

**UNITED STATES DEPARTMENT OF AGRICULTURE**

Farm Service Agency  
Washington, DC 20250

**Loss Adjuster Management  
2-NAP (Revision 1)**

**Amendment 8**

**Approved by:** Deputy Administrator, Farm Programs



**Amendment Transmittal**

**A Reasons for Amendment**

Paragraph 25 has been amended to provide Homeland Security Presidential Directive 12 guidance which requires loss adjusters to be fingerprinted and display an FSA-issued photo identification site badge when conducting business for FSA.

Paragraph 29 has been amended to provide instructions for completing FSA-1065-2 to track LA site badges.

Subparagraph 43 A has been amended to remove the requirement to use form FCIC-487 to track a loss adjuster's work. FCIC-487 is obsolete.

Subparagraph 43 B has been amended to clarify loss adjuster responsibilities.

<b>Page Control Chart</b>		
<b>TC</b>	<b>Text</b>	<b>Exhibit</b>
1, 2	2-7 through 2-10 2-13 through 2-52 2-101, 2-102 3-59, 3-60	1, pages 1, 2



# Table of Contents

Page No.

## Part 1 General Information

1	Overview.....	1-1
2	Responsibilities.....	1-2
3-20	(Reserved)	

## Part 2 CCC-455's

### Section 1 Engaging LA's

21	Engaging Process.....	2-1
22	CCC-455, Loss Adjuster Service Agreement.....	2-2
23	Pay Rates for LA's.....	2-3
24	(Reserved)	
25	LA Photo Identification Site Badge.....	2-7
26	LA ID Codes.....	2-8
27	LA Agreement File.....	2-8
28	FSA-454B, Loss Adjuster's Crop Training Certification.....	2-11
29	FSA-1065-2, Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters.....	2-14
30-32	(Reserved)	
33	(Withdrawn--Amend. 6)	
34-42	(Reserved)	

### Section 2 LA Responsibilities and Ethics

43	LA's Responsibilities.....	2-51
44	LA's Ethics, Conflicts, and Eligibilities.....	2-53
45-50	(Reserved)	

### Section 3 LA Training and Certification

51	General Provisions.....	2-73
52-54	(Reserved)	
55	Phase I Training.....	2-85
56	Phase II Training.....	2-86
57	Update Training.....	2-88
58-60	(Reserved)	

**Table of Contents (Continued)**

**Page No.**

**Part 2        CCC-455's (Continued)**

**Section 3      LA Training and Certification (Continued)**

61	Determining Training Required.....	2-99
62	Certification Process and Documentation.....	2-100
63	LA Training Report.....	2-100
64	Certification by Special Cases .....	2-101
65	Certification by Experience .....	2-102
66	Maintaining Certification and Determining Decertification.....	2-103
67	Compensation by Certification Criteria.....	2-104
68	1-Year Fully Certified Service Criteria.....	2-105
69, 70	(Reserved)	
71	(Withdrawn--Amend. 3)	
72	LA Review .....	2-115
73-199	(Reserved)	

**Part 3        LA Travel and FSA-449A's**

200	Authority.....	3-1
201, 202	(Reserved)	
203	(Withdrawn--Amend. 6)	
204, 205	(Reserved)	
206	LA Responsibilities.....	3-17
207, 208	(Reserved)	
209	General Motor Vehicle Travel .....	3-25
210	Common Carrier .....	3-25
211	General Travel .....	3-26
212-216	(Reserved)	
217	Per Diem .....	3-41
218	Interrupted Travel .....	3-44
219	Long-Distance Telephone Calls.....	3-45
220	Miscellaneous Expenses .....	3-46
221-223	(Reserved)	
224	Completing FSA-449A's and FSA-449B's .....	3-59
225	Instructions for Completing FSA-449A's.....	3-61
226, 227	(Reserved)	
228	Instructions for Completing FSA-449B's.....	3-75
229-299	(Reserved)	

**\*--25 LA Photo Identification Site Badge****A Overview**

In 2004, Homeland Security issued Presidential Directive 12 which directed U.S. government agencies to issue verifiable credentials to official representatives including employees, contractors, interns and affiliates. LA's are affiliates.

Verifiable credentials for LA's will include a USDA-FSA provided photo identification site badge to be displayed when conducting USDA-FSA business. The site badge will require a favorable FBI fingerprint background check before being issued. A favorable FBI fingerprint determination must be received before an LA's CCC-455 can be signed or renewed.

