

COUNTY AGRICULTURAL PRODUCTION SURVEY - 2015 Small Grains

OMB No. 0535-0002
 Approval Expires: 8/31/2015
 Project Code: 939 QID: 301091
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State	POID	Tract	Subtr.
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1. Please verify name and mailing address of this operation.
 Make corrections (including the correct operation name) on the label and continue.

2. Please answer the following question(s) for the total acres you (name on label) operate.
 - a. Will you grow any crops or cut hay in 2015? **Yes** (Go to Item 3) **No** (Continue)
 - b. Is any of the land in this operation cropland? **Yes** (Go to Item 3) **No** (Continue)
 (Including idle cropland and cropland in government programs such as CRP, etc.)
 - c. In 2015, did you have any whole grains, oilseeds, or hay stored on this operation? **Yes** (Go to Item 3) **No** (Continue)
 - d. Do you have facilities for storing whole grains or oilseeds? **Yes** (Go to Item 3) **No** (Continue)
 - e. Do you own or raise any livestock or poultry? **Yes** (Go to Item 3) **No** (Continue)
 - f. In 2015, did this operation have more than 99 acres of pasture? **Yes** (Go to Item 3) **No** (Go to Section 3)

3. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

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- One individual – (Go to Section 1)
- A hired manager – (Go to Section 1)
- Partners – (Continue)

Number

4. How many individuals are involved in the day-to-day decisions of this operation?

Enter the number of partners, including the partner named on the label.
Partners jointly operate land and share in decision making. Do not include landlords and tenants as partners.

5. Please identify the other person(s) in this partnership, then go to Section 1.
(Verify partners' names and make necessary corrections if names have already been entered.)

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () - _____

Did this partner also operate land individually on June 1, 2015?
 Yes **No**

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () - _____

Did this partner also operate land individually on June 1, 2015?
 Yes **No**

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () - _____

Did this partner also operate land individually on June 1, 2015?
 Yes **No**

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () - _____

Did this partner also operate land individually on June 1, 2015?
 Yes **No**

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Section 1 - Acres Operated

Please report total acres operated under this land arrangement.

1. In 2015, how many acres did this operation:		Acres
a. Own?	+	901
b. Rent or Lease from others or use Rent Free? (Exclude land used on an animal unit month (AUM) basis, BLM and Forest Service land.).	+	902
c. Rent to others?	-	905
2. Calculate item 1a + 1b -1c. Then the total acres operated in 2015 was:	=	900
a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?		
<input type="checkbox"/> Yes (Continue) <input type="checkbox"/> No (Make corrections, then continue)		

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?	Acres
	802

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

OFFICE USE
0060
0055

Section 2 - Crops

For the following small grains crops, please report acres planted for all purposes last fall or this spring, harvested and to be harvested for either grain or seed in the 2015 crop year, and the total production or yield of grain and seed for this operation. (Include cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

1. Oats		Oats
a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.)	Acres	533
b. Acres harvested and to be harvested for either grain or seed ?	Acres	534
c. Total grain and seed production ? (Include landlord's share.)	Bushels	596
or		153
d. Yield per acre of grain and seed harvested?	Bu/Ac	
e. Acres of Oats for all other purposes? (Include hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.)	Acres	599

For Office Use Only: Completion Code for Crops in this Section	
1-Incomplete, has crops listed above	138
2-Incomplete, presence of crops listed above is unknown	
3-Valid Zero	

Section 3 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No."

1. Has the operation named on the label been sold, rented, or turned over to someone else?

Yes (Continue) No **—————>**

2. Was the operator (name on label) operating a farm or ranch on June 1, 2015?

Yes (Continue) No (Continue)

3. What is the name and address of the new operation that has taken over the land?

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock or poultry.

Yes Don't Know No

Regardless of answer to above, write a note to explain the situation, then go to Section 4.

4. Was the (Item 3) new operation in business before June 1, 2015?

Yes (Go to Section 4) No (Continue)

5. Is the (Item 3) new operation managed?

Yes (Go to Section 4) No (Continue)

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2015?

Yes (Go to Section 4) No (Go to Section 4)

Section 4 - Conclusion

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

Yes (Continue) No (Go to Item 2)

a. What is the name of the other operation(s)?

b. Was this additional operation in business before June 1, 2015?

Yes (Continue) No (Continue)

Operation Name: _____
 Address: _____
 City: _____ State: __ ZIP: _____
 Phone: (____) _____

2. **Survey Results:** To receive the complete results of this survey on the release date, go to www.nass.usda.gov/results.

Would you rather have a brief summary mailed to you at a later date? . . . Yes = 1 No = 3

Code
9990

Respondent Name: _____	9911 Phone: (____) _____	9910 MM DD YY Date: _____
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Thank you for your response.

Response	Respondent	Mode	Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est 8-Known Zero	9901 1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902 1-Mail 2-Tel 3-Face-to-Face 4-CATI 5-Web 6-e-mail 7-Fax 8-CAPI 19-Other	9903 9998	9900	9985	9989			
						Optional/NOD Use			
						9907	9908	9906	9916

S/E Name _____