

Customer Name: _____

Contract: _____

I, _____ of _____
 (Landlord's Name) (Address)

confirms that:

I, _____ of _____
 (Tenant's Name) (Address)

is the tenant on the following property:

RM	Qtr	Sec	Twp	Rge	Mer
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

RM	Qtr	Sec	Twp	Rge	Mer
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I certify the above to be true and correct and is subject to the Crop Insurance Contract of Insurance. I am aware that to make a false statement is an offence.

 Landlord's Signature

 Tenant's Signature

 Landlord's Phone #

 Date

 Date

Note: All land transfers are subject to approval.

Saskatchewan Crop Insurance Corporation(SCIC) recognizes the importance of your personal information and the privacy surrounding it. Depending on the program offered by SCIC, and pursuant to provincial legislation and regulations, SCIC will not share or disclose any of your information unless otherwise required by law or for the purpose of programs offered by SCIC. SCIC will secure your information and may archive it indefinitely in accordance to The Archives Act. For all privacy concerns, please contact SCIC's Privacy & Security Commissioner by email at securityofficer@scic.gov.sk.ca or phone at 306-728-7200.