**Note:** The following are suggested places for LA's to be fingerprinted:

- local, county, or State law enforcement agencies
- search online for local private companies specializing in fingerprinting.

**B Phasing Out FSA-454**

Loss Adjuster ID Card FSA-454 will be phased out beginning with the 2016 crop year and replaced with an FSA-provided photo identification site badge.

The prior year's FSA-454 should be returned and discarded when the new site badge is issued.

**C Obtaining an FBI Fingerprint Background Investigation**

The following documentation is required to obtain an FBI fingerprint background investigation:

- FSA-789
- OF-306
- two completed FD-258's or SF-87 fingerprint charts with signatures and dates of both the applicant and the individual trained in the fingerprinting process.

**Note:** Because of EPD's transition to electronic fingerprint submissions, FD-258 and SF-87 are both acceptable for electronic processing. The fingerprint charts and OF-306 must be dated within 120 calendar days of submission to EPD.--\*

**\*--25 LA Photo Identification Site Badge (Continued)****D Submitting Required Fingerprint Documents**

Ensure that all required documents in subparagraph C are submitted to EPD electronically to the personnel security mailbox at **EPD@fsa.usda.gov**.

All documents must be encrypted with the password provided to the State by EPD. Consult the State Office Administrative Officer for current EPD passwords.

If documents cannot be sent electronically, State Offices must submit documents using UPS to the following address:

USDA, FSA, EPD  
ATTN: Director, EPD  
1400 Independence Ave SW  
South Building, Room 0092-S  
STOP 0543  
Washington, DC 20250-0543.

**Notes:** Expect to wait 2 to 3 weeks to receive a response from EPD about the results of the fingerprint investigation.

Fingerprints taken within the last 120 calendar days for a Federal position submitted to OPM are acceptable, otherwise an updated fingerprint chart must be submitted to EPD.

A favorable FBI fingerprint check remains in effect as long as there is no break in continuous renewals of CCC-455.

**E Obtaining a Required Photo ID Site Badge**

After notification from EPD that LA has been cleared, a site badge may be requested by completing AD-1197. The AD-1197 and a current photo of LA must be e-mailed to **EPD@fsa.usda.gov**. The site badge will be developed and sent to the State Office POC listed on AD-1197.--\*

**\*--25 LA Photo Identification Site Badge (Continued)****F Obtaining a Current Picture of an LA for the USDA-FSA Site Badge**

A current picture can be obtained either by a digital camera or a cell phone for the USDA-FSA site badge. The picture **must** be saved in the file by the person's name. The picture requirements are as follows:

- image should be in .jpg format
- include a full face, front view, upright head and open eyes
- picture should present full head from top of hair to shoulders
- picture should include a plain white or off-white background
- avoid shadows on the face or background
- face in picture should have a natural expression (closed mouth)
- picture should not include sunglasses or hats
- if glasses are worn, glare on glasses is not acceptable
- picture should be in color
- the contrast and lighting in the picture should be normal.

**G Reimbursement for Fingerprinting Costs**

Reimbursement for the cost of the fingerprint process will differ between certified LA's with a current CCC-455 agreement and LA trainees.

- **Reimbursement for Certified LA's**

Certified LA's with a current CCC-455 will be paid for the time, mileage and cost (if any) of the fingerprint process. The time associated to the fingerprint process should be reported as Update training (UTR) in the Loss Adjustment Management System because it is related to keeping their LA certified status. Report any cost of the fingerprint process on FSA-449B as miscellaneous (item 7).

State and County Offices are encouraged to attempt to allow LA's to schedule the fingerprint process in coordination with an inspection assignment or at a time when it is convenient to reduce the cost associated to the fingerprint requirement.

- **Reimbursement for LA Trainees**

Once a trainee has completed all LA training requirements and becomes certified, FSA will reimburse the individual for any cost associated to the fingerprinting process. FSA will not reimburse a trainee for the time or mileage associated to the fingerprinting process since it will be a known requirement for becoming a USDA/FSA LA.--\*

**\*--25 LA Photo Identification Site Badge (Continued)**

**H EPD Contacts**

Contact EPD according to this table if there are questions about obtaining a site badge.

