

AD-1068 (08-07-96)	UNITED STATES DEPARTMENT OF AGRICULTURE Farm Service Agency	1A. STATE NAME	1B. COUNTY NAME
GOOD FAITH DETERMINATION - HIGHLY ERODIBLE LAND ACTIVITY			

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985 as amended and regulations promulgated under the Act (7 CFR Part 12). The information will be used to determine eligibility for program benefits and other financial assistance administered by USDA agencies. Furnishing the requested information is voluntary. However, failure to furnish the correct, complete information may result in a determination of ineligibility for certain program benefits and other financial assistance administered by USDA agencies. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0004. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

PART A - PRODUCER'S REQUEST

2. NAME AND ADDRESS OF PRODUCER (Including Zip Code):	3. TELEPHONE NO. (Including Area Code):	4. IDENTIFICATION NO.	
	5. FARM NO. WITH HELC DETERMINATION	6. CROP YEAR OF DETERMINATION	7. DATE REFERRED TO NRCS (MM-DD-YYYY)

8. Request for a good faith determination. (State the circumstances surrounding the activities on HEL. Include any evidence that the activities were performed in good faith and without intent to violate the highly erodible land (HEL) conservation requirements and not as a scheme or device to avoid compliance.)

9A. PRODUCER'S SIGNATURE	9B. DATE (MM-DD-YYYY)
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Note to producer: If a good faith request is approved by the county committee, eligibility will not be restored if the land is determined to be in violation of the highly erodible land conservation provisions unless an agreement is signed and performed to apply practices according to NRCS requirements. Application for a good faith determination does not preclude the opportunity to exercise appeal rights according to notice given with regard to the HEL determination.

PART B - NRCS INFORMATION

10. Describe any pertinent facts relating to the case that NRCS or the Soil and Water Conservation District has that may affect the COC determination

11A. SIGNATURE OF NRCS EMPLOYEE	11B. DATE (MM-DD-YYYY)
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PART C - PAYMENT REDUCTION INFORMATION FOR SODBUSTER VIOLATIONS (NRCS AND FSA)

(Land that was converted from native vegetation i.e., rangeland or woodland, to crop production after December 23, 1985 (Sodbusted))

Information necessary for determining payment reduction for Sodbusted land

NRCS Data		FSA Data		
12. FIELD NUMBER	13. NRCS ERODIBILITY INDEX	14. SODBUSTED ACRES IN VIOLATION	15. WEIGHED AVERAGE (Item 13 x Item 14)	16. AVERAGE ERODIBILITY (Item 15 divided by Item 14)
TOTALS				

PART C - CONTINUED

17. Circle the Payment Reduction amount, based on information in items 12 through 16.

NOTE: The prorated payment reduction amount for producers who meet good faith requirements shall not be less than \$500 per producer in accordance with the Federal Agriculture improvement and Reform Act of 1996.

GRADUATED PAYMENT REDUCTION TABLE FOR HEIL SODBUSTER VIOLATIONS

SOBUSTED ACRES IN VIOLATION	NRCS ERODIBILITY INDEX		
	8.0-8.9	9.0-14.9	15.0 and over
.1 - 5.0		\$500	
5.1 - 10.0	800	\$800	\$950
10.1 - 15.0	950	1100	1400
15.1 - 20.0	1100	1400	1850
20.1 - 25.0	1250	1700	2300
25.1 - 30.0	1400	2000	2750
30.1 - 35.0	1550	2300	3200
35.1 - 40.0	1700	2600	3650
40.1 - 45.0	1850	3200	4100
45.1 - 50.0	2000	3500	4550
50.1 - 55.0	2150	3800	
55.1 - 60.0	2300	4100	
60.1 - 65.0	2450	4400	
65.1 - 70.0	2600	4700	
70.1 - 75.0	2750		
80.1 - 85.0	2900		
85.1 - 90.0	3050		
90.1 - 95.0	3200		
95.1 - 100.0	3350		
100.1 - 105.0	3500		
105.1 - 110.0	3650		
110.1 - 115.0	3800		
115.1 - 120.0	3950		
120.1 - 125.0	4100		
125.1 - 130.0	4250		
130.1 - 135.0	4400		
135.1 - 140.0	4550		
140.1 - 145.0	4700		
145.1 - 150.0	4850		
150.1 - AND OVER	5000		

PART - D COC DETERMINATION

18. Based on information available, the COC determined that a good faith effort to comply and without intent to violate: a. Was made by the producer. b. Was NOT made by the producer.

19. Reasons for the COC determination (Attach an additional sheet, if necessary.)

20A. SIGNATURE OF COC

20B. DATE (MM-DD-YYYY)

PART E - CONSERVATION PLAN

21. Referred to NRCS because the COC determined good faith. DATE (MM-DD-YYYY):

22. A conservation plan was agreed upon by the producer and signed on. DATE (MM-DD-YYYY):

23A. SIGNATURE OF NRCS EMPLOYEE

23B. DATE (MM-DD-YYYY)

24. DATE RETURNED TO FSA (MM-DD-YYYY)

PART F - MULTI COUNTY INFORMATION

25. AMOUNT WITHHELD FROM EARNED BENEFITS FOR SOBUSTER VIOLATIONS

26. CONTROL COF: STATE COUNTY

27. DATE MAILED TO CONTROL COF (MM-DD-YYYY)

\$