Instructions For FSA-899

Historical Nutritional Value Weighted Average Worksheet

This form will be used for applicants applying for QLA Program Benefits who suffered an eligible forage crop quality losses.

Customers who have established electronic access credentials with USDA may electronically transmit this form to the USDA servicing office, <u>provided</u> 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 1 through 23C

FSA employees will complete fields noted as **QCCC** Use Only **Q**.

Fld Name / Item No.	Instruction
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Part A & General Information

1 State	Enter the physical State where the forage crop suffered a quality loss.
2 County	Enter the physical county where the forage crop suffered a quality loss.
3 Producer�s Name	Enter the producer s name that suffered a quality loss on their forage crop.
4 Crop Year	Enter the crop year for the forage crop that suffered a quality loss.

Part B & Crop Information

The crop information part of the FSA-899 allows for producer to complete 3 historic years of forage crop data with 6 rows.

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Note: At the top of each section you will see Crop Year 20__, complete the blank with the

applicable year. •	Enter the eligible forage crop that suffered a quality loss.
Crop Name	Enter the engine lorage crop that suffered a quanty loss.
6 Crop Type	Enter the crop type or variety indicated on the FSA-578 that suffered a quality loss.
7 Intended Use	Enter the intended use for the crop entered in item 5 at the time of planting indicated on the FSA-578.
8 Organic Status (O/C)	Enter the organic status code according to the below. - &C, Conventional and Transitional - &O, USDA Certified Organic
9 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 This item will be entered in item 16 on the FSA-898.
10 Unit of Measure	Enter the unit of measure for the crop (such as pounds, bushels, or tons), crop type, and intended use.
11 Production	Enter the production of the forage crop in items 5 through 10 during the applicable crop year entered in the blank above.
12 Nutritional Value	Enter the nutritional value of item 11.
13 Production Times Nutritional Value	Enter the answer from calculating item 11 times item 13.
14 Production	Enter the production of the forage crop in items 5 through 10 during the applicable crop year entered in the blank above.
15 Nutritional Value	Enter the nutritional value of item 14.
16 Production Times Nutritional Value	Enter the answer from calculating item 14 times item 15.
17 Production	Enter the production of the forage crop in items 5 through 10 during the applicable crop year entered in the blank above.
18 Nutritional Value	Enter the nutritional value of item 17.
19 Production Times Nutritional Value	Enter the answer from calculating item 17 times item 18.
20 Sum of Production	Enter the sum of production. The sum of all production entered in items 11, 14, and 17.
(All Applicable Items 11, 14, 17 & Continuation if	Note: If a continuation was necessary for additional line, add those applicable lines in as well.

needed)	
21	Enter the sum of all production times nutritional values, as calculated in items
Sum of All	13, 16, and 19.
Production Times	
Nutritional Value (All applicable items 13, 16, 19 & Continuation if needed)	Note: If a continuation was necessary for additional line, add those applicable lines in as well.
22 Historical	Calculate the historical average nutritional value by dividing item 21 by item 20.
Average	
Nutritional Value	
(Item 21 divided	
by item 20)	

Part C • Production Certification

23A Signature of Producer (<i>By</i>)	Producer with a forage crop that suffered a quality loss and has historical nutritional value records must sign.
23B Title/Relationship of the Individual Signing in a Representative Capacity	Enter title and/or relationship to the individual when signing in a representative capacity. Note: If the producer signing is not signing in a representative capacity, this field should be left blank
23C Date (MM-DD-YY)	Enter the date the FSA-899 is signed in item 23A.

Part D & CCC Signature

24A	CCC representative must sign.
Signature of CCC	
Representative	
24B	Enter the date the CCC representative signs the FSA-899 in item 24A.
Date	
(MM-DD-	
YYYY)	