

## Instructions For FSA-898

### ***Quality Loss Adjustment Program Application***

This form will be used for applicants to apply for QLA Program Benefits.

Customers who have established electronic access credentials with USDA may electronically transmit this form to the USDA servicing office, provided that (1) the customer submitting the form is the only person required to sign the transaction, or (2) the customer has an approved Power of Attorney (Form FSA-211) on file with USDA to sign for other customers for the program and type of transaction represented by this form.

Features for transmitting the form electronically are available to those customers with access credentials only. If you would like to establish online access credentials with USDA, follow the instructions provided at the USDA eForms website <https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home>.

***Producers must complete Items 5 through 17B, items 22 through 34, items 38 through 48, items 52A through 52C,***

*FSA employees will complete fields noted as “COC Use Only”.*

<b>Fld Name / Item No.</b>	<b>Instruction</b>
1 Recording State Name/Code <b>(COC Use Only)</b>	Enter the producer’s recording state.
2 Recording County Name/Code <b>(COC Use Only)</b>	Enter the producer’s recording county.
3 Crop Year <b>(COC Use Only)</b>	Enter the applicable crop year that suffered a quality loss.
4 Application No. <b>(COC Use Only)</b>	Application Number will be assigned by the automated system.

<b>Fld Name / Item No.</b>	<b>Instruction</b>
Part A Producer Agreement	<p>For Informational Purposes</p> <p>Applicants who are an individual person must complete automated CCC-902 or manual CCC-902I or CCC-902 Short Form,</p> <p>Applicants who are a legal entity, including General Partnership or Joint Venture, must complete automated CCC-902 or manual CCC-902E and CCC-901 (if applicable).</p>

***Part B – Producer Information***

5 Producer’s Name and Address (City, State, and Zip Code) and Phone Number (Include Area Code)	Enter the producer’s name and address, including the zip code and phone number including area code.
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***Part C – Forage***

6 State/County	Enter the physical state and county were the quality loss occurred.
7 Crop	Enter the eligible crop that suffered a quality loss.
8 Crop Type	Enter the crop type or variety indicated on the FSA-578 that suffered a quality loss.
9 Intended Use	Enter the intended use for the crop entered in item 7 at the time of planting indicated on the FSA-578.
10 Organic Status (O/C)	Enter the organic status code according to the below. - “C”, Conventional and Transitional - “O”, USDA Certified Organic
11 Disaster Event	Enter the disaster event that caused the quality loss (for example, wildfire, hurricane, tornado).
12 Disaster Event Beginning Date (MM/DD/YYYY)	Enter the beginning date of the disaster event specified in item 11.
13 Disaster Event Ending Date (MM/DD/YYYY)	Enter the ending date of the disaster event specified in item 11.

<b>Fld Name / Item No.</b>	<b>Instruction</b>
14 Unit of Measure	Enter the unit of measure for the crop (such as pounds, bushels, or tons), crop type, and intended use.
15 Total Affected Production	Enter the total affected production of item 7 through item 10.  <b>Note:</b> Only report the producers share of total affected production. For additional information on total affected production contact county FSA office.
16 Nutritional Category	Enter one of the following applicable nutritional categories, based on the expected quality for the timing of harvest within the crop year - High Tier - Low Tier <b>Note:</b> For additional information on Nutritional Categories contact county FSA office.
17 Current Verifiable Nutritional Value	Enter the current verifiable nutritional value, if the producer does not have at least the current nutritional value, the forage crop is ineligible.  <b>Note:</b> For additional information on current verifiable nutritional value contact county FSA office.
18 Historical Verifiable Nutritional Value (Item 23 on FSA-899)	Enter the historical verifiable nutritional value from the FSA-899, item 23.  <b>Note:</b> For additional information on Historical Verifiable Nutritional Value contact county FSA office.
19 COC Adjusted Total Affected Production (COC Use Only)	COC may enter the adjusted total affected production, if applicable.  <b>Note:</b> An entry is only required when COC determines the total affected production is different than what is certified to by the producer in item 15.
20 COC Adjusted Current Verifiable Nutritional Value (COC Use Only)	COC may enter the adjusted current verifiable nutritional value, if applicable.  <b>Note:</b> An entry is only required when COC determines the current nutritional value is different than what is provided by the producer in item 17A.

<b>Fld Name / Item No.</b>	<b>Instruction</b>
20 COC Adjusted Historical Verifiable Nutritional Value <b>(COC USE ONLY)</b>	COC may enter the adjusted historical verifiable nutritional value, if applicable.  <b>Note:</b> An entry is only required when COC determines the historical nutritional value is different than what is provided by the producer in item 17B and on the FSA-899.
21 COC Determined Average Percentage of Loss <b>(COC USE ONLY)</b>	System will display the average percentage of loss.  <b>Note:</b> This will only display for forage crops without a historical verifiable nutritional value

***Part D – Crops Other Than Forage with Total Dollar Value Loss***

22 State/County	Enter the physical state and county were the quality loss occurred.
23 Crop	Enter the eligible crop that suffered a quality loss.
24 Crop Type	Enter the crop type or variety indicated on the FSA-578 that suffered a quality loss.
25 Intended Use	Enter the intended use for the crop entered in item 23 at the time of planting indicated on the FSA-578.
26 Organic Status	Enter the organic status code according to the below. - “C”, Conventional and Transitional - “O”, USDA Certified Organic
27 Disaster Event	Enter the disaster event that caused the quality loss (for example, wildfire, hurricane, tornado).
28 Disaster Event Beginning Date <i>(MM/DD/YYYY)</i>	Enter the beginning date of the disaster event specified in item 27.

