

**(SETTLEMENT/ARBITRATION RECORD – TYPE 25)****Format/Edits**

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1	Record Type	1	2	9(02)	Required. Must be 25.
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)	For Reinsured 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 applicable crop code.
7	Crop Code	21	4	9(04)	Required; Edit with ADM2.
8	Insurance Plan Code	25	2	9(02)	Required; Edit with ADM2.
9	Location County	27	3	9(03)	Required; Edit with FIPS County Table.
10	Unit Number	30	5	9(05)	Required; Must be > zeroes: Unit Number must end in "00" for Enterprise and Whole Farm Units & Crop 0231 (i.e. 00100).
11	Filler	35	6	X(06)	Must be spaces.
12	Coverage Flag	41	1	X(01)	Required; Must be: C = Catastrophic 'Cat' Coverage A = Additional Coverage For CRC, GRIP and Revenue Assurance must be "A".
13	Claim Number	42	8	9(08)	Must match Loss Total Claim Number on the Type 20 record.
14	Type 25 Key Reserve	50	26	X(26)	Space Reserved for Additional key data required in the future or for other record types.
15	Record Number	76	3	9(03)	Must be > zero and unique within a Crop Policy Claim (Location State/Location County/Crop).
16	Settlement Amount	79	10	9(10)	Required; The total of all Type 25 Settlement fields for a given claim number must equal the sum of the Total fields for the corresponding Type 20 record(s). RSD approval required prior to acceptance.
17	Settlement Flag	89	1	X(01)	Values: A = Settlement by Arbitration M = Settlement by Mediation L = Settlement by Litigation O = Settlement by Legal Action
18	Filler	90	445	X(445)	Must be spaces.
19	CR Number	535	8	X(08)	Internal Use. The change request number approving the settlement.
20	RSD Approval Date	543	8	9(08)	Internal Use. The date the Reinsurance Services Division approved the settlement. MMDDCCYY Format.

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Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
21	FCIC Control Time	551	4	9(04)	Internal Use. The time the transaction batch file was received. (From when transmission started) HHMM Format.
22	FCIC Control Date	555	8	9(08)	Internal Use. The date the transaction batch file was received. (From when transmission started) MMDDCCYY Format.
23	Reinsurance Year	563	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
24	Batch Number	567	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the RO to FCIC/RMA.
25	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> .
26	Transaction Rejected Flag	579	1	X(01)	Internal Use. Reserved.
27	Transaction Source Flag	580	1	X(01)	Internal Use. Reserved.
28	Filler	581	20	X(20)	Internal Use.