<b>If questions about...</b>	<b>THEN contact...</b>
policy	Jay Van Der Werff by either of the following: <ul style="list-style-type: none"> <li>• e-mail to <b>jay.vanderwerff@kcc.usda.gov</b></li> <li>• telephone at 816-926-3786.</li> </ul>
procedure	Kathy Kroening by either of the following: <ul style="list-style-type: none"> <li>• e-mail to <b>kathy.kroening@kcc.usda.gov</b></li> <li>• telephone at 816-926-1180.</li> </ul>

--\*

**26 LA ID Codes**

**A Elimination of LA ID Codes**

LA ID codes are no longer required. The Loss Adjuster Management System will no longer assign ID numbers.

**27 LA Agreement File**

**A Agreement File**

The State Office shall maintain an agreement file for each LA containing a copy of the following:

- approved CCC-455
- \*--FSA-1065-2--\*
- FSA-454B
- FSA-577 (see 2-CP, subparagraph 332 E).



28 FSA-454B, Loss Adjuster's Crop Training Certification (Continued)

C Example of FSA-454B

The following is an example of FSA-454B.

\*--

<p>This form is available electronically.</p> <p><b>FSA-454B</b> U.S. DEPARTMENT OF AGRICULTURE (09-26-13) Farm Service Agency</p>		<p>1. CROP YEAR</p> <p>2013</p>
<p><b>LOSS ADJUSTER'S CROP TRAINING CERTIFICATION</b></p>		
<p>2. LA'S NAME Norfleet Givens</p>		<p>3. LA'S MAILING ADDRESS (Including Zip Code) 1 Greenplane Place Grizzard, VA 89876</p>
<p>4. TELEPHONE NUMBER (Include Area Code) 804-123-4567</p>		
<p>5. COUNTY OF RESIDENCE Greensville</p>		
<p><b>6. CROPS CERTIFIED TO ADJUST AND DATE CERTIFIED</b></p>		
<p>The above named LA in Item 2 is certified to adjust the following crops. Certification data is used to determine skill level and the rate of payment for the adjuster. Below in Item 6A and 6C enter the training LA has completed, and in items 6B and 6D enter the date the training was certified.</p>		
<p><b>A. INITIAL OR FIRST CROP LA IS CERTIFIED TO ADJUST:</b></p>		<p><b>B. DATE CERTIFIED</b></p>
<p>(1) Corn and small grains</p>		<p>06-01-2013</p>
<p>(2)</p>		
<p>(3)</p>		
<p>(4)</p>		
<p><b>C. ADDITIONAL OR SUBSEQUENT CROPS LA IS CERTIFIED TO ADJUST IN ADDITION TO INITIAL OR FIRST CROPS LISTED IN ITEM(S) 8A:</b></p>		<p><b>D. DATE CERTIFIED</b></p>
<p>(1) Cotton</p>		<p>01-15-2013</p>
<p>(2) Cotton Update Training</p>		<p>01-15-2013</p>
<p>(3) NAP Update Training, Watermelons</p>		<p>02-15-2013</p>
<p>(4) Cucumbers, Southern Vegetable School</p>		<p>02-15-2013</p>
<p>7A. NAME OF STATE SPECIALIST OR AUTHORIZED REPRESENTATIVE</p>	<p>7B. SIGNATURE OF STATE SPECIALIST OR AUTHORIZED REPRESENTATIVE</p>	<p>7C. DATE (MM-DD-YYYY)</p>
<p>8A. STATE OFFICE NAME AND ADDRESS (Including Zip Code)</p>		<p>8B. STATE OFFICE TELEPHONE NUMBER (Including Area Code)</p>

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider and employer.

--\*

**Note:** Person completing the entry shall draw a solid, double line after the training notation and initial the entry.

29 FSA-1065-2, Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters

A Completing FSA-1065-2

Complete FSA-1065-2 according to the following table.

\*--

Item	Instructions
1	Enter the crop year.
2	Enter State Office name.
3	Enter the LA name.
4	Enter the date the site badge was issued.
5	Enter the expiration date printed on the site badge.
6	If collected or destroyed, enter date.
7	If destroyed, list reason.

--\*

29 FSA-1065-2, Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters (Continued)

B Example of FSA-1065-2

\*--The following is an example of FSA-1065-2.

This form is available electronically.

