

CROP QUEST INC.

NUTRIENT MANAGEMENT STRATEGIES & NASM PLANS

END USER

Crop Quest Manure Registry Program

Contact Name:

Receiving Site Address (Street)

Receiving Site Address (City)

Receiving Site Address (Postal Code)

Contact Phone Number

Alternate Contact Phone Number

Email Address

Hours Available for Contact

Is Crop Quest free to release your contact information YES NO

(If no Crop Quest will contact the end user and provide them with the contact information for the interested party so that the originator can make the initial contact).

Manure Type Wanted Cattle
 Dairy
 Swine
 Broiler
 Laying Hens
 Sheep
 Goat
 Horse
 Other _____

CROP QUEST INC.

NUTRIENT MANAGEMENT STRATEGIES & NASM PLANS

Organic System Yes

No

Composted Yes

No

Nutrient Analysis Available? Yes

No

Will you pay a fee? Yes

No

Please note that Crop Quest provides a five year rolling average nutrient price table on our website at <https://www.cropquest.ca/resources> as a resource.

Delivery needed Yes

No

Spreading needed Yes

No

Amount needed? _____

Your signature below acknowledges that Crop Quest's Manure Registry Program is offered as a free, information only service between **Crop Quest originators** and all end users. We are in no way involved in the pricing, sale or exchange involved in any transactions and therefore accept no responsibility or liability arising from any such claims or exchanges.

Signature _____ Date: _____