownership

Name of Individual	% of Ownership	Signature	Date

****Note: Any changes to the ownership of a corporation, partnership, cooperative or any other manner including an agreement in trust, must be notified to the CFS Board office immediately.***



Form D for Purchaser

CANADA)
PROVINCE OF SASKATCHEWAN)
TO WIT:)

STATUTORY DECLARATION of Purchaser

I, _____, of _____, in the Province of Saskatchewan, DO SOLEMNLY DECLARE:

- 1. That I am the Purchaser/Officer of the Purchaser with respect to the purchase of quota from _____ pursuant to an Agreement dated _____, 20__, and as such have personal knowledge of all matters related to the purchase transaction.
2. That I, as Purchaser or Officer of the Purchaser, have read and understand the Board Orders related to the purchase and sale of quota within the Province of Saskatchewan, copies of which are attached to this Statutory Declaration.
3. That I hereby declare that the Purchaser complies with the requirements of and is not in contravention of any of the provisions set out in the said Orders.
4. That I make this Statutory Declaration for the purpose of requesting the consent of the Board with respect to this purchase transaction.

DECLARED BEFORE ME at _____,)
in the Province of Saskatchewan,)
this ____ day of _____,)
A.D. 20___.)

A COMMISSIONER FOR OATHS OR NOTARY PUBLIC in and for the Province of Saskatchewan.

OR Being a Solicitor
My Commission / Certificate expires: _____