Project 905 OMB No. 0535-0218 Approval Expires 9/30/2008

2006 INTEGRATED SCREENING SURVEY



National

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Information requested on this report will be used to select a sample of growers to obtain agricultural data on resource management practices. Your voluntary cooperation is needed to ensure that all producers are represented in this state and national survey. As always, your response to this survey is **confidential**. Please return your report in the enclosed postage paid envelope. Thank you for your help.

ERS:

- Please make any needed corrections to the name, including the correct operation name, and mailing address on the label.
- 2. During 2006, will this operation **grow crops**, including field crops, fruits, vegetables, nursery/greenhouse, or other specialty crops, cut **hay**, have any livestock or poultry, **sell agricultural products**, **receive government payments** (*CRP*, *WRP*, *etc.*), have more than 19 acres of **idle cropland**, or have more than 99 acres of **pastureland**?

YES - Go to 2006 Total Acres Operated, below.	m on book				
igsqcup NO – Complete items 2a and 2b; then go to Conclusio	III OH DACK.				
2a. Has the operation name on the label been sold, rented	, or turned over to someone else?				
	Will the land be used for any agricultural purpose by you (the individual listed on the label), or anyone else in the next year?				
	YES NO DON'T KNOW Please explain, then go to Conclusion on back page.				
2b. What is the name and address of the new operator?	İ				
Operation Name					
Operator Name					
Address					
City State Zip					
Phone()	 				

SE	ECTION 1 - 2006 TOTAL ACRES OPERATED	(Complete section, then go to 2006 Value of Sales, next page.)
3	Considering the farmstead, all cropland, pastureland, was	teland wetland woodland and government

•	program land, how many Total Acres does this operation	
		ACRES
	a.	901
	b. Rent or Lease from others, including for Cash, Shares or Rent Free?	902
	c. Rent to others, including for Cash, Shares or Rent	905
١.	Total Acres Operated: [item 3a +3b -	900

5.	Of the total [item 4] acres operated, how many acres are considered Cropland? (Include hay land, summer fallow, idle cropland, cropland pasture, and cropland in government programs.)	802

SECTION 5 - 2005 VALUE OF SALES

15. Considering

City:

- ▶ Sales of all crops, livestock, poultry, and livestock products (milk, eggs, etc.) sold in 2005.
 ▶ The value of product removed for all crops, livestock, and poultry produced under contract in 2005.
- ► Sales of all miscellaneous agricultural products in 2005.

State: Zip:_

 ► All government agricultural payments ► Landlord's share of government payment 		old in 2005					
Was the Gross Value of Sales for G	Complete the Record all co	nese items if the 200)5 Gross \	Value of Sales was le	ess than \$1000.)		
\$1,000 or more [Enter code "2" in box 860, and go to <i>Operation Type</i> .]	land uses, ir	cluding I pasture, on	Acres	and poultry that are NOW on this operation	Number		
Between \$1 - \$999 [Enter code "1" in box 860, and complete table.]							
NONE [Enter code " 99 " in box 860, and complete table.]	>						
SECTION 6 - OPERATION TYPE 16. Are the day-to-day decisions for this ope	eration made by o	ne individual,					
a hired manager, or partners? [Check or		,					
One individual - [Go to Conclusion, of the A hired manager - [Go to Conclusion]	n , on back page.]						
Partners – [Complete items 16a and 16b, then go to Conclusion , on back page.] a. How many individuals, including the operator, are involved in the day-to-day decisions for this operation?							
b. Please record partners' names and addresses, then go to Conclusion , on back page. [Enter names and address of partners not already listed. Include partners who jointly operate land and share in decision making. Do not include landlords and tenants as partners.]							
PARTNER 1		PARTNER 2					
Partner name:	 	Partner name:					
Address	 	Address:			····		
City: State:				State:	Zip:		
Phone: ()		Phone: ()_					
PARTNER 3		PARTNER 4					
Partner name:		Partner name:		· · · · · · · · · · · · · · · · · · ·			

City:

State:____

_ Zip:_

4

Phone: ()	Phone: ()

Continue on Back Page

COMMENTS

SECTION	7	CON		ICI	
SECTION.		CUN	ULU		\cup IN

17. Do you (the operator named on the label) n	nake any day to day decisions for another farm or ranch?
☐ YES −Please list the other operations(s)☐ NO − [Continue.]):[Complete a separate questionnaire for each additional operation]
has a Federal Employer Identification Number,	farm operators, please report the operator's Social Security Number. If this operation this would also be helpful. Reporting your SSN and EIN is voluntary. authority of Title 7, Section 2204, of the U.S. Code
OPERATOR'S SSN	FEDERAL EIN
470	466
This completes th	e survey. Thank you for your help.

Reported by:									
OFFICE USE									
R. Unit	Ptr 1 Str	Ptr 2 Str	Ptr 3 Str	Ptr 4 Str		Pasture Points	OPS	SSO 1	ADJ
921	925	926	927	928		869	923	407	922
Response	Respondent	Mode	Enum.	Eval.	MM DD YY	GVS Points		POID	
9901	9902	9903	0098	100	9910	861	789		
					06				

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The time required to complete this information collection is estimated to average 15 minutes per response.