

Crops or Livestock Loss Survey

OMB No. 0535-0xxx
 Approval Expires: xx/xx/xxxx
 Project Code: xxx QID: xxxxxx
 SMetaKey: xxxx



**United States
 Department of
 Agriculture**



**NATIONAL
 AGRICULTURAL
 STATISTICS
 SERVICE**

USDA/NASS

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Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347, and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response to this survey is **voluntary**.

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 number is 0535-0xxx. The time required to complete this information collection is estimated to average 10 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.

Crops – Please report for the total acres you operate.

1. Were any of your crops damaged or destroyed in 2018, due to:
- Natural disasters (earthquakes, landslides, volcanic eruption, wildfires, etc.), or
 - Weather conditions (flooding, drought, freezes, hurricanes, etc.)?

xxx Yes – **Continue** No – **Go to Item 5**

2. Which of the following crops were damaged or destroyed in 2018 due to natural disasters or weather conditions? For each applicable crop, report the number of acres or square feet damaged or destroyed.

Crop	N/A	Acres		Square Feet
Floriculture	<input type="checkbox"/>	xxx	OR	xxx
Macadamia Nuts	<input type="checkbox"/>	xxx	OR	xxx
Papaya	<input type="checkbox"/>	xxx	OR	xxx
Taro	<input type="checkbox"/>	xxx	OR	xxx
Vegetables	<input type="checkbox"/>	xxx	OR	xxx
Other, specify:	<input type="checkbox"/>	xxx	OR	xxx

3. Did you replant any of these acres or square feet (reported in Item 2) for harvest in 2018 or 2019?

xxx Yes – **Continue** No – **Go to Item 5**

4. Which of the following crops were replanted for harvest in 2018 or 2019? For each applicable crop, report the number of acres or square feet replanted.

Crop	N/A	Acres		Square Feet
Floriculture	<input type="checkbox"/>	xxx	OR	xxx
Macadamia Nuts	<input type="checkbox"/>	xxx	OR	xxx
Papaya	<input type="checkbox"/>	xxx	OR	xxx
Taro	<input type="checkbox"/>	xxx	OR	xxx
Vegetables	<input type="checkbox"/>	xxx	OR	xxx
Other, specify:	<input type="checkbox"/>	xxx	OR	xxx

Livestock or Poultry – Please report for the total acres you operate:

5. Were any of your livestock or poultry lost in 2018, due to:
- Natural disasters (earthquakes, landslides, volcanic eruption, wildfires, etc.), or
 - Weather conditions (flooding, drought, freezes, hurricanes, etc.)?

xxx Yes – **Continue** No – **Go to Item 7**

Survey Continues on Back →

6. Which of the following livestock or poultry were lost in 2018 due to natural disasters or weather conditions? For each livestock or poultry, report the number of head lost.

Livestock or Poultry	N/A	Number of Head Lost
Cattle	<input type="checkbox"/>	xxx
Sheep	<input type="checkbox"/>	xxx
Goats	<input type="checkbox"/>	xxx
Hogs	<input type="checkbox"/>	xxx
Poultry	<input type="checkbox"/>	xxx
Other, specify:	<input type="checkbox"/>	xxx

Comments:

7. Do you have any additional comments on the effects these natural disasters or weather conditions have had on your operation?

8. **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** 099

Respondent Name:	9911 Phone:	9910 MM DD YY Date:
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OFFICE USE ONLY

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 098	100	785	789			
				R. Unit		Optional Use			
				921		407	408	9906	9916
S/E Name									