

Requester Name: _____

Business Type: Corporation Sole Proprietor Partnership

Legal Farm Name if corporation: _____

Legal Owner Name(s) if Sole Proprietor or Partnership:

Farm Registration #: _____

Farm location: _____

Mailing address: _____

(Street/Apartment)

(P.O. Box)

(City/Town)

(Province)

(Postal Code)

Contact Information

Phone: _____

Email (mandatory): _____

Lease Request

1. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___

2. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___

Note: *At least 24 hour notice is required before lease start date

**Equipment can be booked for a maximum of one week and no earlier than 30 days prior to rental date.

Selected dates will be confirmed based on availability once you submit this form. *For multiple pieces please see attached.

Requester Checklist

Before submitting your application please ensure the following:

1. You have read and understand the requirements outlined in the Provincial Farm Equipment Leasing Program Guide: _____
2. Insurance requirements have been reviewed and proof of coverage is available from your current insurance provider: _____
3. Transportation arrangements with appropriate equipment have been made: _____
4. Consumables listed in the Program Guide will be used during the requested leasing period: _____

TO SUBMIT

Please submit your completed Equipment Lease Booking Form to **equipmentleasing@gov.nl.ca**. After application submission you will be contacted with further details on equipment availability, and to proceed with the lease contract. Please do not proceed to the equipment bank location until your application is approved and a date/time has been arranged for equipment pick-up.

Provincial Farm Equipment Leasing Program Equipment Booking Form

Requester Name: _____

3. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___

4. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___

5. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___

6. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___

7. Equipment of interest*: _____

Start date: ___/___/___

End date: ___/___/___