**Exhibit 5**

**(Par. XXX, XXX)**

**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application +**

**A Completing FSA-894**

Applicant should complete an FSA-894 in the administrative county office for all eligible crops affected by hurricanes, floods, snowstorms, tornadoes, typhoons, volcanic activity and/or wildfires.

Follow this table to complete a manual FSA-894.

|  |  |
| --- | --- |
| **Item** | **Instructions** |
| 1 | Enter crop year. |
| 2 | Enter producer’s name. |
| 3 | Enter producer’s address |
| 4A | Enter administrative State and FSA code. |
| 4B | Enter administrative county and FSA code. |
| ***Part A Notice of Loss***  Fields 5 through 9 will be completed for crops, trees, bushes, and vines based on the coverage level elected by the producer for the crop. Data for:   * insured crops will come from RMA. * crops with NAP coverage will come from the approved CCC-576 Notice Loss and Application for Payment. * uninsured crops will come from the producer.   **Note:** If a CCC-576 has not been approved yet, the producer will have to provide the data.  **Important:** If a crop was affected by multiple events only document the crop under one event. The producer can record the other events that affected that crop in remarks section.  If additional disaster events and/or crop lines are needed use the FSA-894 continuation. | |
| 5 | Enter disaster event(s) that caused the loss (example, Wildfire, Hurricane, Tornadoes). |
| 6 | Enter the beginning and ending dates of the disaster event(s) specified in item 5. |
| 7A | Enter name of each crop affected by the disaster event(s) in item 5. |
| 7B | Enter crop type of each crop indicated on FSA-578 that was affected by the disaster event(s) in item 5. |
| 7C | Enter intended use for the crop at the time of planting indicated on the FSA-578. |
| 7D | Enter the practice; “**I**” for irrigated and “**N**” for nonirrigated according to FSA-578. |
| 7E | Enter the numeric planting period associated with the crop. (example, “01”, “02”) |
| 8 | Select one of the following: “Insured”, “NAP Coverage”, or “Uninsured” for the crop in item 7A affected by the disaster event(s) in item 5. |
| 9 | Select one of the following: “Crop Loss”, “Prevent(s)ed Planting”, and/or “Trees, Bushes & Vines” if it applies to the crop in item 7A affected by the disaster event(s) in item 5.  **Note:** Prevented planting will require Part B to be completed. |
| 10 | Select “Approved” or “Disapproved” based on COC determination for the crop in item 7A affected by the disaster event(s) in item 5. |

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**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**A Completing FSA-894 (Continued)**

|  |  |
| --- | --- |
| **Item** | **Instructions** |
| ***Part B – Record of Management for Prevented Planting Crops***  Items 11 through 14 are not required to be completed if an approved CCC-576 for the crop has previously been filed.  **Note:**  The producer is required to complete items 11 through 14 for insured and uninsured prevented planting crops. | |
| 11A | Enter the name of the crop with a prevented planting loss. |
| 11B | Enter the crop type or variety for the crop with a prevented planting loss. |
| 11C | Enter the intended use for the crop with a prevented planting loss. |
| 11D | Enter the practice; “I” for irrigated and “N” for nonirrigated. |
| 11E | Enter the numeric planting period associated with the crop in item 11A. |
| 12 | For crop entered in item 11A, producer must explain the purchase, delivery, or arrangement for seed, chemicals, fertilizer, and land preparation measures taken.  **Note:** Attach copies of receipts for COC verification of intended prevented planting acreage. |
| 13 | Producer must describe cultivation practices for expected crop production, before and after date of damage, on affected crop acreage, such as fertilizer amounts, cultivation, seeding rate and variety, pesticides, herbicide amounts, irrigation measures etc. |
| 14A | Producer must describe what has been done with the prevented planted acreage. |
| 14B | Enter the final planting date. |

