

## FSA-413, Emergency Grain Storage Facility Assistance Program (EGSFP) Application

### A Instructions for Completing FSA-413

The following table provides instructions for completing FSA-413.

Item	Instructions
1- 4	For County Office use only.
5A	Enter the applicant's name. If there is more than one applicant, co-applicants will complete FSA-413 Continuation.
5B	Enter the applicant's first line address (Street Name, P.O Box etc.)
5C	Enter the applicant's second line address (if applicable).
5D	Enter city name.
5E	Enter state name.
5F	Enter zip code.
5G	For County Office use only.
5H	Enter primary phone number for applicant in 5A (including area code) and check home or cell.
5I	Enter an alternative phone number for applicant in Item 5A and check home or cell.
5J	Enter applicant's email address. (Optional)
5K	Check "YES" if the applicant is an underserved producer or check "NO" if the applicant is not an underserved producer.
5L	Check "Partial/Final" if the applicant and co-applicants are requesting a EGSFP partial payment <b>AND</b> a EGSFP final payment <b>OR</b> check "Final" if the applicant and co-applicants are requesting only a EGSFP final payment. Only check one box.
5M	<p>The applicant named in item 5A will sign.</p> <p>Customers who have established electronic access credentials with USDA may electronically transmit FSA-413 to the USDA servicing office, <b>provided</b> that either of the following apply:</p> <ul style="list-style-type: none"> <li>• the customer submitting FSA-413 is the only person required to sign the transaction</li> <li>• the customer has an approved FSA-211 on file with USDA to sign for other customers for the program and type of transaction represented by FSA-413.</li> </ul> <p>Features for transmitting FSA-413 electronically are available to those customers with access credentials only. If the customer would like to establish online access credentials with USDA, follow the instructions</p> <p>provided at the USDA Service Center Agencies eForms website at <a href="https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home">https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home</a>.</p>

Item	Instructions
5N	Enter the title/relationship of the individual signing in 5M.
5O	Enter the date the applicant signs in 5M.
6	Check the certification box “Yes” or “No”.
7A	If the contact producer is different from the applicant in Item 5A, enter name of individual to contact for questions regarding the information provided on the FSA-413. If the contact producer is the same as Item 5A, leave Items 7A-7I blank and go to Item 8.
7B	Enter contact producer’s first line address.
7C	Enter contact producer’s second line address (if applicable).
7D	Enter city name.
7E	Enter state name.
7F	Enter zip code.
7G	Enter the primary phone number (including area code) for contact producer listed in Item 7A and check if home or cell phone number.
7H	Enter an alternative phone number (including area code) for contact producer listed in Item 7A and check if home or cell phone number.
7I	Enter email address for contact producer listed in Item 7A.(Optional)
8	Check “YES” if all applicant and co-applicants harvested grain in an affected county eligible for EGSFP assistance and list all affected counties where grain was harvested. Check “NO” if any of the applicant and co-applicant did not harvest grain in an affected county eligible for EGSFP assistance. If “NO” is checked, explain in Part F-Remarks.
9	Check “YES” if <b>ALL</b> applicant and co-applicants certify they (1) actively produced and marketed grain when the eligible disaster events occurred; (2) are still actively producing grain when applying for EGSFP; and (3) will use the storage , drying/handling equipment for at least 3 years after the EGSFP is issued. If “NO” is checked, explain in Part F-Remarks.
10	Enter a complete description of the on-farm grain storage structure and/or drying/handling equipment that will be purchased. (Example: Make/Manufacturer, Size, etc.)
11	Enter the legal description of the property where the on-farm grain storage structure will be built and/or where the drying/handling equipment dry will be installed and/or stored.
12	List all grain crops the applicant and co-applicants produce that require

