#### **Instructions for CCC-577**

# NONINSURED CROP DISASTER ASSISTANCE PROGRAM (NAP) � APPLICATION FOR TRANSFER OF COVERAGE (2015 and Subsequent Crop Years)

Producers use this form to request a transfer of NAP coverage when a change of share or sale of covered crop acreage occurs during the coverage period.

Submit the original of the completed form in hard copy or facsimile to the appropriate FSA servicing office.

## Producers must complete Items 1, 7, and 9 through 12C.

#### Items 1-13

Fld Name/ Item No.	Instructions
1 Crop Year	Enter the crop year of coverage transfer request.
2A County FSA Office Name�	Enter administrative County FSA Office name and address.
2B Telephone No.	Enter administrative county FSA office telephone number (Including Area Code).
3A Transferor� s Name	Enter name of transferor.
3B Transferor� s Address	Enter address of transferor (Include Zip Code).

### PART A No Entry Required Understanding of Transferor and Transferee

4	NO ENTRY REQUIRED � Reasons for transfer. � For use in Item
	7.

Fld Name/ Item No.	Instructions
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PART B - Attach copy of CCC-471 for transferor, copy of producer application summary report, any supporting documentation, and complete items 5 through 10.

5 Name of Crop	Enter the name of each crop selected from transferor s CCC-471, and/or producer application summary report that are being requested for transfer. If all the crops on the transferor CCC-471, and/or producer application summary report are to be transferred, check the box next to ALL Crops on CCC-471. Attach the CCC-471 and the producer application summary report.
6 Effective Date of Transfer for Crop	Enter the effective date of transfer for either all crops or each crop if a different effective date is applicable to various crops. If the effective date of transfer is the same for all crops being transferred, check the box next to Check if effective date is the same for all crops being transferred.
	Example: ❖ Rob Roy filed an application for coverage for green beans. ❖ Roy planted the green beans on April 1 ❖ then gave his crop share interest in the beans to Roy Farms, Inc., via lease or other arrangement on April 15. ❖ The effective date of transfer is the date (April 15) Roy Farms, Inc., acquired Roy ❖s crop share interest in the NAP covered green beans.
7 Reason for	Enter the reason for transfer. Pick one of the stated reasons from Part A, item 4 above or state other reason for transfer if applicable.
Transfer of this crop	<b>Example:</b> Using the example in Item 6, the nature or reason for transfer could be identified as Please or other similar arrangement whereby a person or legal entity succeeds to the crop share interest of the transferor.
8 No Entry Required CCC Action	FSA will approve or disapprove the crops shown in Item 5. If ALL Crops on CCC-471 is checked, FSA Action in this row is for all crops; otherwise, FSA can approve individual crops on lines below.
9 Transferee Name and Address	Enter the name and address of the transferee (Include Zip Code).
10 Percentage Share	For each transferee name entered in number 9, enter the transferor spercentage share interest in the NAP covered crop or crops being transferred to this transferee.

Fld Name/ Item No.	Instructions
Transferred	<b>Note:</b> ❖ The total percentage share interest being transferred from transferor to all transferees <b>must</b> total 100 percent. ❖ Partial
	transfers are not allowed.

# PART C - Have transferor and transferee each read through the statement in Part C.

11A, 11B, &	Transferor will sign for self or in a representative capacity in Item
11C	11A.; leave 11B blank if transferor is signing as self-individual or,
Transferor�s	if signing in a representative capacity, enter representative capacity
Signature	for signature entered in 11A; then enter date of signature in 11C.
12A, 12B, &	Transferee will sign for self or in a representative capacity in Item
12C	12A.; leave 12B blank if transferee is signing as self-individual or,
Transferee <b>�</b> s	if signing in a representative capacity, enter representative capacity
Signature	for signature entered in 12A; then enter date of signature in 12C.

# Part D - NO ENTRY REQUIRED � Action by CCC.

13A and 13B	Enter signature and title of CCC Representative when final action is
Signature and	performed for crop(s) in item 5.
Title of CCC	
Representative	