

<b>WA-561</b> U.S. DEPARTMENT OF AGRICULTURE (10-03-11) Farm Service Agency		<b>LEAVE BLANK – USDA USE ONLY</b>	
<b>ORIGINAL WAREHOUSE EXAMINATION REPORT</b> <b>(Processed Commodities)</b>		A. Reviewed By	B. Date (MM-DD-YYYY)
		1. Type of Storage Dry <input type="checkbox"/> Cooler <input type="checkbox"/> Freezer <input type="checkbox"/>	
<p><b>NOTE:</b> The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 735, 7 CFR Part 1423, the United States Warehouse Act (Pub. L. 106-472), and the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.). The information will be used to enable the warehouse examiner to make observations and comments regarding the eligibility of warehouses to store and handle Commodity Credit Corporation interest commodities. No penalty will be imposed for failure to respond. However, a response is required in order to be considered for a warehouse license (Pub. L. 106-472) or a Commodity Credit Corporation storage agreement, and the decision as to the applicant's eligibility for a license or an agreement must be made in part on the basis of the information provided. 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) and USDA/FSA-3, Consultants File. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to obtain new licensing or retain existing licensing under the United States Warehouse Act and ineligibility to store and handle Commodity Credit Corporation interest commodities.</p> <p>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 0560-0120. The time required to complete this information collection is estimated to average 30 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. The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided.</p> <p>The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. <b>RETURN THIS COMPLETED FORM TO THE KANSAS CITY COMMODITY OFFICE, WAREHOUSE LICENSE AND EXAMINATION DIVISION, STOP 9148, P.O. BOX 419205, KANSAS CITY, MO 64141-6205.</b></p>			
2A. Warehouse Name and Address (Including Zip Code)		3A. Name of Warehouse Manager or Superintendent	
2B. Telephone Number (Area Code)	2C. Fax Number (Area Code)	3B. E-Mail Address	
4. Have you verified applicable items on application form? (If corrections are made on form CCC-560, they must be initialed by the Warehouse Operator and any discrepancies must be explained in detail.) YES <input type="checkbox"/> NO <input type="checkbox"/>			
5A. Does fire protection appear adequate?		5B. If "NO", explain:	
YES <input type="checkbox"/> NO <input type="checkbox"/>			
6A. Did you find evidence of excessive moisture or dryness in warehouse?		6B. If "YES", how are products protected?	
YES <input type="checkbox"/> NO <input type="checkbox"/>			
7A. Is warehouse near a stream or body of water?		7B. If "YES", to what height does water rise on building at highest water mark?	7C. If "YES", give date of last flood (Comment on subsequent protective measures in Item 18).
YES <input type="checkbox"/> NO <input type="checkbox"/>			
8. Comment on Warehouse Operator's experience in storing or handling commodities:			
9. Other activities in warehouse (Include products stored for other than USDA and indicate "field warehouse" operations, if any.):			
		<b>YES</b>	<b>NO</b>
10. Is 1 <sup>st</sup> floor (not basement) above ground level on all sides?			
11. Is the warehouse under control of the warehouse operator at all times?			
12. Does the warehouse appear to be of sound construction and in good condition?			
13. Are facilities adequate for receiving, storing, and delivery?			
14. Are commodities stacked to allow for appropriate housekeeping?			
15. Are sanitation and housekeeping practices satisfactory?			
16. Is a tempering and grading room available (cold storage)?			
17. Do you recommend approval?			
If "NO", to any of Items 10 through 17, explain in Item 18, Remarks or Form WA-101.			
18. Remarks:			
19A. Signature of Warehouse Examiner		19B. Date (MM-DD-YYYY)	

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