OMB CONTROL NO.: 1006-0005

## FORM 7-21FARMOP 2024

## DECLARATION OF FARM OPERATOR INFORMATION For Certification and Reporting Requirements of the Reclamation Reform Act of 1982

Districts must complete the	District Name	and "Date Received"	boxes.
District Name:			
DATE DECENTED			
DATE RECEIVED:			

			recoluit	idion Kolomi Act C	71 1302		DATE REC	EIVED:	
BUREAU OF RECLAMATION									
Do not use this form after December 31, 2024. It is important that you read the separate instructions that accompany this form before completing it. If you did not receive these instructions, please contact your district office. Type or print in ink. Date and initial crossouts and corrections. Visit www.usbr.gov/rra for more information.									
				FARM OPERATOR	R INFORMA	TION			
1. F	arm operator or	oart owner name:							
2(a). F	a). Farm operator type (check one):								
	Corporation Partnership Other:								
2(b). If	you checked "O	ther" in item 2(a), how is your ent	ity taxed by the Internal Re	venue Service (check or	ne box):	As a corpo	oration 🗆 .	As a partnership	
3(a). F	arm operator's s	treet address or rural route numb	er, city, state, and zip code	<b>;</b> :	3(b). Mailing a	ddress if di	ifferent from s	street address:	
4 (a). T	elephone numbe	r where questions can be directe	d: ( )		4(b). Contact p	erson:			
5. N	ame of state(s)	or country(ies) where farm operat	or is established or registe	red (if applicable):					
	mployer Identific	ation Number (EIN):							
7. LAND FOR WHICH THE FARM OPERATOR PROVIDES SERVICES  List all irrigable and/or irrigation land parcels westwide for which you provide services that are held in a trust or held by a legal entity. Include land for which your wholly owned subsidiary(ies) provide(s) services. For additional space, use page 2 of this form.									
Dis	(a) trict Name	(b) Legal Description of La Assessor's Parcel (There is space to list multiple [1] are held by the same landholder and [3] receive the same farm	Number(s) land parcels if they all , [2] are in the same district,	,	(d) (c) Services Provided for Each Parcel Services are Provided		fication of the Legal Entity or Trust for Whom	(e) Number of Acres	
							Name:		
							Address:		
	Telephone:								
		(f) Who decides when services	should be provided?		☐ Self	☐ Land	dholder	Other (please specify):	
(g) Who decides what will be done on the land parcels on a daily basis?									
							Name:		
							Address:		
	Telephone:								
	(f) Who decides when services should be provided?								
(g) Who decides what will be done on the land parcels on a daily basis?									
8. TOTAL NUMBER OF ACRES LISTED ON THIS PAGE FOR WHICH YOU PROVIDE SERVICES									

	ATOR'S NAME:						
	LAND FOR WH s necessary, all irrigable and/or irrigation land parcels westwide						our wholly owned
(a) District Name	(b)  Legal Description of Land Parcel(s) or Assessor's Parcel Number(s)  (There is space to list multiple land parcels if they all  [1] are held by the same landholder, [2] are in the same district, and [3] receive the same farm operating services.)	(c) Services Provided for Each Parcel		(d) Identification of the Legal Entity or Trust for Whom Services are Provided		(e) Number of Acres	
					Name:		
					Address:		
					Telephone:		
	(f) Who decides when services should be provided?		☐ Self	☐ Land	dholder	Other (please specify):	
	(g) Who decides what will be done on the land parcels on a c	daily basis?	☐ Self	☐ Land	dholder	Other (please specify):	
		•			Name:		
					Address:		
					Telephone:		
	(f) Who decides when services should be provided?		☐ Self	☐ Land	dholder	Other (please specify):	
	(g) Who decides what will be done on the land parcels on a daily basis?		☐ Self	☐ Land	dholder	Other (please specify):	
		•			Name:		
					Address:		
					Telephone:		
	(f) Who decides when services should be provided?		☐ Self	☐ Land	dholder	Other (please specify):	
	(g) Who decides what will be done on the land parcels on a c	daily basis?	☐ Self	☐ Land	dholder	Other (please specify):	
		•			Name:		
					Address:		
					Telephone:		
	(f) Who decides when services should be provided?		☐ Self	☐ Land	dholder	☐ Other (please specify):	
	(g) Who decides what will be done on the land parcels on a c	daily basis?	☐ Self	☐ Land	dholder	Other (please specify):	
					Name:		
					Address:		
					Telephone:		
	(f) Who decides when services should be provided?		☐ Self	☐ Land	dholder	Other (please specify):	
	(g) Who decides what will be done on the land parcels on a c	☐ Self	☐ Land	dholder	Other (please specify):		
11.			S LISTED C	N THIS F	PAGE FOR	WHICH YOU PROVIDE SERVICES	

