Example of AD-245, Page 1

A Description

The following is a description of data on AD-245, page 1.

Note: See subparagraph B for an example of AD-245, page 1.

Item	Description
ST. & CO. & C/D	The State, county, and check digit code are selected and printed by the system based on the County Office selected.
Control No.	The control number is assigned and printed by the system when AD-245 is created. The control number contains FY as the first 2 digits and a sequential number as the next 4 digits.
Farm No., Tract No., Name and Address, and Telephone No.	The farm number must be on the farm maintenance file and the tract must be associated with the farm. Name, address, and telephone number are obtained and printed by the system from the name and address file. Note: If AD-245 is for P-A, the P-A number will be in the
	"Farm No." field and the "Tract No." field will be blank.
Farmland and Cropland	The farmland and cropland acres are obtained and printed by the system from the farm maintenance file.
Program Code	Program must be eligible on the County Eligibility Table. See Part 2. The program code is printed based on the code entered for AD-245.
Fund Code	Fund code must be eligible on the County Eligibility Table. See Part 2. The fund code is printed based on the code entered for AD-245. Fund code is only applicable for ACP.

Item	Description
Contract/LTA & Item No.	If the program code is ACP-LTA, ACP-ELT, or CRP, a contract or agreement number must be entered. The number is printed based on the contract or agreement number entered for AD-245. Contract approval must have been recorded according to Part 8, Section 3, except for CRP. An item number is not printed by the system. County Offices can manually enter the item number from CPO.
Primary Purpose	Primary purpose for the practice is printed based on the code entered for AD-245.
Other Farms	"Y" is checked if producer has other farms in this county or other counties. If this is the producers only farm, "N" is checked.
Description of Practice Objective	The descriptive narrative of the practice objective is printed based on the entry made for AD-245. Description can be no more than 100 characters.
Practice Location	The descriptive narrative of the practice location is printed based on the entry made for AD-245. Description can be no more than 50 characters.
Column A	This agency's practice code is printed on the first line and up to 6 component codes are printed on the second through seventh lines. This agency's practice and component codes must be eligible on the County Eligibility Table. See Part 2. If the technician adds a component at needs determination on AD-862, manually add the component to the original AD-245, page 1, and enter in the system according to Part 5, Section 2.

Item	Description
Column B	This agency's practice title is printed on the first line and up to 6 component titles are printed on the second through seventh lines. Titles must match codes entered in column A as applicable on the County Eligibility Table. If the technician adds a component at needs determination on AD-862, manually add the component to the original AD-245, page 1, and enter in the system according to Part 5, Section 2.
Column C	The extent requested is an estimate provided by the producer and printed by practice and component based on extent entered for AD-245. Ensure the extents are in the units displayed for the practice and components.
Column D	COC shall manually enter the extent to be approved for the practice and each component. This column is to be completed with COC issued final approval. This amount is entered in the system according to Part 5, Section 4.
Column E	The rate or C/S level for each component is printed by the system based on what was entered for the component on the County Eligibility Table. See Part 2. If a rate and C/S level are entered on the County Eligibility Table for a component, the rate is printed in this column.
Column F	COC shall manually enter the C/S amount approved for the practice and each component. On the first line, enter the total amount approved for the practice. On the second through seventh lines, enter the amount approved for each component. The total for the components must equal the practice line amount. Amounts must be in whole dollars. This column is completed when COC issues final approval. This amount is entered in the system according to Part 5, Section 4.

Item	Description
I Plan to Start the Practice (Practice to Begin Date)	The date the practice will be started is provided by the producer and is printed based on the date entered for AD-245. The date must be in MMDDCCYY format.
I Plan to Complete the Practice (Practice Completion Date)	The date the practice will be completed is provided by the producer and is printed based on the date entered for AD-245. The date must be in MMDDCCYY format.
Conservation Plan	"Y" or "N" is checked if the producer indicates that the farm has a plan developed. "Y" or "N" will be checked in 1 or more of the plans ("For Farm by NRCS", "Forest Management Plan by FS", or "Other") and printed based on entry for AD-245. One plan must be checked "Y" if program is LTA.
Partnership or Joint Venture	"Y" shall be checked if a partnership or joint venture will receive C/S payments for AD-245. "Y" or "N" is checked based on entry for AD-245. See applicable person determination handbook.
Applicants Request and Signature	When all initial data are entered in the system, print AD-245, page 1 and obtain the producer's signature and date for the request. If request was informally accepted in person or by telephone, the person who accepted the request shall enter the date the informal request was accepted and initial the entry. For informal requests, the producer's signature must be obtained as soon as possible. Ensure that the producer reviews the applicants request statement before signing.

