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FORM APPROVED OMB NO. 0579-0168

U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE PLANT PROTECTION AND QUARANTINE

APPLICATION FOR CITRUS CANKER LOST PRODUCTION PAYMENT

| 1. NAME OF APPLICANT | 2. ADDRESS OF APPLICAN | IT (Include Zip Code) | 3. TAX ID NO. |
|---|------------------------|--|------------------------------------|
| | | | |
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| | <u> </u> | | |
| 4. NAME AND LOCATION OF AFFECTED GROVE: | | | |
| | | | |
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| | | | |
| | | | |
| | | | |
| 5. DATE PUBLIC ORDER ISSUED BY DIVISION OF PLANT INDUSTRY (DPI): | | 6. DATE(S) ACTUAL DESTRUCTION OF TREES OCCURRED: | |
| , | | (,) | |
| | | | |
| | | | |
| | | | |
| NOTE: When submitting this application, you should provide copies of the DPI public order and its | | | |
| accompanying inventory describing the number and variety of trees subject to the order. | | | |
| accompanying inventory accompany and number and various or allocation and order. | | | |
| 7. VARIETY OF TREES DESTROYED: | | | |
| 7. VARIETY OF TREES SECTIONES. | | | |
| | | | |
| | | | |
| Grapefruit Tangelo | | | |
| □ Volencie succestTourseins □ Lime | | | |
| Valencia orange/Tangerine Lime | | | |
| Early/midseason/naval orange Other/mixed (specify) | | | |
| Carry/midseason/mavai orange Other/mixed (specify) | | | |
| | | | |
| | | | |
| 8. NUMBER AND EXACT ACREAGE (TO 1/10TH OF AN ACRE) OF TREES DESTROYED. (IF MULTIPLE VARIETIES OF TREES WERE SUBJECT TO THE PUBLIC ORDER, PROVIDE THE | | | |
| NUMBER AND ACREAGE OF EACH VARIETY OF TREE DESTROYED). | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 9. WAS THE ASIATIC CITRUS CANKER (ACC) COVERAGE OFFERED UNDER THE FLORIDA FRUIT TREE CROP INSURANCE PILOT AVAILABLE FOR YOUR TREES BEFORE CITRUS CANKER WAS DETECTED IN YOUR GROVE? YES NO | | | |
| CANCER WAS DETECTED IN TOOK GROVE: | | | |
| | | | |
| IF "YES," DID YOU APPLY FOR ACC COVERAGE? | YES | NO | |
| | | | |
| | | | |
| IF "YES," DID YOUR ACC POLICY BECOME EFFECT | VE (ATTACH)? | res No | |
| | | | |
| | | | |
| IF "YES," WHAT WAS THE TOTAL CROP INSURANCE INDEMNITY PAYMENT YOU RECEIVED FOR YOUR DESTROYED TREES? \$ | | | |
| | | | |
| I certify that all statements and entries I have | made on this door | ment are true and accura | te to the hest of my knowledge and |
| I certify that all statements and entries I have made on this document are true and accurate to the best of my knowledge and belief. I understand that any intentional false statement or misrepresentation made on this document is a violation of law and | | | |
| punishable by a fine of not more than \$10,000, or imprisonment of not more than 5 years, or both (18 U.S.C. 1001). | | | |
| punishable by a fine of flot filore than \$10,000 | , or imprisonment o | n not more than 5 years, | or bour (16 0.3.6. 1001). |
| APPLICANT'S SIGNATURE | | | DATE |
| AFFLICAN I 3 SIGNATURE | | | DATE |
| | | | |
| | | | |