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**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**A Completing FSA-894 (Continued)**

|  |  |
| --- | --- |
| **Item** | **Instructions** |
| ***Part C – Pay Grouping Information***  Items 15 through 25 must be completed to be eligible to receive WHIP+ benefits. Applicants must complete a separate FSA- 894, Parts C through G, as applicable, for each different crop pay grouping affected by the disaster event(s) in Part A.  **Note:** If additional pages are needed use FSA-894 Continuation. | |
| 15 | Enter producer’s name. |
| 16 | Enter one of the following applicable coverage types for the crop pay grouping information:   * Insured * NAP Coverage * Uninsured |
| 17 | Enter the administrative State and FSA code. |
| 18 | Enter the administrative county and FSA Code. |
| 19 | For insured crops, enter the physical State and FSA code for the crop affected by the disaster event(s). If the physical State and FSA code is the same as the administrative state, select the “Same as Administrative” check box.  **Note:** For NAP and uninsured crops, leave this item blank. |
| 20 | For insured crops, enter the physical county and FSA code for the crop affected by the disaster event(s). If the physical county and FSA code is the same as the administrative county, select the “Same as Administrative” check box.  **Note:** For NAP and uninsured crops, leave this item blank. |
| 21 | Enter the crop year for the crop(s), trees, bushes or vines that was affected by the disaster event(s) in item 5. |
| 22 | Enter the unit number. |
| 23 | Enter pay crop code found in one of the following.   * 1-NAP (Rev.2), Exhibit 14, for NAP and uninsured crops. * NCT, for insured crops.   **Note:** Trees, bushes and Vines use the same codes as the crop. |
| 24 | Enter pay type code found in one of the following.   * 1-NAP (Rev.2), Exhibit 14, for NAP and uninsured crops. * NCT, for insured crops.   **Note:** Trees, bushes and Vines use the same codes as the crop. |
| 25 | Enter planting period  **Exception:** If crop, trees, bushes or vines are insured, the planting period will always be “01” |

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**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**A Completing FSA-894 (Continued)**

|  |  |  |
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| **Item** | **Instructions** | |
| ***Part D – Production Information***  Items 26 through 38 will be completed for crops based on the type of coverage selection made in Item 16.   * Insured data will come from RMA. * NAP and uninsured data will come from the approved CCC-576 and/or NCT. | | |
| 26 | Enter the crop affected by disaster event(s) in Part A | |
| 27 | Enter the crop type or variety as indicated in Part A. | |
| 28 | Enter crushing district, if applicable | |
| 29 | Enter intended use at planting/beginning of crop year for crop in item 26 indicated in Part A. | |
| 30 | Enter the practice; “**I**” for irrigated and “**N**” for nonirrigated indicated in Part A. | |
| 31 | Enter the organic status code according to the FSA-578.  **Examples**: “C”, conventional  “OC”, USDA certified  “OT”, transitional. | |
| 32 | Enter whether the crop is planted on native sod as indicated on the FSA-578. | |
| 33 | Enter all acres associated with the crop type/variety, practice, intended use, and stage for the unit entered in item 22. | |
| 34 | Enter producer share. | |
| 35 | Enter applicable stage abbreviations.  **Example:** “H”, harvested acreage  “UH”, unharvested acreages or put another use with consent.  “PP”, prevent(s)(s)ed planting acres | |
| 36 | Enter the unit of measure for the crop, crop type, and intended use.  (such as pounds, bushels, cwt., or tons. etc.) | |
| 37 | Enter the production for the unit entered in item 21 for:   * insured crops from the RMA download/information report * NAP crops from the CCC-576 * uninsured crops from the producer | |
| 38 | Enter approved yield from the FSA-893.  ***Field is for Select Crops Only.*** | |
| 39 | Enter amount of production determined by COC.  **Note:** Assigned or adjusted production must be entered in the unit of measure  recorded in item 36 | |
| **If the COC** | **then enter the letter** |
| Assigns the production | (A) next to the number. |
| Adjusts the production | (O) next to the number. |
| 40 | Enter value of secondary use and/or salvage value as determined by COC. | |

