



Hensall District Co-operative, Incorporated
 1 Davidson Drive, PO Box 219
 Hensall, Ontario N0M 1X0
 Phone: (519) 262-3002
 Fax: (519) 262-2317

Field Identification Report

Producer/Company Name:	Phone #
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Field Name (what <u>you</u> call it):
Acres:

Field Location from nearest 911# _____

<div style="border: 1px solid black; height: 300px; width: 100%;"></div>	Draw a field map to indicate the perimeter of the field. Indicate isolation strips (3m space, fence, road, creek, etc.) Indicate the crops bordering this field (note if RR). Show which direction is north.								
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 2px;"><i>For office use:</i></td> <td style="width: 30%;"></td> </tr> <tr> <td style="padding: 2px;"><i>Contract #:</i></td> <td></td> </tr> <tr> <td style="padding: 2px;"><i>Entered by:</i></td> <td></td> </tr> <tr> <td style="padding: 2px;"><i>FM:</i></td> <td></td> </tr> </table>	<i>For office use:</i>		<i>Contract #:</i>		<i>Entered by:</i>		<i>FM:</i>	
	<i>For office use:</i>								
	<i>Contract #:</i>								
	<i>Entered by:</i>								
<i>FM:</i>									
Field Notes:									

Market Class: _____ Intended Variety: _____

Previous Crop: _____
 Last Year 2 Years 3 Years 4 Years 5 Years

For office use: Varietal Uniformity: <input type="checkbox"/> Yes <input type="checkbox"/> No Recommendation: Remove off types Volunteer Crop: <input type="checkbox"/> Yes <input type="checkbox"/> No Recommendation: Remove volunteer crop Volunteer Crop Type: Map and field verified by FM:
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Please send a revised report if you are not able to plant into this field as you intended. Use one form per field and indicate the acres for each field.

Please fax to HDC 519-262-3412, mail, or drop off within 10 days of planting.

EBF#5A Field Identification Report (Ontario)	Date: Aug 2009	Revision: 2.0
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