Dairy Innovation Program (DIP)

Application Form

- 1. Please ensure that you have read and understood the Dairy Innovation Program (DIP) Description and Guidelines before completing the application.
- 2. A SEPARATE application form must be completed for EACH product submitted for consideration under the DIP.

All Applications must be sent to:

Dairy Innovation Program Toll free: 1-866-366-0676

Email: cdc.innovation.ccl@cdc-ccl.gc.ca

Please provide as much information as possible on your company's proposal. A detailed application will enable the Program Selection Committee to make a fair and speedy assessment of your application.

- 3. The Selection Committee will not make a final decision until the applicant provides samples of each product applied for.
- 4. Applications are reviewed every three months. Deadlines for application are March 31st, June 30th, September 30th and December 31st.

Application Form

1.	Name of project or product (supplied by Applicant)	
2.	Contact Information	
С	Company name:	
	ddress:	
Te	elephone:	
Eı	mail:	
Pl	lant Registration #	
Ν	Name of company official authorized to act on behalf of the Applicant.	
_	itle	
	elephone:	
E	mail:	
4. a)	Description of the product for which milk is requested under this Progra Product description:	m:
b)	Unit weight of finished product at point of sale:	(grams)
c)	Butterfat content, per unit of finished product: (grams) (%)	
d)	Milk solids non fat, per unit of finished product: (grams) (%)	

e)	Other significant ingredients, per unit of	nt ingredients, per unit of finished product:		
	i) Ingredient:	(grams)	(%)	
	ii) Ingredient:	(grams)	(%)	
	iii) Ingredient:	(grams)	(%)	
	iv) Ingredient:	(grams)	(%)	
f)	Level of moisture in the product in cas % of moisture	e you apply for cheese:		
5.	Detailed marketing plan indicating am channel, the targeted customers, and attached as an annex).	_		
6.	Describe the new or innovative factor(s marketplace by the development of the	. —		

7.	Indicate the DIP application type:	
	National DIP Application \square^1	
	Provincial DIP Application □ ²	
8.	Explain how the introduction of this product will result in net increase in milk consumption in Canada. ³	
	What is the expected net increase in sales of milk – and how is this calculated? (i. if this new product replaces an existing one, is there additional use of milk?)	e.

¹ This applicant must demonstrate that the product will be distributed in two or more provinces or across Canada within 24 months of receiving milk under this program.

² This type of contract is best suited for dairy products usually sold locally not outside of the province where it is manufactured. A similar product will have the possibility of being accepted for a provincial DIP contract in another province.

³ Unless the Selection Committee decides that a report is not necessary from the companies requesting only a small and limited amount of milk, the increase in milk demand will have to be confirmed in a report from an independent concept test firm.

Product 2: Product 3:	Manufacturer: Manufacturer: Manufacturer: Manufacturer: Manufacturer: , to what extent will sales of these existing products be
Product 3:According to your forecasts	Manufacturer:
According to your forecasts	
9	, to what extent will sales of these existing products be
, ,	rt?
Product 1:	
Product 2:	
Product 3:	
If the plants are in different	t provinces, will you be able to provide milk utilization data
	How many processing planthey located?

10. Please provide a	estimate of the amount of milk required for the first 3 years.	
Year 1	litres	
Year 2	litres	
Year 3	litres	
Total	litres	
	nt applying for more than one million litres of milk per year mus om an independent concept firm that supports the expected emand.	
Based on your prodeclared?	duct's characteristics, in which milk subclass should it be	
Subclass		
11. Are there any dairy by-products from the production of this product and, if yes, how will they be disposed of?		

Signature of Applicant's Authorized Officer	Date
orginatare or rippingarite or tatherized officer	240
Title	

To be completed by the Canadian Dairy Commission	
Date received by the CDC:	
Received by:	
Assigned chronological number:	