Item	Description
Estimated C/S Value	The estimated C/S value is printed based on the requested amount in column C and the rate or C/S level in column E. This is the amount entered for AD-245. This amount must be present before COC makes a willing to approve determination for the practice. If a component is added in columns A and B by the technician, manually mark through the original estimated C/S amount and enter a new estimated C/S amount. The estimated C/S amount will be used to compute figures on the Report to COC on Applications Pending Approval for ACP-ANA.
C/S Willing to Approve	COC shall manually enter the amount they are willing to approve and initial and date. This information is required to refer a practice to a technical service provider for needs determination data. AD-862 for ANA's cannot be created unless COC is willing to refer a practice for needs determination data to a technical service provider. See 1-ACP for criteria for COC willing to approve determination.
Final Approval for COC	A member of COC must sign and date to issue final approval. This is approval for the amounts that COC manually entered in columns D and F.
Practice Expiration Date	COC shall manually enter a date that the practice must be completed and reported. This date must be after COC approval date.
Remarks	COC shall manually enter the referral expires date and any other pertinent information for the request in the remarks section.

B Example

The following is an example of AD-245, page 1.

Note: See subparagraph A for a description of the data on AD-245, page 1.

Page 1						OH BHO	DRM APPROVED D. 0560-0082
A0-245 (09-11-95)	U.S. DEPARTMENT OF REQUEST FOR CO			ST. 4	CO. & C/D 069 0		D.(F/Y & NO.) 0002
(AD-2 45 replaces	ACP-245 and SIP-245)						
2519 JOHNNY RR 2 B	IND ADDRESS ' SMITH IOX 353	!	MLAND PRO 187.0 CO	GRAM ! FUND DE ! CODE	CONTRACT		POSE !FARMS !/X/YE
931	, LA 71070-9459	i GRU	96.2 !	-ANA 00		EROS	I/ /H
DESCRIPTION OF PR	ACTICE OBJECTIVE AUSED BY UNEVEN DISTRIBUTION	OF GRAZING					
FOR USE BY THE AP	PROVING OFFICIAL	v=					
	ractice Title		Extent Requested	Extent Approved	Rate	C/S Approved	! I plan to ! start the ! practice
SL6 Grazing EW EARTH WO PL6 PIPELINE FN4 FENCING	land protection (AS/No)	CY FT ROD A C <i>RE</i>	90.0 1500.0 125.0 10.0	80.0 1450.0 130.0 10.0	1.000 6.500 12.500	445	06-01-95 I plan to
		· · · · ·		!			! complete th ! <u>practice</u> ! 10-15-95
CONSERVATION PLAN		Forest Plan By FS	Other P	lan	! PARTNERS	SHIP //	Yes /X/No
	/X/Yes / /No	/ /Yes /X/No	/ /Yes /	X/No			
APPLICANTS REQUEST		/ /Yes /X/No	/ /Yes //		! Joint V	enture //	Yes /X/Nq
I request cost-shi without Federal co paid to me as det approved practice and the new owner its lifespan. I		gram to meet the objective g is approved for the prais cical, if, before expirat ish control or title to tl does not agree in writing actice. and excert for EC	e described al tice request ion of the spi he land on whi to properly requests. I	bove. This ped, I agree to ecified practich the appromaintain the understand to	! Joint Vi practice w to refund : ice lifes ved practice practice	enture // ould not be all or part pan I, (a) d ice has been for the rem begin the pr	yes /X/Nq performed of the funds estroy the established ainder of actice before
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2 Example of Recording a Final Payment on AD-245, Page 2

A Description

The following is a description of data when recording a final payment on AD-245, page 2.

Note: See subparagraph B for an example of AD-245, page 2 with a final payment recorded.

Item	Description
	Most of the entries in regular type are printed by the system based on data previously recorded for AD-245, page 1 and AD-245, page 2, if a partial payment was previously recorded.
Expiration Notice	This date is printed based on the date entered from AD-245, page 1. This is the date by which the practice must be completed and performance reported.
ID	The producer's ID number is printed based on the first producer entered for AD-245, page 1. The ID number is obtained from the name and address file.
Column G	This column is completed when the practice or component is completed. Manually enter the extent performed. The producer enters the following:
	performance amount
	"Yes", if the extent performed shall be obtained from the technical service provider.
Column H	This column is completed when payment is issued for final performance. COC shall manually enter C/S earned amount for the practice and each component.
	On the first line, enter the total amount earned for the entire practice, which is the total of the amount earned for each component that is cost-shared on, including previous amounts paid for partial payments.
	On the second through seventh lines, enter the amount earned for each component.
	The total for the components must equal the practice line amount.

2 Example of Recording a Final Payment on AD-245, Page 2 (Continued)

Item	Description
Component Code Footnotes	These footnotes are printed based on the rate, C/S level, or both for the component entered on the County Eligibility Table.
Approval Issued by Approving Official	COC's representative shall sign and date when AD-245, page 2 is sent to the producer to inform of final approval or inform of additional components to be completed after a partial payment has been issued.
Instructions to Participant	When performance is reported, the participant shall read this section and answer items X and Y.
Certification by Participant	When performance is reported, the participant shall read this section and sign and date when making application for payment of the practice.
Lifespan years	The lifespan years are printed based on the lifespan date entered on the County Eligibility Table for the practice, except CRP practices.
	For CRP practices:
	 the lifespan is to the end of the contract or easement period manually enter the lifespan years.
Total Cost-Shares Earned	Manually enter the total C/S earned from column H. This is the total C/S earned amount for the entire practice including previous partial payment amounts.
Payment Advance (Partial Payment)	Manually enter the amount that was issued for partial payment from column H on a previous AD-245, page 2 for the same control number.

