

Dairy Farmers of Prince Edward Island Quota Transfer Application Form

1. I (We) the undersigned, hereby apply for a transfer of quota effective _____
2. The Type of transfer requested is from the current quota holder to: (Please check [✓] or complete as appropriate)
- an immediate family member carrying on the dairy operation at the same location _____
- an immediate family member not carrying on the dairy operation at the same farm location _____
- a purchaser of the ongoing dairy operation who is not an immediate family member _____
- other (Please Explain) _____
3. Relationship to the purchaser (if an immediate family member) _____
4. The amount of dairy kilograms of quota to be transferred is: _____ all, or _____ Kg

Transfer Information

Transferor (Seller)

Transferee (Purchaser)

Farm Name (If applicable) Registration #

Name
and

Name

Mailing Address

Postal Code County

Signature

Signature

Date Signed

Farm Name (If applicable) Registration #

Name
and

Name

Mailing Address

Postal Code County

Signature

Signature

Date Signed

For Board Use Only

Letter of Direction on File Yes _____ No _____

If yes, date letter of direction released _____

Documents Provided In Support of Transfer

1. _____

2. _____

3. _____

Accepted (Secretary's Signature)

Rejected (Secretary's Signature)