This form is available electronically. CCC-576 U.S. DEPART

(12-10-19)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

(See Page 2 Privacy Act and Paperwork Reduction	Act Statements.)
PART A – GENERAL INFORMATION	
County FSA Office Name and Address (Including Zip Code)	2. Crop Year
3. Producer's Name and Address (Including Zip Code)	State and County Code

PAYMENT NO ASSIST 2020 ANI	OSS AND APPLICA ININSURED CROP I TANCE PROGRAM F D SUBSEQUENT YE	3.	Produ	cer's Name a		State and     County Code									
PART B – NOTICE OF L	_oss														
Disaster Event     A. What disaster event(s) caused loss?						B. Beginning date of disaster (MM-DD-YYYY)  D. Date Stamp (If a 72 hour notification of loss was given attach the Receipt for Service or other documentation.)									
				C.	C. Ending date of disaster (MM-DD-YYYY)										
6. Crop				I				l .							
A. Crop Name	B. Crop Type	C. Intende	ed Use		[	D. Practice	E. Plantir	ng Period	F. When was crop loss first apparent (MM-DD-YYYY)						
7. Intended, but Prevente	ed Planted Acres (compl	lete only for pr	evented	planted	acreag	e)	•		COC Use Only						
A. Farm Number	A. B.					D. Planted Acr	es Prevented Acr	Planted	F. Prevent Approved	ed Planted Acres  Disapproved					
							Aci	es ''							
G. For prevented acreage in I	tem 7E, complete the follow	ing questions:	ı			Describe	a documento	tion							
	Questions			Yes	No		details and list type on the oies if requested by F		y documenta	illon.					
(a) Did you purchase or ar fertilizer?	range for seed, herbicide, p	esticide, or													
(b) Did you perform land p															
	intended to plant (planted plants history for this farm?	lus prevented)													
(d) Did you have access to planting period?	the claimed acres in item 78	E during the													
(e) What do you intend to o	do with the acres in item 7E? to another crop?)	? (For example	e, do you	u intend	to										
8. Disaster Affected Plan	nted Acres (complete only	/ for disaster a	ffected p	olanted a	acreage	e)			cod	Use Only					
A. B. Farm Number NAP Unit Number				Total Pl	C. anted A	creage	D. Disaster Affed	cted	E. Disaste	er Affected Acres					
							Planted Acrea		Approved	Disapproved					
F. What cultivation practices have been and will be employed on damaged crop acreage (e.g., fertilizer, seeding, irrigation, pesticide and herbicide applications; before and after date of damage)? (attach additional sheets if necessary):															
G. Has any of the disaster aff	ected planted crop acreage	been destroye	ed, repla	nted, or	put to a	another use?	(If " <b>YES</b> ", provide dei	tails):	Y	ES NO					
H. Has, or will all of disaster a	affected crop acreage in Item	n 8D been han	ested fo	or the int	ended	use in Item 60	C?		Y	ES NO					
<b>NOTE:</b> If " <b>NO</b> ," you must requanother use before write program assistance.	uest an appraisal of any plar itten consent is given by an a														
9. Producer certifies that receipt of copy of this f	-	t B is correc	t, whet	her pei	rsonal	ly entered b	y the producer or o	another pa	arty, and acl	knowledges					
					Title/Relationship (Individual Signing in the Representative Capacity)  C. Date (MM-DD-YYYY)										
DART C COC ARRES	VAL OR DISABBROW	AL OFLOS	c												
PART C – COC APPRO				Dort D .	with a	ob ond all !	a antrion as indicat	od							
<ol> <li>COC approves or disa</li> <li>COC Signature</li> </ol>	approves as applicable tr	iis HUUCE OF I	USS III I	an D	with ea	icii aiiù ail II	s entres as muicate	eu.	B. D.	ate (MM-DD-YYYY)					
ooo orginataro									5. 0	(					

