

Instructions for BCAP-22

BIOMASS CROP ASSISTANCE PROGRAM (BCAP) PROJECT AREA ENVIRONMENTAL SCREENING WORKSHEET

Sponsors of a proposed BCAP Project Area use this form to assist FSA in complying with certain environmental laws and regulations including the National Environmental Policy Act and the National Historic Preservation Act.

Submit the original of the completed form as an attachment to the proposed BCAP Project Area Application in hard copy or facsimile to the appropriate USDA servicing office.

Customers who have established electronic access credentials with USDA may electronically transmit this form to the USDA servicing office, provided that (1) the customer submitting the form is the only person required to sign the transaction, or (2) the customer has an approved Power of Attorney (Form FSA-211) on file with USDA to sign for other customers for the program and type of transaction represented by this form.

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.

Sponsors of a proposed BCAP Project Area must complete Items 1 through 16 and Items 20 and 21.

Items 1 - 16

| Fld Name / Item No. | Instruction |
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| 1 Name of the Proposed Project Area | Enter the name of the proposed project area as recorded on BCAP-20 form, block (1B). |
| 2A Name of the BCAP Project Sponsor | Enter the name of the BCAP project sponsor. This may be an individual, producer group, or Biomass Conversion Facility, as specified in applicable business charters. |
| 2B - G Sponsor's Contact Information | If the Sponsor is not an individual or a BCF then one individual of the Sponsor group must enter this information for contact purposes. |
| 3 County of Primary | Enter the county which contains the majority of the proposed BCAP Project Area. |

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| Location | |
| 4 State/County | <p>The State/County Code is assigned by FSA. The State Codes consist of two digits and County Codes consists of three digits.</p> <p>FSA County office and State office are able to provide these Codes.</p> |
| 5 Telephone number | <p>Enter the telephone number for the Sponsor, where the facility can receive telephonic communication from USDA, the general public and eligible material owners.</p> |
| 6 Email address | <p>Enter the email address where the Sponsor can receive electronic communication from USDA, the general public and eligible material owners.</p> |
| 7 A & B Counties to be included in Proposed BCAP Project Area | <p>Enter of all the counties that make up the proposed BCAP Project Area.</p> <p>Note: Include the State and County codes in 7B (see Item 4) for all counties. Please use continuation sheet as necessary.</p> |
| 8 A & B Name of Biomass Facility(ies) | <p>Enter the exact name of the facility(ies) that will receive Biomass from the proposed BCAP Project Area.</p> <p>Note: Include the State and County codes in 8B (see block 4 on this form) for all counties in which the facility(ies) are located.</p> |
| 9 North American Industry Classification System (NAICS) Code | <p>Enter the North American Industry Classification System (NAICS) code. This is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy.</p> <p>NAICS was developed under the auspices of the Office of Management and Budget (OMB), and adopted in 1997 to replace the Standard Industrial Classification (SIC) system.</p> <p>To access the list of 2007 NAICS codes please visit: www.census.gov/eos/www/naics/ or call 1-888-75NAICS.</p> <p>For example, if your facility produces electricity using biomass, the NAICS code will be 221119.</p> |

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| 10A & B Biomass Conversion Production Status | <p>Enter the date that the conversion facility began production or will begin production. Production means the act of manufacturing, from raw biomass materials or intermediary feedstock to a bio-energy or biobased products or advanced biofuel.</p> <p>This production start date should be the date that the facility began or plans to begin operation under the applicable legal authorities from Federal, State, and local government(s) for the production of: heat, power, biobased products, or advanced biofuels.</p> <p>For facilities that are co-generation operations, please record the start date on which the facility began the biomass conversion processes. For example, if the facility is a mill and has added a biomass boiler to generate electricity and steam, please record the date that the conversion process (under legal authority) began operation.</p> <p>Enter the date in the following format: <i>MM/DD/YYYY</i></p> |
| 11 Brief Overview of Facility Business Operations and Biomass Utilization | <p>Enter the items that give an overview of the facility operations and biomass use, such as the facility's production goals and benchmarks, number of employees, governing board and Executive team profile, credit arrangements, existing contracts, financial overview and company milestones.</p> <p>Attachments may also be submitted to supplement the response.</p> |
| 12 Energy/Fuel Produced | <p>Check the best description of the energy and fuel production for the submitting biomass conversion facility(ies) only. Please check all that apply at present.</p> |
| 13 A – D Biomass Material(s) Used | <p>Check the best description of the type(s) of biomass used at the biomass conversion facility(ies). Please check all that apply at present or in cases of start-up operation, please indicate the projected type(s) of biomass to be used.</p> <p>NOTE: Contact the applicable State FSA office for eligible material listings.</p> |

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| 14 A – I Types of Potentially Eligible Crops | Enter all the types of potentially eligible crops that apply within the proposed BCAP project area. For information regarding eligible crop see the eligible crop definition in the BCAP final rule at 7 CFR 1450.2 or contact your State FSA office. |
| 15 Permits Obtained | Check either “YES” or “NO”. If “NO” is checked please explain what permit has not been obtained and the reason why it has not been obtained. |
| 16 Harvesting | Enter the timing (e.g.; harvesting is completed between May 15-June15) and the frequency (e.g.; two times per year). |

Items 17 – 19 are for FSA use only.

Item 20-21

| Fld Name / Item No. | Instruction |
|-------------------------------------|---|
| 20A Print Name of Representative | Enter the first and last name of the representative for the submitting sponsor of the proposed BCAP Project Area that is signing the application. |
| 20B Title | Enter the signing representative’s title that is assigned to the individual by the sponsor or best reflects the signing representative’s role with the sponsor. |
| 20C Signature | Enter the signing representative’s first and last name in cursive. If you are mailing or faxing this form, print the form and manually enter your signature. If this form is approved for electronic transmission and you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office |
| 20D Date | Enter the date on which the representative signed the proposed BCAP Project Area application. Enter the date in the following format: <i>MM/DD/YYYY</i> |
| 21A Name | Enter the first and last name of the person that may be contacted by FSA or the public regarding the proposed BCAP Project Area. |

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| 21B Street Address | Enter the physical location of the primary contact, including the street number, street name, city, state, and zip code. |
| 21C Telephone Number | Enter the telephone number for the primary contact. This telephone number will be the number where the primary contact can receive telephonic communication from USDA and eligible material owners. |
| 21D Email Address | Enter the email address for the primary contact person that can receive electronic communication from USDA. |