12. FARM OPERATOR'S NAME:								
	DIARIES OF THI							
This section is to be completed <b>only</b> by the parent entity of the whole								
of the parent entity that provides services to legal entities or trusts.					d/or irrigation l	and parcels w	estwide for wh	nich the
subsidiary(ies) provide(s) services that are held in a trust or held by	a legal entity. For	additional space	e, use attach	ments.				
(a)			b)				(c)	
(a) Subsidiary			IN		Legal Description of Land Parcel(s) or Asso Number(s) for Acres Receiving Se			
- Cazelaisi,					Nu	mber(s) for Acre	s Receiving Se	rvices
Name:								
Name:								
ivanie.								
Namo								
Name:								
Name:								
ivanie.								
Name:								
round.								
Name:								
runic.								
14.	PART OWNE	RS OF THE F	ARM OPER	RATOR				
List any part owner(s) of the farm operator that provides service					ments.			
(-)					,	L\		(c)
(a) Part Owner			(b) EIN			Percentage of		
Fait Owner						·IIIV		Interest Owned
				+				
				+				
				<u> </u>				
	FARM OF	PERATION S	JMMARY				_	
15. DISTRICT NAME(S):								TOTAL
16. Total number of acres (that are								
held in a trust or by a legal entity)								*
for which the farm operator								
provides services:								
* NOTE: This number should equal the sum of item 8 and item 11	on this form.							

FORM 7-21FARMOP (2024)

17. FARM OPERATOR'S NAME:						
	LAND INFORMATION					
18. Did you or your entity (and/or its subsidiaries) formerly Skip to item 20 if your response to this item is "NO."	☐ YES	□ NO				
19. If you responded "YES" to item 18, was the parcel(s) s If "YES," to which land parcel(s) does this apply?	old or transferred at a price approved by Reclamation?	☐ YES	□ NO			
20. Can you or your entity (and/or its subsidiaries) use you If "YES," to which land parcel(s) does this apply?	☐ YES	□ NO				
21. Can you or your entity (and/or its subsidiaries) sue or b If "YES," to which land parcel(s) does this apply?	be sued in the name of the landholding?	☐ YES	□ NO			
22. Are you or your entity (and/or its subsidiaries) authorized to receive any payments from the United States Department of Agriculture on behalf of the landholder?  If "YES," to which land parcel(s) does this apply?						
23. <b>SIGNATURE(S)</b> Plea	ase sign the appropriate line(s) according to whether you are an individu	ual or an entity	,			
Attention: This declaration must be signed and dated. Read the following paragraphs before signing.	FOR A FARM OPERATOR WHO IS AN INDIVIDUAL OR A PART O	-				
Under the provisions of 18 U.S.C. 1001, it is a crime punishable by 5 years imprisonment or a fine of up to \$10,000, or both,						
for any person knowingly and willfully to submit or cause to be submitted to any agency of the United States any false or	Signature of Farm Operator or Part Owner		Date			
fraudulent statement(s) as to any matter within the agency's jurisdiction. False statements by the farm operator will also result in loss of eligibility. Eligibility can only be regained upon the	FOR A FARM OPERATOR THAT IS AN ENTITY (All partners, joint to unless they have provided a written signature authorization allowing or unless they have provided a written signature authorization allowing or unless they have provided a written signature authorization allowing or unless they have provided a written signature authorization allowing or unless they have provided a written signature.					
approval of the Commissioner.						
I (we) attest that the information provided herein is true, accurate, and complete to the best of my (our) knowledge.	Signature of Officer or Authorized Agent		Date			
This declaration is required by Public Law 97-293. Failure to declare can result in prosecution and/or loss of water deliveries from Federal reclamation projects. Information obtained in this declaration is protected by the Privacy Act of 1974, system of records notice INTERIOR/WRP 31, and will be used to administrate.	Office Held					
records notice INTERIOR/WBR-31, and will be used to administer the acreage limitation provisions of Federal reclamation law. The Secretary of the Interior or the district may require additional information in order to administer these laws. The Secretary	Other Required Signature		Date			
may also require a copy of your farm operating agreement.  Other Required Signature			Date			
PLEAS	E RETURN THIS FORM TO THE APPROPRIATE DISTRICT OFFICE(S).					