## **Instructions For KC-334**

## PRELIMINARY/FINAL DISCHARGE/DELIVERY SURVEY SUMMARY (FOR CCC-CONTRACTED SURVEYS)

Form used by CCC-contracted surveyors to provide preliminary or final cargo survey information.

Submit the preliminary form by e-mail (<u>tony.holland@kcc.usda.gov</u>) to the appropriate FSA servicing office and the final form with the survey report to the appropriate FSA servicing office. For questions or assistance, contact Tony Holland, International Procurement Division, Procurement Support Branch, Kansas City Commodity Office, 816-926-6577.

Features for transmitting the form electronically are available to those customers with access credentials only. If you would like to establish online access credentials with USDA, follow the instructions provided at the USDA eForms web site.

## Surveyors must complete all applicable items.

Fld Name / Item No.	Instruction
Survey Company Name	Enter your company name.
Name of Subcontractor	Enter your subcontractor's name, if applicable.
Person(s) Who Performed Survey:	Enter the name of the person or persons who performed the survey.
Vessel Name/Voyage Number	Enter the vessel name and voyage number.
CCC Reference Number	Enter the reference number provided by Kansas City Commodity Office.
Destination Country	Enter the destination country.
Discharge Port or Inland Destination	Enter the discharge port or inland destination, as applicable.
Vessel Arrival Date	Enter the date the vessel arrived.
Vessel Discharge	Enter the date the vessel discharge commenced or completed, as applicable.

Fld Name /	Instruction
Item No.	
Commenced/	
Completed	
Delivery to	Enter the date the delivery commenced or completed, as applicable
Final	
Destination	
Commenced/	
Completed	
Destuffing of	Enter the date destuffing of containers commenced or completed.
Containers	
Commenced/	
Completed	
Commodity/	Enter the commodity and pack size.
Pack Size	
Manifested	Enter the manifested units.
Units	
Manifested	Enter the manifested weight in kgs/lbs.
Weight	
(Kgs/lbs)	
Quantity	Enter the number of sound units discharged.
Discharged	
Sound units	
Quantity	Enter the accepted weight of sound units discharged in kgs/lbs.
Discharged	Includes reconstituted/sound.
Sound accepted	
weight in	
Kgs/lbs.	
(includes	
reconstituted/	
sound)	
Torn/Slack/	Enter the number of torn, slack, or leaking units.
Leaking units	
Torn/Slack/	Enter the accepted weight of torn, slack or leaking units in kgs/lbs.
Leaking units	Includes reconstituted/sound.
accepted weight	
in kgs/lbs.	
(includes	
reconstituted/	
sound)	
Torn/Slack/	Enter the weight loss of torn, slack, or leaking units in kgs/lbs.
Leaking units	Includes unfit losses.
weight loss in	
kgs/lbs (includes	

Fld Name / Item No.	Instruction
unfit losses) Discharged	Entar the number of units discharged empty
Empty Units	Enter the number of units discharged empty.
Discharged	Enter the weight loss of discharged empty units in kgs/lbs. Includes
Empty weight	unfit losses.
loss in kgs/lbs	
(includes unfit	
losses)	
Wet Units	Enter the number of wet units.
Wet accepted	Enter the accepted weight of wet units in kgs/lbs. Includes
weight in	reconstituted/sound.
kgs/lbs (includes	
reconstituted/	
sound)	
Wet weight loss	Enter the weight loss of wet units in kgs/lbs. Includes unfit losses.
in kgs/lbs (includes unfit	
losses)	
Infested Units	Enter the number of infested units.
Infested	Enter the accepted weight of infested units in kgs/lbs. Includes
accepted weight	reconstituted/sound.
in kgs/lbs	
(includes	
reconstituted/	
sound)	
Infested weight	Enter the weight loss of infested units in kgs/lbs. Includes unfit losses.
loss in kgs/lbs	
(includes unfit	
losses)	
Moldy Units	Enter the number of moldy units.
Moldy accepted	Enter the accepted weight of moldy units in kgs/lbs. Includes reconstituted/sound.
weight in kgs/lbs (includes	reconstituted/sound.
reconstituted/	
sound)	
Moldy weight	Enter the weight loss of moldy units in kgs/lbs. Includes unfit losses.
loss in kgs/lbs	
(includes unfit	
losses)	
Other Unfit	Enter the number of other unfit units (for example, contaminated,
Units (i.e.,	caked, or stained units).
contaminated/	

Fld Name /	Instruction
Item No.	
caked/stained)	
Other (i.e., contaminated/ caked/stained) accepted weight in kgs/lbs (includes reconstituted/ sound)	Enter the accepted weight of other unfit units in kgs/lbs (for example, contaminated, caked, or stained units). Includes reconstituted/sound.
Other unfit weight losses	Enter the weight loss of other unfit units in kgs/lbs (for example, contaminated, caked, or stained).
(i.e., contaminated/ caked/stained) in kgs/lbs)	
TOTAL QUANTITY DISCHARGED units	Enter the total units discharged.
TOTAL QUANTITY DISCHARGED accepted weight in kgs/lbs (includes reconstituted/ sound)	Enter the total accepted weight in kgs/lbs. Includes reconstituted/sound.
TOTAL QUANTITY DISCHARGED weight loss in kgs/lbs (includes unfit losses)	Enter the total weight loss in kgs/lbs. Includes unfit losses.
Short Landed units	Enter the number of short landed units.
Short Landed weight loss in kgs/lbs (includes unfit losses)	Enter the weight loss of short landed units in kgs/lbs. Includes unfit losses.
Excess Landed units	Enter the number of excess landed units.
Excess Landed	Enter the accepted weight of excess landed units in kgs/lbs. Includes

Fld Name /	Instruction
Item No.	Histruction
accepted weight in kgs/lbs (includes reconstituted/ sound)	reconstituted/sound.
Sound/ recovered Sweepings accepted weight in kgs/lbs (includes reconstituted/ sound)	Enter the accepted weight of sweepings in kgs/lbs. Includes reconstituted/sound.
Additional Comments	Enter any additional comments, as necessary.
Tally Sheets 3 day notice to Vessel or Agent of loss	Check this box if tally sheets are attached to this form.  Check this box if three-day notice to vessel or agent of loss is attached to this form.
Short Landing Certificate	Check this box if short landing certificate is attached to this form.
Unfit Certificates / Lab Analysis	Check this box if unfit certificates or lab analysis are attached to this form.
Confirmation of Attendance	Check this box if confirmation of attendance is attached to this form.
Photographs	Check this box if photographs are attached to this form.
Disposition Documentation	Check this box if disposition documentation is attached to this form and indicate whether disposition is sold, donated, or destroyed/dumped. If no documentation, explain disposition in comments.
Printed Name of Preparer	Print the name of the preparer.
Signature of Preparer	Preparer signs this block.
Date	Date the form is signed.