

NOVA SCOTIA BEEF HERD RENEWAL AND IMPROVEMENT PROGRAM



Nova Scotia Cattle Producers
7 Atlantic Central Dr.
East Mountain, NS B6L 2Z2
Telephone: (902) 893-7455 Fax: (902) 893-7063
Email: office@nscattle.ca

1 PRODUCER INFORMATION

Applicant Name: _____

Farm Name: _____

NSCP Number: _____ # Breeding Cows _____

Business Number or SIN (see note below) _____ Feeding Capacity _____

Civic Address _____

Mailing Address: _____
(if different) _____

Email: _____

Phone: _____ Home: _____ Cell: _____

Business Number & SIN Request Note:

NSCP is required to file an AGR-1 for each applicant who receives funds from this program to be included in your 2024 tax return. In order to do this, we must have either your Business Number (for incorporated farms) or your SIN. If you are not comfortable having it written down, please call the office and provide it verbally.

Application Deadline: February 15, 2025

Applications will be approved on a first-come, first-served basis until program maximums have been exhausted. Applying early is encouraged and multiple applications for different categories are acceptable.

To qualify for funding in any category, applicants must:

1. Be a Nova Scotia based cattle producer, partnership or corporation that has a breeding herd of no less than ten cows.
2. Hold a 2024 Nova Scotia Cattle Grower License and have 2023 and 2022 levies paid in full by the application deadline.
3. Agree to abide by the current Program Guidelines.
4. Herd Data (calf growth rate, cow open rate, length of calving period and calf death loss rate) will be required to receive ANY funding for next year (April 2025 – February 2026). Not required for 2024-2025 funding.

Program maximum per applicant, all categories combined:

- \$2,000 for producers who marketed under 30 head on their recent NSCP Grower License Application
- \$5,000 for producers who marketed between 30–150 head on their recent NSCP Grower License Application
- \$8,000 for producers who marketed over 150 head on their recent NSCP Grower License Application

Send by mail to: **Nova Scotia Cattle Producers, 7 Atlantic Central Dr., East Mountain, NS B6L 2Z2**
OR send directly to the NSCP Office **Fax: 902-893-7063; Email: office@nscattle.ca**

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FUNDING CATEGORIES

All available funding and required documents are listed under each program:

Herd Data	Page 2	Herd Health	Page 5
Elite Sires	Page 2	Preconditioning Services	Page 5
Heifer Retention	Page 3	VBP+ Audit	Page 6
Seed Stock Development	Page 4	Surveillance Systems	Page 6

2 HERD DATA

Required for all applications submitted after April 1, 2025: Optional before then

Calf Growth Rate	Avg Birth Weight of all calves (lbs.)	A.	_____	Avg Weaning Weight of all calves (lbs.)	B.	_____
	Avg weaning age (days of age)	C.	_____			
	(B-A) =		_____	/ (C) =		_____

Cow Open Rate	# Females Exposed	D.	_____	# Females Pregnant	E.	_____
	(D-E) =		_____	/D =		_____
				X 100 =	F.	_____

Length of Calving Period	First Calf Born:	_____	Last Calf Born:	_____

Calf Death Loss Rate	Total Calves Born during Calving Period (above)	G.	_____
	Mortalities within first 24 hours	H.	_____
	Mortalities between 1 day and weaning	I.	_____
	Total Mortalities (H+I)	J.	_____
			Rate (H/G)*100 = _____
			Rate (I/G)*100 = _____
			Rate (J/G)*100 = _____

3 ELITE SIRES

For any Elite Sire purchases claimable before February 15, 2025, please use the Nova Scotia Genetic Improvement Program Application found at <https://nscattle.ca/members/programs/>

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4 HEIFER RETENTION

	CCIA Tag Number	Herd ID
Heifer 1	_____	_____
Heifer 2	_____	_____
Heifer 3	_____	_____
Heifer 4	_____	_____
Heifer 5	_____	_____
Heifer 6	_____	_____
Heifer 7	_____	_____
Heifer 8	_____	_____
Heifer 9	_____	_____
Heifer 10	_____	_____

