



Delta Farmland & Wildlife Trust
OFFICE USE ONLY
Program Year: **2024**

DFWT Field Unit(s)

Regional Maps

Agreement #: _____

**DELTA FARMLAND & WILDLIFE TRUST
BLUEBERRY REST COVER CROP PROGRAM AGREEMENT**

DATE _____

BETWEEN THE COOPERATOR:

AND

THE DELTA FARMLAND AND WILDLIFE TRUST, a non-profit, community based, charitable society, whose mission is to promote the preservation of farmland and associated wildlife habitat in the Fraser River delta through sustainable farming and land stewardship (referred to hereafter as "DFWT").

TO BE ELIGIBLE FOR THIS PROGRAM PARTICIPANTS MUST:

1. be a registered landowner on the current Certificate of Title or Deed to the land: or
2. be entitled to become the registered landowner on Certificate of Title or Deed to the land under a contract, court order or any other legal instrument; or
3. have a valid land rental agreement to manage land for term of the Stewardship Agreement, and acknowledgement from the registered Landowner; or
4. be Indigenous (First Nation, Métis Nation, Inuit): a First Nation, Métis Nation or Inuit single person or a First Nation, Métis Nation or Inuit organization managing agricultural land. For example, be a First Nations Peoples in lawful possession of farmland under subsections 20(1), 20(2), or 20(3) of the Indian Act, or be a First Nations Band meeting these preceding conditions with an interest in farmland within the meaning of the Indian Act; and
5. have completed an agri-environmental risk assessment such as Environmental Farm Plan (EFP) or demonstrate working towards completing an agri-environmental risk assessment - prior to receiving final stewardship payments

Based on the above criteria, I am eligible to participate in this program

Yes, I am eligible **No**, I am not eligible

Farm/Land Disclosure

How much land do you own/farm within Metro Vancouver and the Fraser Valley?

Own Farm _____ acres Non-Owned Farm _____ acres

Please provide a valid business number (GST/HST) (required): _____

Have you completed an agri-environmental risk assessment such as an Environmental Farm Plan?

Yes **No**

If not, please indicate that you are willing to work towards completing an agri-environmental risk assessment.

Yes, I am willing to work towards a risk assessment.

No, I am not willing to work towards a risk assessment. I understand this may mean I am not eligible for cost-share.

DFWT shares some of the field data collected during our monitoring programs with funders. Please indicate below if you give permission to include the geographical location of your field with the associated data (typically this would be results from soil sampling). If you do not give consent, the field sampling data will be shared without being connected to a specific geographical location.

Do you consent to DFWT sharing the coordinates of your fields associated with field sampling data with funding agencies:

Yes **No**

I agree to the terms and conditions of the program as stated below and in the program brochure.

Cooperator's Name _____

Tel # _____

Company Name _____

Cell # _____

Mailing Address _____

E-Mail: _____

X _____

Cooperator's Signature

X _____

DFWT Signature

TERMS AND CONDITIONS

WHEREAS: The Cooperator and DFWT have agreed to cost share the establishment of a Blueberry Rest Cover Crop where blueberry bushes have been removed, for the purposes of soil conservation in Metro Vancouver and the Fraser Valley in the Province of British Columbia.

THE COOPERATOR WILL:

1. plant a cover crop at a seeding rate appropriate to the crop type by an appropriate planting date, (see [Blueberry Rest Program brochure](#)) within the fields identified in this agreement. (Please note that approval is dependent on funding availability. New applications are treated on a first-come, first-served basis and funding will be allocated until it is fully utilized. Submitting your agreement as soon as possible is recommended.)
2. maintain and manage the field as a cover crop from the fall planting date to March 31st of the following year and **ensure that plow down** of the cover crop **does not occur before March 31, 2025**, unless DFWT is advised of and agrees to an earlier plow down date.
3. allow DFWT to monitor fields for wildlife use, vegetation growth, and/or soil quality from October 1, 2024 to March 31, 2025.
4. agree not to receive reimbursement or exchange for rent payment for the BRP from any other program or agreement.
5. indemnify and save harmless DFWT from and against any and all actions, suits, claims, demands, damages or losses, howsoever arising as a result of the establishment and operation of the Blueberry Rest Cover Crop Program.

THE DELTA FARMLAND AND WILDLIFE TRUST WILL:

1. share the cost of establishing cover crops within Metro Vancouver and the Fraser Valley BC, on fields that were previously planted with blueberries, by paying a per acre rate for cover crops planted under the guidelines of the DFWT Blueberry Rest Program (Cover Crops). Cost-share rates and planting guidelines can be found in the Blueberry Rest Program brochure, and cooperators should thoroughly review the cost-share rates for 2024.
2. make payment in winter 2024, after all project details have been received with completed information and signatures from the Cooperator, and after Field Technicians have had the opportunity to verify all the acreage and waterfowl pressure.

