

(POLICY RECORD – TYPE 10)
Format/Edits

Field No.	Field Name	Begin Pos.	Size	Picture	Field Edits
1	Record Type	1	2	9(02)	Required. Must be 10.
2*	Approved Insurance Provider	3	2	X(02)	Required. Edit with AIP/Company table.
3*	Location State	5	2	9(02)	Required. Edit with FIPS State table.
4	Policy Issuing Company	7	3	9(03)	Required. Edit with company table. Must be valid Pic code for reinsurance year.
5*	Policy Number	10	7	9(07)	Required. Must be > zeros.
6*	Crop Year	17	4	9(04)	Required. Must be the crop year of the crops reported under the policy. This will equal the Reinsurance Year or Reinsurance Year +/- 1 for the applicable crop code.
7	Type 10 Key Reserve	21	55	X(55)	Space Reserved for Additional key data required in the future or for other record types.
8	Record Number	76	3	9(03)	Required. Must be > zero. Only one record number "001" is permitted. Record numbers 002-999 are used to report SBI entities.
9	Branch Office	79	2	X(02)	Required Reinsured organization branch office for Record 001. Record 002 or greater must be spaces.
10*	Id Type	81	1	9(01)	Required; must be one of the following: 1 = SSN, 2 = EIN, 5 = BIA Number. (See Exhibit 10-1 for valid combinations)
11*	Id Number	82	9	9(09)	Required; must be one of the following: 1 Social Security Number 2 EIN Number (Numeric, > zero) 5 A valid Bureau of Indian Affairs No. (See Exhibit 10-1 for valid combinations)

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12*	Entity Type	91	1	X(01)	<p>Required; Must be one of the following: I = Individual- Only “L” SBI Records C = Corporation K = Corporation without SBI E = Religious, Charitable, Educational, Associations, Clubs, or Other Tax-Exempt Organizations – No SBI records allowed G = Public Entities, State or Local Government – No SBI records allowed J = Co-Owner/Joint Operators L = Landlord/Tenant – Only used as SBI M = Tobacco Marketing Card (One Entity for a group of people operating under one card) <i>Valid for Cat Coverage Only.</i> N=Enterprise P = Partnership Q = Partnership with less than 2 SBI’s S = Spousal Husband/Wife T = Trusts D = Estates O = Other (Non-US Citizens) B = Bureau of Indian Affairs U = Undivided Interests <i>Valid for Cat Coverage Only.</i> (See Exhibit 10-1 for valid combinations)</p>
13	Producer Last Name	92	20	X(20)	<p>Required if field 18 (Bus. Name) is blank. Left Justify. Use for persons names only Any entry requires a minimum of 2 characters. Only one name per field. Alpha with (-), (.), (), (‘), (,).</p>
14	Producer First Name	112	10	X(10)	<p>Required if field 13 is not blank. Left Justify. Use for persons names only. Only one name per field. For Entity Type of ‘J’ there can be 2 First Names. Alpha with (-), (.), (), (‘), (,).</p>
15	Producer Middle Name	122	10	X(10)	<p>Optional; Left Justify if reported. Alpha with (-), (.), (‘), (,). Leave blank if not reported.</p>
16	Producer Name Suffix	132	5	X(05)	<p>Optional; Left Justify if reported. The name suffix of the producer (e.g. SR, JR, II, etc.). Alphabetic except for (-), (.), () (‘) or (,). Otherwise; spaces.</p>

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17	Producer Title	137	4	X(04)	Optional; Left Justify if reported. The title of the producer (e.g. MR, MRS, DR, etc.). Alphabetic except for (-), (.), () or (“). Otherwise; spaces.
18	Business Name	141	35	X(35)	Required if field 13 is blank. Left Justify. Use for all Entity Types except individual persons. May contain: alpha, number, (-), (.), (), (‘), (&), (.), (%), (*) or (#).
19	Address Line 1	176	35	X(35)	Required. Left Justify.
20	Address Line 2	211	35	X(35)	Optional. Left Justify. Otherwise; spaces.
21	City	246	35	X(35)	Required; If State code = ZZ enter foreign city and country. Left Justify.
22	Address State	281	2	X(02)	Required; Enter Alpha state abbreviation. If a foreign country, enter ZZ.
23	Zip Code	283	5	9(05)	Required if State NE ZZ; Must be a valid US zip code.
24	Zip Extension	288	4	9(04)	Optional. Otherwise; zero fill.
25	Phone Number	292	10	9(10)	Required. If no phone number enter all fives.
26	Employee	302	1	X(01)	Required. For Record Number 001 must be: C = Insurance Provider Employee E = RMA Employee/FCIC R = Relative of Insurance Provider Employee A = Agency Owner, Agent or Adjuster N = None of the Above Optional for Records 002-999 or blank.
27	Ineligible SBI Flag	303	1	X(01)	<i>For SBI records only.</i> Record number must be equal to or greater than 002. Enter Y if SBI Entity is ineligible and share has been reduced. Otherwise, blank.
28	Appendix IV Review Flag	304	2	9(02)	Must be zeros.
29	Ineligible SBI Share	306	4	9(01)V9(03)	<i>Required: For SBI records only with an Ineligible SBI Flag of Y.</i> Must be > 0% and = 1.000. Record number must be = 002. Must be zeros if not applicable.
30	USDA Common Customer ID	310	6	X(06)	Reserved.
31	Filler	316	31	X(31)	Must be Spaces.
32	SSN Validation Flag	347	2	X(02)	Internal Use. Will be populated during SSN edit.
33	Filler	349	202	X(202)	Must be Spaces.

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Field No.	Field Name	Begin Pos.	Size	Picture	Field Edits
34	FCIC Control Time	551	4	9(04)	Internal Use. The time the transaction batch file was received. (From when transmission started) HHMM Format.
35	FCIC Control Date	555	8	9(08)	Internal Use. The date the transaction batch file was received. (From when transmission started) MMDDCCYY Format.
36	Reinsurance Year	563	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
37	Batch Number	567	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the AIP to FCIC/RMA.
38	Transaction Sequence Number	571	8	9(08)	Internal Use. The sequential number assigned to each transaction number processed by DAS <u>after it has been sorted</u> .
39	Transaction Rejected Flag	579	1	X(01)	Internal. Reserved
40	Transaction Source Flag	580	1	X(01)	Internal. Reserved
41	Filler	581	20	X(20)	Internal.

*** Data elements that must be accepted to meet timely reporting of an eligible crop insurance contract.**

Notes:

A 10 record always requires a T-14 record.

Contract number/Policy consists of AIP, Location State, Company, Policy number and Crop year.

If any type 10 record is rejected, then all records for the contract (except the T-09) will be rejected.