CCC-576 (	12-10-19	)													Pa	ge 2 of 2	
11. Producer's						12. Cro	p Year	13	3. Unit No	. 14. F	Pay Crop	Code	15.	Pay Type Code	e 16. Plan	ting Period	
PART D -	APPRAIS	SAL OR I	REPORT	OF PRO	DUCT	ION									COC Us	se Only	
17. Crop Type	18. Crushing District	19. Producer Share(s)	20. Acres/ Colonies/ Taps	21. Practice	22. Stage	23. Organic Status	24. Actua Producti		25. Unit of Measure	26. Intended Use	27. Final Use	Second Use Salva Valu	dary or age	29. Production Not to Count	30. Assigned or Adjusted Production	31. Secondary Use or Salvage Value	
PART E –	VALUE I	OSS CR	OPS											COC Us	e Only		
	32.		33	3.		3	34.			35.				36.		37.	
Cr	Crop Type		Producer Share(s)		In	Inventory or Dollar Value Before Disaster			Inventory or Dollar Value After Disaster (FMVB)			Ineligible Inventory or Dollar Value			Salvage Value		
PART F –	GRAZINO	G AUD LO	OSS CAL	CULATIO	ONS									C	OC Use Only	/	
38. Crop	38. 39.		40. 41. Acres Practice			42. Unseeded Land			43. Stage	44. Carrying		45. Grazing	46. AUD	47. AUD	48. AUD		
Туре	Share(	hare(s)				Federal	State			Capacity		Period Days		Adjustment Factor	Loss Factor	Assigned	
49. Will indep														? If " <b>YES</b> ", CC-471 BP).	YES	□ NO	
	rop types e information	ntered in Ite n, (e.g., sec	ems 17, 30, o ondary use,	salvage va	alue):			or pa	yment for	growing th	e crop, a	as oppose	ed to d	lelivery of produ	ction, or any o	ther	
evidence, CC	C-576-1, ar	ıd, if applic	able FSA-50.	1, Statemer	ıt of Fa	cts. When	harvested	proa	luction exi	sts, evideno	ce of har	vested pro	ductio	praisal Workshe on must be furnis is ineligible for p	shed with this a		
that all the info certifications, s as well as the any erroneous form and appli	ormation ent statements, correct shar information cation accuration, stores or p	ered on this etc., are each re relationsh n, FSA will re- rately will re- purchases cr	form, whether and all true ip, pay crop, pender a new desult in a loss cop production	er personalle and correct pay type, and letermination of program in listed on the second seco	y entere ct. The u nd year on. This benefits his form	d by the ur undersigned shown. The may included. Additional to disclose	ndersigned of d certifies the e undersign de a refund lly, by signion e the produce	or not the ned under of ur of the or	ot, or by sor ne production nderstands nearned pay nis form, the records of	neone else on on this fo this report yments as a undersign such crops	, the attac orm is acc is subject a result of ed directs	chments to curately ident to spot-of the errors the purch	o this f entified theck, s. Faild haser,	m CCC-471 BP). orm, related acre d to the unit and i and if FSA finds a ure to certify any warehouse opera for the purpose of	eage reports, pro- represents total that this applica of the information ator, ginner, or a	oduction production, tion contains on on this any person	
	choose wh	ether to rece												e Secretary for the producer from b			
51A. Producer	's Signatur	re				5	51B. Title/Relationship of the Individual if Signing in the Representative Capacity				51C. [	51C. Date Signed (MM-DD-YYYY)					
52A. LA or FS.	A Represe	ntative Sigr	nature (Final)	)										52B. [	Date Signed (M	IM-DD-YYYY)	
PART I – C	COC APP	ROVAL	OR DISAF	PROVA	L OF	APPLIC	ATION F	OR	NAP PA	AYMENT							
53A. COC Acti	ion ROVED	1 ,	DISAPPRO\	/FD 🗆		53B. COC Signature							53C. [	53C. Date (MM-DD-YYYY)			
NOTE: The for Comm Insurar eligibili State, applica	llowing state nodity Credit nce Act (7 U ity to particip Local gover able Routine	ement is made Corporation J.S.C. 1508 oate in and remment agente Uses idente	de in accorda n Charter Act – as amende receive benefi cies, Tribal aç ified in the Sy	nce with the (15 U.S.C. d), and the its under the gencies, an estem of Re	714 et s Agricult e Non-Ir d nongo cords N	eq.), the F ure Improv nsured Cro overnmenta otice for U	ederal Agric ement Act o p Disaster A l entities the SDA/FSA-2,	cultur of 20 Assis at ha , Far	re Improver 18 (Pub. L. stance Prog ave been au m Records	ment and R 115-334), a ram. The i uthorized ac File (Auton	eform Ac and 7 CF informatio ccess to to mated). F	t of 1996 ( R Part 143 n collecte he informa Providing ti	7 U.S. 37. Th d on th ation by he req	he information ide C. 7333 – as am ne information will nis form may be o y statute or regul uested informatic -Insured Crop Dis	ended), the Fed I be used to det disclosed to othe ation and/or as on is voluntary.	deral Crop ermine er Federal, described in However,	

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YOUR COUNTY FSA OFFICE.

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