<b>Fld Name / Item No.</b>	<b>Instruction</b>
29 Disaster Event Ending Date (MM/DD/YYYY)	Enter the ending date of the disaster event specified in item 27.
30 Unit of Measure	Enter the unit of measure for the crop (such as pounds, bushels, or tons), crop type, and intended use.
31 Total Affected Production	Enter the total affected production of item 23 through item 26.  <b>Note:</b> Only report the producer's share; . For additional information on total affected production contact County FSA office.
32 Type of Quality Loss Discount	Enter the type of quality loss discount; this is the condition that caused the quality loss. (for example, low test weight, falling numbers, nutrient values)
33 Total Dollar Value Loss on Affected Production	Enter the total dollar value loss on the affected production in item 31.  <b>Note:</b> Only report the producer's share; For additional information on Total Dollar Value Loss on Affected Production contact County FSA office.
34 Price Before Discount	Enter the price of the crop entered in item 23, before the quality loss discount occurred.
35 COC Adjusted Total Affected Production (COC Use Only)	COC may enter the adjusted total affected production, if applicable.  <b>Note:</b> An entry is only required when COC determines the total affected production is different than what is certified to by the producer in item 31.
36 COC Adjusted Total Dollar Value Loss on Affected Production (COC Use Only)	COC may enter the adjusted total dollar value loss on affected production, if applicable.  <b>Note:</b> An entry is only required when COC determines the total dollar value loss on affected production is different than what is provided the producer in item 33.
37 COC Adjusted Price Before Discount (COC Use Only)	COC may enter the adjusted price before discount, if applicable.  <b>Note:</b> An entry is only required when COC determines the price before discount is different than what is provided by the producer in item 34.

Fld Name / Item No.	Instruction
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***Part E – Crops Other Than Forage without Total Dollar Value Loss***

38 State/County	Enter the physical state and county were the quality loss occurred.
39 Crop	Enter the eligible crop that suffered a quality loss.
40 Crop Type	Enter the crop type or variety indicated on the FSA-578 that suffered a quality loss.
41 Intended Use	Enter the intended use for the crop entered in item 39 at the time of planting indicated on the FSA-578.
42 Organic Status	Enter the organic status code according to the below. <ul style="list-style-type: none"> <li>- “C”, Conventional and Transitional</li> <li>- “O”, USDA Certified Organic</li> </ul>
43 Disaster Event	Enter the disaster event that caused the quality loss (for example, wildfire, hurricane, tornado).
44 Disaster Event Beginning Date (MM/DD/YYYY)	Enter the beginning date of the disaster event specified in item 43.
45 Disaster Event Ending Date (MM/DD/YYYY)	Enter the ending date of the disaster event specified in item 43.
46 Unit of Measure	Enter the unit of measure for the crop (such as pounds, bushels, or tons), crop type, and intended use.
47 Total Affected Production	Enter the total affected production of item 39 through item 42.  <b>Note:</b> Only report the producers share, For additional information on total affected production contact county FSA office.
48 Type of Quality Loss Discount	Enter the type of quality loss discount, this is the condition that caused the quality loss. (Ex. Low test weight, falling numbers, nutrient values)
49 COC Adjusted Total Affected Production (COC Use Only)	COC may enter the adjusted total affected production, if applicable.  <b>Note:</b> An entry is only required when COC determines the total affected production is different than what is certified to by the producer in item 47.

<b>Fld Name / Item No.</b>	<b>Instruction</b>
50 COC Determined County Average Loss Per Unit of Measure <b>(COC Use Only)</b>	System will generate the COC determined county average loss per unit of measure.
51 COC Determined County Average Priced Before Discount <b>(COC Use Only)</b>	System will generate the COC determined county average price before discount.

***Part F – Producer Certification***

52A Signature (By)	Producer applying for QLA Program benefits must sign.
52B Title/Relationship of the Individual Signing in the Representative Capacity	Enter title and/or relationship to the individual when signing in a representative capacity.  <b>Note:</b> If the producer signing is signing representative capacity, this field should be left blank
52C Date <i>(MM/DD/YYYY)</i>	Enter the date the FSA-898 is signed in item 52A.

***Part G – COC Review***

53 COC or Designee Signature <b>(COC Use Only)</b>	COC or their designee will sign when the review has been completed.
54 Date <i>(MM/DD/YYYY)</i> <b>(COC Use Only)</b>	Enter the date the COC or their designee signs the FSA-898 in item 53.

***Part H – COC Determination***

55 COC or Designee Signature <b>(COC Use Only)</b>	COC or their designee will sign.
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<b>Fld Name / Item No.</b>	<b>Instruction</b>
56 Date (MM/DD/YYYY) (COC Use Only)	Enter the date the COC or their designee signs the FSA-898 in item 55.
57 Determination (COC Use Only)	COC or their representative will check (✓) either “Approved” or “Disapproved”.  <b>Important:</b> FSA-898 will be approved or disapproved after applicable COC adjustment fields are completed.