

(RECORD 5 OUTPUT FORMAT for DETAIL)

Format/Edits

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1	Incoming Filename	1	20	X(20)	
2	Request Record Type	21	2	9(02)	Required. Must be 05.
3	Reinsurance Year	23	4	9(04)	
4	Approved Insurance Provider	27	2	X(02)	
5	Location State	29	2	9(02)	
6	Policy Issuing Company	31	3	9(03)	
7	Policy Number	34	7	9(07)	
8	Crop Year	41	4	9(04)	
9	Crop Code	45	4	9(04)	
10	Insurance Plan Code	49	2	9(02)	
11	Location County	51	3	9(03)	
12	Record Type	54	4	X(04)	Must be DETL.
13	Compliance Detail Record Number	58	3	9(03)	
14	Program Year	61	4	9(04)	
15	FSN	65	7	9(07)	
16	Tract	72	7	9(07)	
17	CLU	79	4	X(04)	
18	Sub-Field	83	2	X(02)	
19	CLU ID	85	36	9(36)	
20	FSA Crop Code	121	4	X(04)	
21	Crop Name	125	50	X(50)	
22	Crop Type Code	175	3	X(03)	
23	Crop Type Name	178	50	X(50)	
24	Practice Code	228	1	X(01)	
25	Practice Name	229	20	X(20)	
26	Intended Use Code	249	2	X(02)	
27	Intended Use Name	251	20	X(20)	
28	Reported Acres	271	13	9(06)V9(06)	
29	Acreage Reporting Date	284	10	X(10)	
30	Determined Acres	294	13	9(06)V9(06)	
31	Determined Acres Indicator	307	1	X(01)	
32	Determined Acres Date	308	10	X(10)	
33	Field Visit Measurement Indicator	318	1	X(01)	
34	Acreage Official Measurement Code	319	1	X(01)	
35	Acreage Official Measurement Name	320	50	X(50)	
36	Crop Planted Date	370	10	X(10)	
37	Crop Status Code	380	3	X(03)	
38	Crop Status Position 1 Desc	383	50	X(50)	
39	Crop Status Position 2 Desc	433	50	X(50)	
40	Crop Status Position 3 Desc	483	50	X(50)	
41	Land Use Code	533	1	X(01)	

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Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
42	Cotton/Tobacco Acreage Conversion Factor	534	4	X(04)	
43	Cotton/Tobacco Planted Row Count	538	4	X(04)	
44	Cotton/Tobacco Planted Row Dimension	542	4	X(04)	
45	Cotton/Tobacco Row Planted Pattern Count	546	4	X(04)	
46	Cotton/Tobacco Row Skipped Count	550	4	X(04)	
47	Cotton/Tobacco Solid Planting Code	554	1	X(01)	
48	Producer Share Percent	555	6	9V9999	
49	Producer Weighted Share Amount	561	16	9(10)V9(05)	
50	Administrative State	579	2	9(02)	
51	Administrative County	581	3	9(03)	
52	FSA Compliance Info As of Date	584	10	X(10)	