



# Electrigaz Application Form

## 1. Contact Information

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Organization or Business (full legal name): \_\_\_\_\_

Mailing Address (street): \_\_\_\_\_

P.O. Box: \_\_\_\_\_

City/Town: \_\_\_\_\_

Region/County: \_\_\_\_\_

Province: \_\_\_\_\_

Postal Code \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

## 2. Sector Information

**Please select the option(s) that best describe the operation(s) associated with the proposed biogas system:**

Dairy Farm

Hog Farm

Layers Farm

Broiler Farm

Beef and Cattle Farm

Other Livestock Farm (please indicate type): \_\_\_\_\_

- \_\_\_ field crops
- \_\_\_ vegetable/fruit/greenhouse/horticultural crops
- \_\_\_ flowers and ornamentals
- \_\_\_ waste management
- \_\_\_ municipality
- \_\_\_ meat processing
- \_\_\_ fruit and vegetable processing
- \_\_\_ milling and baking
- \_\_\_ dairy processing
- \_\_\_ other food processing
- \_\_\_ other (specify): \_\_\_\_\_

**Please indicate:**

Yearly manure production and dry matter content (%) \_\_\_\_\_

Number of heads of each type of animal (ex. # milking cows, # replacement, # calves...) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of barns and location (all in one site or various sites, distance between sites...) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number, type, volume and location of manure storage \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type and quantity of other material to be considered in the digester design (waste from neighborhood processing plant, manure from other farms, crop waste...) \_\_\_\_\_

\_\_\_\_\_



In your nutrient management plan, do you have enough land to apply additional material? \_\_\_\_\_

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### 3. Energy Information

Do you have heat needs at the farm? \_\_\_\_\_

If yes: What type of heating system are you using and amount of fuel used/year? \_\_\_\_\_

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What is your annual electricity consumption? \_\_\_\_\_

What is your annual natural gas consumption (if applicable)? \_\_\_\_\_

Do you have 3-phase power at the farm? \_\_\_\_\_

### 4. Source of funding

OMAFRA will pay you back 70% of expenses (up to \$35 000) after you have provided invoice payment proof of Phase 1 Study. Please indicate your source of funding for the study with corresponding amount:

1) Source of funding and amount: \_\_\_\_\_

2) Source of funding and amount: \_\_\_\_\_

### 5. General Applicant information

Please provide the following information:

- a. Full legal name of your company/organization/farm.
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**Note:** For the OMAFRA application you will have to provide proof of current status, (i.e., a certificate of status) and constituting documents (i.e., articles of incorporation, or letters patent, etc.), which indicate the full and proper name of the organization as well as the proper signatories to the agreement.

- b. Type of legal entity: [ ] Sole Proprietorship [ ] Partnership [ ] Corporation [ ]

Other \_\_\_\_\_



c. Do you have a parent company? No [ ] Yes [ ]

If yes, please provide name and address: \_\_\_\_\_

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d. Do you have other related companies? No [ ] Yes [ ]

If yes, please specify: \_\_\_\_\_

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e. Attach a list of owners and directors (if applicable) of your company/organization (use a separate sheet)

f. Does your company/organization have an interest in any of the companies/organizations listed as co-applicants? No [ ] Yes [ ]

If yes, please list separately the project partner, the percentage interest, and whether there are consolidated financial statements available.

**Please return the filed up application form with your \$300 payment by check or money order to:**

**Electrigaz Technologies Inc.  
17 Ch. de Maryhill  
Harrington Qc J8G 2T3**