



## LAYER LEASING PROGRAM APPLICATION

To: Egg Farmers of Ontario [the Board]		
Quota Holder Name:		Quota Holder Number:
Mailing Address:		
City:	Postal Code:	Phone:
Fax:		Email:
Number of birds requesting to lease from the Program (maximum 1,800 birds if eligible):		Barn Capacity at Scheduled Flock Placement Date:
<i>(Multiple flock Quota Holders are required to submit separate applications for each flock placement to a maximum of 1,800 birds per year)</i>		Scheduled flock placement date <b>(required)</b> :
The undersigned has submitted this application in accordance with the EFO Layer Leasing Program [LLP] criteria and hereby:		
a) Agrees to lease the number of birds as granted for a non-refundable fee of \$7.30 per bird, payable in full by Week #45 of the scheduled flock placement [19 weeks + 26 weeks = week # 45 flock life] (A postdated cheque must be received at the EFO Board office prior to the invoice payment due date).		
b) Applies to the Board to place the number of birds as granted, with the scheduled flock placement as above, into their production facility, using the quota number above, for a period of 365 days.		
c) Agrees that lease birds from the LLP are for 365 days only, as determined by the Board, and are otherwise irrevocable by the quota holder.		
d) Understands that they will be allowed to lease out of EFO's LLP only the number of birds that would be required to bring a Quota Holders' facilities into compliance with the current Housing Density Policy.		
e) Understands the LLP birds in the barn in excess of 365 days will incur a levy of two [2] cents a bird per day; to be reconciled once disposal information is received by the Board.		
f) Assumes responsibility for per bird levy and any other outstanding licence fees, levies, interest or other monies owing to the Board as a result of participation in the LLP.		
By submitting this application, the undersigned hereby consents to EFO, or its representatives, to verify any information submitted.		
The undersigned certifies that the information herein contained is complete, true and correct in all respects.		
_____	_____	_____
Date	Name of Applicant (please print)	Signature of Applicant