Demographic Data Collection Survey

Respondent Consent

The Province of British Columbia supports inclusive and increased representation of underrepresented groups. By providing the information below, you are helping to improve the delivery of programming. At this time, the questions focus on three identity groups (Indigenous, women, and youth), and do not cover all potential groups who are underrepresented in the agriculture sector. We plan to expand the focus to other underrepresented groups in future. Your personal information is collected under section 26(c) and 26(e) of the Freedom of Information and Protection of Privacy Act for the purposes of evaluating applications and for the planning and evaluating of the S-CAP Ministry Program. The demographic information you provide is voluntary and will not be used to assess your eligibility for this program. Each individual understands the purposes of the collection, use, and disclosure of their demographic personal information. The information you provide will be shared with the federal government to fulfill the provincial obligations under the Sustainable Canadian Agricultural Partnership (S-CAP) bilateral agreement. It may be combined with other survey or administrative data sources and used for statistical, research and evaluation purposes. If any information is published, your responses will be combined with the responses of others so that you cannot be identified. If you have any questions about the collection of your information, please contact the Director of Sector Insights and Corporate Initiatives at alstats@gov.bc.ca.

1. Do you agree to respond to questions on the demographics of the business or organization?	<input type="checkbox"/> Yes, I agree. <input type="checkbox"/> No, I do not agree	If yes, proceed to #2 If no, proceed to Schedule A
2. Is the respondent a business owner of either a sole proprietorship or a general partnership? If you are filling out this information on behalf of a business owner or owners of a sole proprietorship or general partnership, please answer 'yes' and seek the response to the following demographic questions from the business owners.	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, proceed to #7 If no, proceed to #3
3. Does the applicant's organization have a governing board (for example, a Board of Directors)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, proceed to #4 and #5 If no, proceed to #4 and Schedule A
4. Indicate any of the following groups who are specifically targeted beneficiaries of the project's activities. Select all that apply.	<input type="checkbox"/> Indigenous - First Nations (including status and non-status) <input type="checkbox"/> Indigenous - Inuk (Inuit) <input type="checkbox"/> Indigenous - Métis <input type="checkbox"/> Women <input type="checkbox"/> Youth (40 years of age and under) <input type="checkbox"/> None of the above groups	
5. Is the respondent's organization a post-secondary institution, local government, provincial government, or Indigenous governing body (for example, a band or tribal council, government of a self-governing First Nation or Métis Nation Chartered Community)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, proceed to Schedule A If no, proceed to #6

6. How many members does the organization's governing body have?	
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7. Please indicate the number of board members or the proportion (% of shares) of the business that is owned by people who identify with each of the following groups.

INDIGENOUS

Indigeneity in Canada refers to people who are: First Nations (North American Indian), Métis or Inuk (Inuit), and/or Registered or Treaty Indians (that is, registered under the Indian Act of Canada), and/or those who have membership in a First Nation or Indian band.

Do not select these options if the owner(s) identify as Indigenous but not Indigenous to Canada (for example, Ainu, Sámi, or Māori).

	Number of members	-OR-		Percentage of shares (%)
First Nations (including status and non-status)				
Inuk (Inuit)				
Métis				
Indigenous - not specified				
None of the above (not indigenous to Canada)				
Unable to answer/identify				

Gender

Gender refers to an individual's personal and social identity as a man, woman or non-binary person.

	Number of members	-OR-		Percentage of shares (%)
Women+				
Men+				
Other				
Unable to answer/identify				

Age	Number of members	-OR-		Percentage of shares (%)
Over 40				
Youth (40 or under)				
Unable to answer/identify				

Schedule A.

Office Use Only	DFWT # _____	DFWT # _____	DFWT # _____	DFWT # _____	DFWT # _____	DFWT # _____	DFWT # _____
Field	Field # _____ Map # _____	Field # _____ Map # _____	Field # _____ Map # _____	Field # _____ Map # _____	Field # _____ Map # _____	Field # _____ Map # _____	Field # _____ Map # _____
Field Location	Mark field # on appropriate map	Mark field # on appropriate map	Mark field # on appropriate map	Mark field # on appropriate map	Mark field # on appropriate map	Mark field # on appropriate map	Mark field # on appropriate map
Cover Crop Species Seeded							
Cover Crop Planting Date							
Cover Crop Seeding Rate (lbs/acre)							
Seeding Method							
Soil Prep Details							
Field Size (Ac)							
Blueberry Bush Removal Date							
Planned Crop After Cover Crop							
Leveled within last 2 yrs?							

**** If you have more than 7 cover crop fields for which you are applying to the program, make as many additional copies of the table above as necessary and include them with the application. For more agreement forms, please call (604) 940-3392.**

**Delta Farmland & Wildlife Trust
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Ph: 604-940-3392 Fax: 604-946-7820**

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