**Use additional pages if necessary.
All retained heifers must be listed and vet checked to ensure criteria below is met.**

Total number marketings reported on your 2024 NSCP Grower License Application _____ X 10% = **L.** _____

Total number of heifers retained for use in 2024 **M.** _____

Total claimable retained heifers **(M-L)** _____ X \$300 = **N.** _____

Number of claimable retained heifers Genomically Tested: _____ X \$100 = **O.** _____

Total Heifer Retention Funds Claimed **(N+O)** **P.** _____

Funding Available & Criteria:

- \$300 per retained heifer
 - Heifers retained above a 10% replacement rate are eligible. Herd size is based on the previous year's reported marketings from your NSCP annual Grower License application.
 - Confirmed pregnant by vet or presented for a vet confirmation with calf.
 - Vet confirmation must be between January 1, 2024 and application date.
 - CCIA ear tag numbers required for all retained heifers.
- Bonus: \$100 for heifers with genomic testing.

Document Checklist:

- This application completed and signed
- Vet confirmation of pregnancy or calf at side for all retained heifers

If applicable:

- Genomic Test Results
- Invoice and proof of payment (cheque image from your bank, proof of e-Transfer or credit card Receipt)

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5 SEED STOCK DEVELOPMENT

5.1 Testing Facility

Name of Testing Facility: _____

of bulls/heifers consigned to test _____ X \$500 = **Q.** _____

Tattoo(s) of bulls on Test _____

Funding Available & Criteria:

- \$500 per head for sending bulls or heifers to a testing facility for genetic evaluation. Evaluations must include Average Daily Gain, Residual Feed Intake, Carcass Ultrasound Evaluation, Breeding Soundness Exam.
- Applicant must be registered owner at the time of the test.
- Testing activity (start or finish) must have occurred between January 1, 2024, and application date.

Document Checklist

- This application completed and signed
- Record of Performance from completed Test showing required evaluations

Note: the following will be confirmed directly with the Test Station:

- All applicable testing fees have been paid
- Who the registered owner was the time of the test

5.2 Home Test Bulls or Individual Evaluation

	Tattoo or ID #	Carcass Ultrasound	Carcass Ultrasound	Breeding	Genomic Testing
		Purebred (\$50)	Commercial (\$20)	Soundness (\$50)	(\$20)
1	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Funding Claimed: **R.** _____

Funding Available & Criteria:

- Carcass Ultrasounds
 - \$50 per head for Carcass Ultrasound Evaluation for registered purebred animals
 - \$20 per head for Carcass Ultrasound Evaluation for commercial animals
 - Must be completed by a certified Ultrasound Guidelines Council (UGC) certified technician
 - Must include rump fat thickness, rib fat thickness, rib-eye area and percentage intramuscular fat
- \$50 per head for Breeding Soundness Exam
 - Must be done by a veterinarian
 - Must include motility, body condition score and scrotal circumference
- \$20 per head for Genomic Testing
 - Minimum of 50k snip
- Evaluations must have occurred between January 1, 2024, and application date.
- Applicant must be the individual who incurred the cost of the evaluation.

Document Checklist

- This application completed and signed
- Evaluation results, showing date of evaluation(s)
- Invoice and proof of payment (cheque image from your bank, proof of e-Transfer or credit card Receipt)

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6 HERD HEALTH

I am applying for funding for a completed Herd Health Planning Calendar

Total Herd Health Funding Claimed **S.** _____

Funding Available & Criteria:

- \$200 per Herd Health Planning Calendar that must include:
 - Vaccination Protocol
 - Preconditioning Protocol
 - Parasite Control Protocol
 - Castration Protocol
 - Dehorning Protocol
 - Scour Prevention & Treatment Protocol
 - Pregnancy Checks
 - Body Condition Scoring
- Calendar must cover some portion of the 2024 calendar year.