	on-farm grain storage and drying/handling equipment.
13A	Enter the total crop year 2021 and 2022 harvested grain production (total bushels) for all applicant and co-applicants. Applicant and co-applicants will self-certify this amount.
13B	Enter the total on-farm grain storage capacity (bushels) owned by the applicant and co-applicants, prior to the date the EGSFP NOFA is published. Enter N/A if this request is only for drying/handling equipment.
13C	Enter the total on-farm grain storage capacity (bushels) needed for applicant and co-applicants (Items 13A minus 13B). Enter N/A if this request is only for drying/handling equipment.
13D	Enter the total capacity (bushels) of the on-farm grain storage structure to be constructed. 13D cannot not exceed item 13C. Enter N/A if this request is only for drying/handling equipment.
14	Enter the total estimated dollar amount the applicant and co-applicants are requesting for the EGSFP assistance described in item 10.
15A	Enter each applicant and co-applicant's name.
15B	Enter each applicant and co-applicant's share of the total 2021 and 2022 harvested grain production entered in item 13A.  <b>Note:</b> Total of all shares should equal 100
16	Enter any additional information if applicable. Examples (1)Notate date if COF made an on-site inspection to confirm purchase/construction.(2) Explain why item 8 and/or item 9 were checked "NO".
17A-17D	For County Office use only.
18	Enter dollar amount of the EGSFP partial payment requested if "Partial/Final" was checked in item 5L. The EGSFP partial payment cannot be requested until at least 50% of the eligible on-farm grain storage structure and/or drying/handling equipment described in item 10, has been purchased and/or constructed. If the disbursement type in Item 5L was checked Final, leave Item 18 blank.
19A	The applicant and co-applicants named in item 15A will sign. Customers who have established electronic access credentials with USDA may electronically transmit FSA-413 to the USDA servicing office, <b>provided</b> that either of the following apply: <ul style="list-style-type: none"> <li>• the customer submitting FSA-413 is the only person required to sign the transaction</li> <li>• the customer has an approved FSA-211 on file with USDA to sign for other customers for the program and type of transaction represented by FSA-413.</li> </ul> <p>Features for transmitting FSA-413 electronically are available to those customers with access credentials only. If the customer would like to establish online access credentials with USDA, follow the instructions provided at the USDA Service Center Agencies eForms website at</p>

	<a href="https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home">https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home</a> .
19B	Enter the title/relationship of the individual signing in 19A.
19C	Enter the date the applicant and/or co-applicant signs in 19A.
20A-20D	For FSA use only.
21	Enter the requested dollar amount of the EGSFP final payment. The EGSFP final payment cannot be requested until 100% of the eligible on-farm grain storage structure and/or drying/handling equipment described in item 10, has been purchased and/or constructed. If the EGSFP final payment requested in this item, plus the EGSFP partial payment (if applicable) requested in item 18 exceeds the estimated EGSFP amount requested in item 14, the COC/STC must approve the EGSFP increase in PART M .
22	If the total of the EGSFP partial payment in item 18 (if applicable) and EGSFP final payment in item 21 exceed the approved estimated EGSFP assistance request (item 14), check “YES”; if not check “NO”.
23A	<p>The applicant and co-applicants named in item 15A will sign. Customers who have established electronic access credentials with USDA may electronically transmit FSA-413 to the USDA servicing office, <b>provided</b> that either of the following apply:</p> <ul style="list-style-type: none"> <li>• the customer submitting FSA-413 is the only person required to sign the transaction</li> <li>• the customer has an approved FSA-211 on file with USDA to sign for other customers for the program and type of transaction represented by FSA-413.</li> </ul> <p>Features for transmitting FSA-413 electronically are available to those customers with access credentials only. If the customer would like to establish online access credentials with USDA, follow the instructions provided at the USDA Service Center Agencies eForms website at <a href="https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home">https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home</a>.</p>
23B	Enter the title/relationship of the individual signing in 23A.
23C	Enter the date the applicant and/or co-applicant signs in 23A.
24A-26C	For County Office use only.

**FSA-413-1, Continuation Sheet for Emergency Grain Storage Facility Assistance Program (EGSFP) Application**

**A Instructions for Completing FSA-413-1**

The following provides instructions for completing FSA-413-1.

Item	Instructions
1 - 4	For FSA use only.
5A	Enter the co-applicant's name.
5B	Enter co-applicant's first line address (Street Name, P.O Box , etc.)
5C	Enter co-applicant's second line address (if applicable).
5D	Enter city name.
5E	Enter state name.
5F	Enter zip code.
5G	For FSA use only.
5H	Enter co-applicant's primary phone number (including area code) and check home or cell.
5I	Enter an alternative phone number for co-applicant in Item 5A
5J	Enter co-applicant's email address.
5K	Check "YES" if the co-applicant is an underserved producer or check "NO" if the applicant is not an underserved producer.
5L	<p>The co-applicant named in item 5A will sign.            Customers who have established electronic access credentials with USDA may electronically transmit FSA413-1 to the USDA servicing office, <b>provided</b> that either of the following apply:</p> <ul style="list-style-type: none"> <li>• the customer submitting FSA-413-1 is the only person required to sign the transaction</li> <li>• the customer has an approved FSA-211 on file with USDA to sign for other customers for the program and type of transaction represented by FSA-413-1.</li> </ul> <p>Features for transmitting FSA-413-1 electronically are available to those customers with access credentials only. If the customer would like to establish online access credentials with USDA, follow the instructions provided at the USDA Service Center Agencies eForms website at <a href="https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home">https://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home</a>.</p>
5M	Enter the title/relationship of the individual signing in 5L.
5N	Enter the date the individual signs in 5L.
6	Check the certification box "Yes" or "No".