**OMB Control Number:** 0560-0175

**Title of Clearance:** Noninsured Crop Disaster Assistance Program (NAP)

A**gency Form Number affected by Change Worksheet:** CCC-575 – Revised Form.

**Other Changes:** FSA is requesting for an approval on a new version of CCC-575. The proposed form has been revised in the following parts: Part B through E and Part G were cleaned up to make the form more readable and easier to understand. The instruction for the form has also been revised. The second page of the form is being added because it was initially omitted, but there is no change to the average times in completing the form.

There is no changes to the burden hours in the 0560-0175.