Document Checklist

- This application completed and signed
- Herd Health Planning Calendar signed and dated by veterinarian and producer
- Invoice and proof of payment (cheque image from your bank, proof of e-Transfer or credit card Receipt)

7 PRECONDITIONING SERVICES

Contractor Name: _____

Contractor Contact (phone or email) _____

of head processed _____ X \$5.00 = **T.** _____

Funding Available & Criteria:

- Preconditioning services are defined as hiring a contractor to come to your farm, with handling equipment, to complete any number of procedures including tagging, vaccinations, dehorning, castration and age verification.
- \$5 per head processed.
- Contractor must be verified by NSCP as independent of the applicant farm and consistent with the definition above.
- Services must be provided between January 1, 2024, and the application date.

Document Checklist:

- This application completed and signed
- Completed barn sheet signed and dated by contractor and producer
- Invoice and proof of payment (cheque image from your bank, proof of e-Transfer or credit card Receipt)

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8 VBP+ AUDIT

Type of Audit Received	<input type="checkbox"/>	Cow/Calf Audit	\$1,250+HST
	<input type="checkbox"/>	Feedlot Audit	\$1,750+HST
	<input type="checkbox"/>	Combined Audit	\$2,000+HST

Date of most recent completed audit: _____

VBP + Audit Funding Claimed **U.** _____

Funding Available & Criteria:

- \$100 per year for being verified on VBP+.

Document Checklist:

- This application completed and signed
- VBP+ Audit Certificate
- Invoice and proof of payment of recent audit (either annual payments or lump sum at time of audit)
(cheque image from your bank, proof of e-Transfer or credit card Receipt)

9 SURVEILLANCE SYSTEMS

Brand of camera purchased _____

Number of cameras purchased _____

Amount paid (before tax) _____ X 50% = **V.** _____

Provide a drawing of your barn or map image of your pasture showing the location of the camera(s).

Funding Available & Criteria:

- 50% of purchase price for cameras used for cattle monitoring.
- Camera(s) must have the ability to be connected to remotely.
- Camera(s) must be purchased between January 1, 2024, and application date.
- Barn drawing or pasture map, showing location of camera(s), required.

Document Checklist:

- This application completed and signed
- Camera feature list (from website or user's manual)
- Barn drawing or pasture map, showing location of camera(s),
- Invoice and proof of payment (cheque image from your bank, proof of e-Transfer or credit card Receipt)

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TOTAL FUNDING CLAIMED

Category		Funding Requested
Elite Sires	K.	\$ _____
Heifer Retention	P.	\$ _____
Seed Stock Development	Q.	\$ _____
Seed Stock Development	R.	\$ _____
Herd Health	S.	\$ _____
Preconditioning Services	T.	\$ _____
VBP+ Audit	U.	\$ _____
Surveillance Systems	V.	\$ _____
Total Funding Requested		\$ _____

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CERTIFICATION AND SUBMISSION

By submitting this application form, I

- certify, to the best of my knowledge and ability, that the information provided on this form is complete, true and correct.
- understand and agree to the program guidelines and, if the application is approved in whole or in part, agree to abide by the terms and conditions as set out in the program guidelines.
- consent to the audit and verification of the information provided on this form, such audit and verification to be performed by the Nova Scotia Cattle Producers or other parties, including livestock inspection agencies, chosen by the Nova Scotia Cattle Producers for audit and verification purposes.
- grant permission to the Nova Scotia Cattle Producers to contact any of my suppliers to confirm the information I have provided.
- agree to repay any overpayment amount received as a Producer Payment if adjustment or audit shows the amount received exceeds the contributions to which I am entitled under the terms of the Program Payment.
- understand that the limited funding is available and completed applications will be reviewed on a first-come, first-serve basis until funding is exhausted.
- confirm that I have the authority to bind the applicant.
- all decisions of the program administrator are considered final

ACKNOWLEDGMENT

By signing below, I hereby certify that the amounts claimed are compliant with the payments authorized by the Nova Scotia Beef Herd Renewal and Improvement Program terms and conditions, as displayed on this application.

Print Name

Signature

Date

APPLICATION MUST BE RECEIVED BY February 15, 2025

Applications will be approved on a first-come, first-served basis until program maximums have been exhausted.

Applying early is encouraged and multiple applications for different categories are acceptable.

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