**FSA-1065-2**  
(03-17-16)

**U.S. DEPARTMENT OF AGRICULTURE**  
 Farm Service Agency

1. Crop Year  
 2016

**TRACKING USDA-FSA ISSUED SITE BADGES FOR NAP/TAP ADJUSTERS**

2. State Office  
 Florida

3 Name that Appears on USDA-FSA Site Badge	4 Badge Issued Date (MM-DD-YYYY)		5 Expiration Date Printed on Badge (MM-DD-YYYY)	6 Date Collected and Destroyed		7 Reason for Destruction (Check Appropriate Box)		
	Date	Initials	Date	Date	Initials	Terminated Employment	Change in Employment Status	Other (Provide Explanation)
Fred Brown	02-09-2016	EEE	02-09-2019			<input type="checkbox"/>	<input type="checkbox"/>	
Joe Smith	02-09-2016	EEE	02-09-2019	10-15-2016	EEE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Retired
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.

--\*

30-32 (Reserved)

33 (Withdrawn--Amend. 6)

34-42 (Reserved)



## Section 2 LA Responsibilities and Ethics

## 43 LA's Responsibilities

## A LA's Administrative Responsibilities

LA's shall perform the following administrative tasks:

- advise FSA of all insurance or reinsured companies for which loss adjustment work or sales service is performed before signing CCC-455
- advise FSA of all immediate family relatives who have farms

**Note:** LA's shall:

- not adjust crops in which relatives have any interest
- update this information immediately when changes occur.
- comply with all Federal travel regulations
- legibly and properly complete FSA-449A's and FSA-449B's and submit them in a timely manner

**Notes:** FSA-449A's shall be submitted as adjustment assignments are completed. More than one FSA-449A may be submitted in a pay period.

FSA-449A's more than 30 calendar days old must have written approval for payment from the State Office.

- be responsible for any additional expenses incurred for personal preference
- not confer with producers about legal matters
- notify County Office, if contacted about legal hearings or controversial matters.
- keep work records for 3 years

\* \* \*

## 43 LA's Responsibilities (Continued)

## A LA's Administrative Responsibilities (Continued)

- be responsible for the correction of all suspensions received from the County Office. Suspensions shall be given priority for corrections and returned in a timely and efficient manner.

**Note:** If it is determined the error was a result of performance, the error will be corrected **without** additional compensation.

## B LA's Service Responsibilities

LA's shall:

- only be used for NAP-related reasons, unless Washington, DC, authorization is received
- perform loss adjustment services as assigned by State Office representative or CED for NAP-related reasons

**Notes:** This includes all visits for the purpose of appraising damaged or destroyed crops during the growing season or following harvest, for all related loss adjustment functions. **The producer does not pay for services performed by LA \* \* \*.**

LA's shall **never** perform measurement service requests for APH when requested by the producer for production history. This service is **not** related to NAP claims or required spot checks. A producer's request is "paid measurement service" that must be performed by FSA office or field person.

\*--See 1-NAP (Rev. 2), paragraph 587 for guidelines for measurement services.--\*

- explain limited responsibilities and filing procedures to producers, when applicable
- schedule work to ensure timely service, returning producer folder to the County Office within 10 calendar days
- promote a good working relationship between the producer and FSA
- bring controversial claims and other unusual claim situations to the attention of the official who assigned the work, including the knowledge of producer bankruptcy
- accurately complete and timely submit all claim documents and LA pay FSA-449A's preferably in the same pay period, but no later than the following pay period in which the work was performed
- advise all interested parties that findings from inspections and appraisals are for FSA use.

**64 Certification by Special Cases**

**A Certification by Specialty Crops**

Special consideration should be given to certification on specialty crops, because these crops are:

- often more difficult to adjust
- usually of higher value, which means that mistakes will be more costly to the Government
- unlikely to occur in a volume that would allow more than a few LA's in an area to gain sufficient experience.

It may be more cost effective to maintain a smaller, highly experience pool of LA's to inspect specialty crops and incur the cost of their travel than to try to keep all LA's in an area proficient in these crops.

**65 Certification by Experience \* \* \*****A Certification by Experience**

In certain cases, it may be advantageous to FSA to consider CED, insurance adjuster, field reporter, or others certified by experience for previous work done in crop adjusting.

**Example:** An individual with adequate adjustment experience who has demonstrated the ability to effectively carry out the technical phases of loss adjustment work for a crop can be considered certified. Numerous disaster program inspections would be an example of adequate adjustment experience. Training documentation forms must be maintained for these individuals.

To maintain this certification, the employee **must** receive \* \* \* update or Phase II training, \*--annually. For any year after initial certification for which the required training is **not--\*** received, the employee is **not** fully certified.



224 Completing FSA-449A’s and FSA-449B’s

A FSA-449A’s and FSA-449B’s Responsibilities

The following table lists LA and approving official’s roles for completing FSA-449A’s and FSA-449B’s.

