

CCC-452
(04-14-15)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

1. Crop Year

2. Unit No.

NAP ACTUAL PRODUCTION HISTORY AND APPROVED YIELD RECORD

See Page 2 for Privacy Act and Paperwork Reduction Act Statements.

PART A - GENERAL INFORMATION

3A. Producer(s) Name		3B. Telephone Number (Include Area Code)	3C. Identification Number (Last 4 Digits)
(1)			
(2)			
(3)			
(4)			
(5)			
4. Spotcheck Required? <input type="checkbox"/> YES <input type="checkbox"/> NO	5A. County FSA Office Name	5B. State and County Codes	6. Native Sod Conversion? <input type="checkbox"/> YES <input type="checkbox"/> NO

PART B - UNIT AND CROP IDENTIFICATION

7. Crop Name	8. Crop Type	9. Intended Use	10. FSA Practice ("I" for Irrigated or "N" for Nonirrigated)	11. Planting Period	12. Organic Status <input type="checkbox"/> Conventional <input type="checkbox"/> Transitional <input type="checkbox"/> USDA Certified	13. Unit of Measure
14. Do Yield Limitation Rules Apply? <input type="checkbox"/> YES <input type="checkbox"/> NO	15. County Expected Yield/T-Yield	16. If Applicable, COC Adjusted T-Yield and Reason Code (COC Use Only)				16C. Date of COC Minutes
		16A. Adjusted Yield	16B. Reason Code: (Check One) <input type="checkbox"/> Inconsistent farming/management practices <input type="checkbox"/> Age of stand/trees <input type="checkbox"/> Multiple County T-Yield Variations		<input type="checkbox"/> Topography <input type="checkbox"/> Soil Type <input type="checkbox"/> Elevation	

PART C - ACTUAL PRODUCTION HISTORY

17. APH Crop Year	18. Eligible Disaster?		19. Acres Planted	20. Actual Production	21. Record Type 1/	COC USE ONLY	
	YES	NO				22. Yield	23. Yield Type 2/
	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					
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	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>					

PART D - APPROVED YIELD (COC USE ONLY)

24. Total Yield (Item 22) divided by	25. No. of APH Crop Years (Item 17)	26. Calculated Yield	27. Prior Crop Year Approved Yield	28. Cup Percentage	29. Yield Cup	30. If Item 14 is: A. YES, enter the higher of Item 26 or Item 29 B. NO, enter amount from Item 26
		=	x	=		

1 / RECORD TYPES:

- 1 - Production sold/commercial storage
- 2 - On farm storage, measurement
- 3 - Livestock feeding records
- 4 - Appraisal
- 5 - Other - Identify in Item 31, Remarks

2 / YIELD TYPES:

- A - Actual yield
- B - Bypass Year
- C - Added practice/type/intended use/planting period/unit
- E - 80% of T-yield
- I - 100% of T-yield for new producer of crop
- N - 90% of T-yield
- O - Zero credited yield

- P - 75% of previous year approved yield
- R - Replacement yield
- S - 65% of the T-yield
- T - 100% of the T-yield
- U - Substitute yield
- V - Substitute yield
- Z - Zero acres planted

PART E - REMARKS AND ACTUAL INFORMATION

31. Remarks

NOTE: *The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a – as amended). The authority for requesting the information identified on this form is 7 CFR Part 1437, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Noninsured Crop Disaster Assistance Program (NAP). The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Noninsured Crop Disaster Assistance Program (NAP).*

*According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0175. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.***

PART F - PRODUCER'S CERTIFICATION

I hereby certify that the information included on this form includes a complete and accurate record of actual production history. The actual production history is accurately identified to the unit, crop and crop years shown. I understand that the information on this form may be spot checked and failure to certify accurately may result in a loss of program benefits. Additionally, I direct the purchaser, warehouse operator, ginner, or any person who otherwise stores or purchases crop production identified on this form to disclose those storage or purchase records of the identified crop to USDA representatives for the purpose of verification of production. I understand that the payment yield may be different than the approved yield if the unit acreage increases or plant density changes.

32A. Signature of Producer (By)	32B. Title/Relationship of the Individual Signing in a Representative Capacity	32C. Date (MM-DD-YYYY)
33A. Signature of COC Representative	33B. Date (MM-DD-YYYY)	33C. County FSA Office Name and Address Telephone No. (Include Area Code):

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If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. USDA is an equal opportunity provider and employer.