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**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**A Completing FSA-894 (Continued)**

|  |  |  |
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| **Item** | **Instructions** | |
| ***Part E – Value Loss Crops***  Items 41 through 47 will be completed for crops based on the selection made in Item 16.   * Insured data will come from RMA. * NAP data will come from the approved CCC-576 and NCT. * Uninsured data will come from the NCT. | | |
| 41 | | Enter the crop affected by disaster event(s) in Part A. |
| 42 | | Enter crop type or variety as indicated in Part A. |
| 43 | | Enter producer’s share. |
| 44 | | Enter dollar value of the inventory, as applicable, immediately before the disaster event(s). |
| 45 | | Enter dollar value of the inventory, as applicable, immediately after the disaster event(s). Determine the dollar value from the loss adjuster’s report or acceptable and verifiable record of post disaster inventory. |
| 46 | | Enter applicable determined dollar value for losses stemming from ineligible causes of loss, as determined by COC. |
| 47 | | Enter total dollar value received for crops sold as salvage. |
| ***Part F – Trees, Bushes, and Vines***  Items 48 through 59 will be completed based on the selection made in item 16.   * Insured data will come from RMA. * Uninsured data will come from the producer. | | |
| 48 | | Enter the crop affected by disaster event(s) in Part A. |
| 49 | | Enter the crop type or variety as indicated in Part A. |
| 50 | | Enter all acres associated with the crop type/variety for the entire unit. |
| 51 | | Enter producer’s share. |
| 52 | | The tree stages are the age groupings for the trees, bushes, or vines.  ***Note: This field is automatically completed.*** |
| 53 | | Enter the total number of trees, bushes or vines for the tree stage before the disaster event(s) in item A.  **Note:** Total of items 54 and 55 cannot exceed item 53 |
| 54 | | Enter the number of *destroyed* trees, bushes, or vines by the disaster event(s) in Part A, for each tree stage affected. |
| 55 | | Enter the number of *damaged* trees, bushes, or vines by the disaster event(s) in Part A, for each tree stage affected. |
| 56 | | Enter the adjusted number of trees, bushes, or vines in the tree stage that was determined by the COC. |

**Exhibit 5**

**(Par. XXX, XXX)**

**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**A Completing FSA-894 (Continued)**

|  |  |
| --- | --- |
| **Item** | **Instructions** |
| ***Part F – Trees, Bushes, and Vines (Continued)*** | |
| 57 | Enter the adjusted number of destroyed trees, bushes or vines determined by the COC. |
| 58 | Enter the adjusted number of damaged trees, bushes, or vines determined by the COC. |
| 59 | Enter the total dollar value received for trees, bushes or vines as salvage, determined by COC. |
| ***Part G – COC Approval or Disapproval of Pay Grouping*** | |
| 60 | COC will indicate in the check boxes provided whether the pay grouping information and the crop, value loss or tree, bushes, or vines on each page 2 is approved or disapproved.  **Note:** Required to be completed for each additional pay grouping recorded. |
| ***Part H – Producer Certification*** | |
| 61 | Enter any additional remarks. |
| 62A | Producer applying for WHIP+ benefits must sign. |
| 62B | Enter title and/or relationship of the individual signing in a representative capacity.  **Notes:** If the producer signing is not signing in representative capacity, this field should be left blank. |
| 62C | Enter date signed. |
| ***Part I – COC Signature***  When the COC representative signs and dates items 63A and 63B they are signing to all approvals and disapprovals made throughout the entire FSA-894 | |
| 63A | COC or their Representative’s signature. |
| 63B | Date COC or their Representative signs the FSA-894. |

**Exhibit 5**

**(Par. XXX, XXX)**

**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**B Example of a Completed FSA-894 for a Production Loss**

**Exhibit 5**

**(Par. XXX, XXX)**

**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**C Example of a Completed FSA-894 for a Value Loss**

**Exhibit 5**

**(Par. XXX, XXX)**

**\*-- Instructions for Completing FSA-894, Wildfire and Hurricane Indemnity Program Application+**

**D Example of a Completed FSA-894 for a Trees, Bushes and Vines**