**Note:** FSA-449A’s and FSA-449B’s are on FSA Intranet.

Responsibility	Step	Action
LA	1	<p>Prepares FSA-449A and FSA-449B for <b>each pay period</b>, submitting separate forms for the following:</p> <ul style="list-style-type: none"> <li>• NAP inspections</li> <li>•*--OTHER inspections (all inspections other than NAP and TAP)</li> <li>• different crop years</li> <li>• different rates of pay</li> <li>• each county and State.</li> </ul> <p><b>Reminder:</b> Use separate forms for NAP, TAP, and OTHER. On:</p> <ul style="list-style-type: none"> <li>• FSA-449A, Item 1, mark the appropriate box</li> <li>• FSA-449B, write “NAP”, “TAP”, or “OTHER”--* in the space directly above the form title.</li> </ul>
	2	Reviews for legibility and accuracy.
	3	Signs and dates the forms. Actual date must be used.
	4	Assembles all documents with a paper clip. Forwards to the approving FSA official.

224 Completing FSA-449A's and FSA-449B's (Continued)

A FSA-449A's and FSA-449B's Responsibilities (Continued)

Responsibility	Step	Action
Designated Approving Official	1	Reviews and corrects FSA-449A and FSA-449B. LA's initials are needed if "total amounts" are decreased. If the increase is \$5 or less, initials are not required.  * * *
	2	Assembles in the following order and staple:  <ul style="list-style-type: none"> <li>• FSA-449B</li> <li>• FSA-449A</li> </ul> * * *  <ul style="list-style-type: none"> <li>• FSA's telephone log</li> <li>• bills</li> <li>• receipts.</li> </ul>
	3	Reviews and initials approval in lower right corner of all supporting documents.
	4	Approves FSA-449A and date.  <b>Note:</b> The review is very important. Signing and entering the reviewer's code (State and county code) must signify that a <b>conscious effort</b> was made to critique and examine FSA-449B and FSA-449A.
	5	Keeps copies of FSA-449A's, FSA-449B's, and supporting documents under file NAP 6-3, Voucher Folders, in LA folder.
	6	Enters FSA-449A information into the automated Voucher Entry System according to Part 4. Pay FSA-449A's according to Part 5.

Reports, Forms, Abbreviations, and Redelegations of Authority

Reports

This table lists the required reports in this handbook.

Report Control Number	Title	Reporting Period	Submission Date	Negative Report	Reference
	LA Vouchers of \$1500 or More Require State Office Approval	Monthly	State Office submit to PECD by 10 <sup>th</sup> of the month.	Not required.	200
	Training Reports: <ul style="list-style-type: none"> <li>• Phase I and Phase II</li> <li>• update.</li> </ul>	Monthly from January through July	State Office submit to PECD by 10 <sup>th</sup> of the month following training, January through July.	Required	63

Forms

This table lists all forms referenced in this handbook.

Number	Title	Display Reference	Reference
AD-202	Travel Authorization (Temporary Duty Travel)		200
AD-1197	Request for USDA Identification Badge		25
CCC-455	Loss Adjuster Service Agreement		Text
CCC-576	Notice of Loss		225, 304, Ex. 5
FCI-6	Statement of Facts		228
FD-258	Fingerprint Chart		25
FSA-449A	Voucher for Payment of Services for Loss Adjustment	225	Text
FSA-449B	Loss Adjuster’s Travel and Expense Claim Form	228	Text
FSA-454	Loss Adjuster ID Card		25, 27, 29
FSA-454B	Loss Adjuster’s Crop Training Certification	28	27, 62, Ex. 2
FSA-577	Report of Supervisory Check		27, 72
FSA-789	Applicant Background Investigation Processing Checklist		25
FSA-1065-2	Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters	29	27
OF-306	Declaration of Federal Employment		25
SF-87	Fingerprint Chart		25
SF-3881	ACH Vendor/Miscellaneous Payment Enrollment Form		22

**Reports, Forms, Abbreviations, and Delegations of Authority (Continued)**

**Abbreviations Not Listed in 1-CM**

The following abbreviations are not listed in 1-CM.

<b>Approved Abbreviation</b>	<b>Term</b>	<b>Reference</b>
EPD	Emergency Preparedness Division	25
MPCI	Multi-Peril Crop Insurance	44
OJT	on-the-job training	56, 66, 67, 209, Ex. 4, 5
PFC	production flexibility contract	750

**Delegations of Authority**

None.