

Membership number

Entitled Tonnage

WEALD GRANARY Ltd. 2010 Harvest Commitment Form

I/we declare below the varieties and tonnages of species I/we will deliver to the store for this years harvest.
This commitment must not be altered unless agreed with the Store Manager and Marketing Director.

Please complete and return to Weald Granary Ltd., Seven Mile Lane. Mereworth, Maidstone. Kent ME18 5PZ. by 29th Feb latest. If forms not received back by this date we will assume you will not be using your space and it will be allocated to the lease pool.

GENERAL POOLS	VARIETY	TONNES	
WHEAT	<input type="text"/>	<input type="text"/>	
	<input type="text"/>	<input type="text"/>	
	<input type="text"/>	<input type="text"/>	TOTAL WHEAT
	<input type="text"/>	<input type="text"/>	<input type="text"/>
BARLEY	<input type="text"/>	<input type="text"/>	
	<input type="text"/>	<input type="text"/>	TOTAL BARLEY
	<input type="text"/>	<input type="text"/>	<input type="text"/>
OILSEED RAPE	<input type="text"/>	<input type="text"/>	TOTAL OSR
	<input type="text"/>	<input type="text"/>	<input type="text"/>
LINSEED	<input type="text"/>	<input type="text"/>	TOTAL LINSEED
	<input type="text"/>	<input type="text"/>	<input type="text"/>
MAIZE	<input type="text"/>	<input type="text"/>	<input type="text"/>
OATS	<input type="text"/>	<input type="text"/>	<input type="text"/>
PEAS	<input type="text"/>	<input type="text"/>	<input type="text"/>
BEANS	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL GENERAL POOLS			<input type="text"/>

DOUBLE USE POOLS			
FEED BARLEY	<input type="text"/>	<input type="text"/>	
FEED WHEAT	<input type="text"/>	<input type="text"/>	
SOISSONS WHEAT	<input type="text"/>	<input type="text"/>	TOTAL DOUBLE USE POOLS *
WINTER O.S.R.	<input type="text"/>	<input type="text"/>	<input type="text"/>

GRAND TOTAL

NUMBER OF M.R.N. FORMS REQUIRED
(one form per load)

SIGNATURE _____ DATE ___/___/___

* Please note that grain entered into the double use pools is in addition to general pool commitment.

PLEASE COMPLETE THE FORM OVER LEAF

MEMBERS INFORMATION

MEMBERS NAME		
MEMBERS ADDRESS		
FARM ASSURANCE NUMBER/COMPANY		

COLLECTION INFORMATION

TYPE OF LORRY	articulated / rigid
COLLECTION POINT (if different from above)	
LOADING RATE	
CONTACT NAME (print)	
TELEPHONE No.	
FAX No.	
MOBILE PHONE No.	
E-MAIL ADDRESS	

OWN DELIVERY

<p>I REQUEST TO DELIVER _____ TONNES BY TRACTOR / TRAILER & AGREE TO ABIDE BY THE STORES TERMS & CONDITIONS AVAILABLE ON REQUEST.</p> <p>SIGNED: _____</p>
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