2 Example of Recording a Final Payment on AD-245, Page 2 (Continued)

Item	Description
Is Partic. on FSA Debt Reg.? Y // N //	For use with NRCS administered programs only. If NRCS provides AD-245, page 2 for a participant in 1 of NRCS' C/S programs, and requests certification as to whether that participant is listed on this agency's debt record, check FSA-604 or other debt record used.
	If the participant is:
	 on this agency's debt record, check the "Y" block not on this agency's debt record, check the "N" block.
	Initial and date the certification and return AD-245 to NRCS.
Setoff	Manually enter the amount of setoff.
Debt Assignment	Manually enter the amount of the assignment and the name of the person receiving the assigned payment.
Net Payment	Manually enter the amount that the producer will be issued for payment. This is the partial payment amount, setoff amount, and debt assignment amount, subtracted from the total C/S' earned amount.
Payment Approved	COC, or representative, must review AD-245, page 2 and any applicable invoices to ensure that payment calculations are correct and review payment information to ensure that producer data, program data, and C/S earned amount are correct. After all applicable documents are verified, COC, or representative, shall initial and date. This must be completed before payment is mailed to the producer.
Check Number	Enter payment number for all producers. If additional room is needed, attach a separate sheet of paper to AD-245, page 2.

2 Example of Recording a Final Payment on AD-245, Page 2 (Continued)

B Example

The following is an example of AD-245, page 2 for a final payment.

Note: See subparagraph A for a description of data on AD-245, page 2 for a final payment.

AD-245 (09-11-		U.S. DEP	ARTMENT OF AGRICULTURE	ATTON		\$7.	& CO. & C/O ! 2 069 0 !	CONTROL NO. (F/Y & NO.)
	 5 replaces ACF-24			H11Um			1 007 0 .		2
****	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15 5							
FARH NO 2519 TRACT N 931	9 JOHNNY SMITH RR 2 BOX 353 No. SALINE, LA 7 1	H 3 71070-9459	FARMLAND 187.0 CROPLAND 96.2	CODE		NTRACT/LTA ITEM NO.		by 09-1	must be and reported
Yaur pr	Telephone No		to perform the practice	chaun helau	ie approve	K for the	farm identifi		
not to	equest for progra perform this pro g at once.	actice, or if y	ou cannot complete it by	the expirati	ion date, pi	lease noti	ify the Approv	ing Official	's office in
DESCRIP	PTION OF PRACTICE	E G8JECTIVE							
			RIBUTION OF GRAZING						
FUK Arr	PROVING OFFICIAL	USE		! Extent !	- Sutant		Cest-Shares		! Cost-Share
Number A	Practice	e Title		! Requested !	: Extent ! Approved ! ! D!	! Rate !	Approved	: Extent ! Performed ! G	! Earned
SL6 EW PL6 FN4	Grazing land P EARTH WORK PIPELINE 6" AN FENCING 4 STRA	protection (AS/) ND FIXTURES AND WIRE	Ng) Cy FT Rod	80.0 1500.0 125.0 10.0	80,0 1450.0 130.0	1.000 6.500 12.500	2450* 1450 845 125	1450.0 130.0	2305-2150- 1450 700
SM3	SEED HIXTURE #	i3 (NATURE)	ACRE	.5	.5	60X	30	.6	30
* EN FN4	- 60% of cos - Flat rate. CTIONS TO PARTICI	st mot to exceed	For Practice, Component d rate in column E.	PL6 SH3	- 60% of - 60% of - 80% of	f cost mot f cost mot	t to exceed rate to exceed amo	ount in colu	nen F.
FN4 INSTRUC earned and Y b	- 60% of cos - Flat rate, CTIONS TO PARTICI on this practice	st mot to exceed IPANI To receive, report perfor sign the certific	d rate in column E. ve payment or credit for mance in col. G and comp ication below; and file w	PL6 SM3 any cost-sha	- 60% of - 60% of ares! APPROV X ! (FOR S	f cost mot f cost mot	t to exceed rate to exceed amo	ount in colu	E. Nn F. DATE 7/21/99
FN4 INSTRUC earned and Y b office X. Gid form	- 60% of cos - Flat rate. CTIOMS TO PARTICI on this practice below; date and s by the date note you bear all the king this practic	st not to exceed IPANI To receive, report perfore sign the certified in EXPIRATION e expense (exception of the certified in EXPIRATION of the certified i	d rate in column E. ve payment or credit for rmance in col. G and comp ication below; and file w NOTICE. por for program cost-shari port name(s) and address(any cost-shaplete ITEMS X with the issu	ares! APPROV X (FOR S	f cost not f cost not VAL ISSUES SIP) APPRO	t to exceed rate to exceed amo	ount in colu	Nn F.
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