

United States Department of Agriculture
 Farm Service Agency
 Oklahoma State FSA Office
 Stillwater, OK 74074-2653

Special Programs 1-SP	OK Amendment 1
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Approved by: State Executive Director



Amendment Transmittal

A Reason for Amendment

This amendment provides:

- reference to OK Exhibit 1 in paragraph 58
- a Trade Adjustment Assistance (TAA) Checklist in OK Exhibit 1.

Page Control Chart		
TC	Text	Exhibits
OK TC Pages 1-2 (add)	OK Page 2-58 (add)	OK Exhibit 1, Pages 1-3 (add)

Part 2 Trade Adjustment Assistance Program

Section 4 Producer Eligibility and Application

58 Completing FSA-229..... OK 2-58

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Page No.

OK Exhibits

No. Pages

1 Trade Adjustment Assistance (TAA) Checklist

3

A Instructions for Completing FSA-229

County Offices may use the Trade Adjustment Assistance (TAA) Checklist in OK Exhibit 1 to ensure required documents are received timely, properly completed, and proper actions have been taken in the applicable time frames.

Instructions for Completing Trade Adjustment Assistance (TAA) Checklist

Enter information applicable to the petition for which application is made.

Field	Instruction
Applicant	Enter name of TAA applicant.
WEB Application #	Enter application # assigned by the TAA software.
Marketing Year	Enter the marketing year represented by the applicable petition. See Exhibit 6.
Commodity	Enter the commodity represented by the applicable petition. See Exhibit 6.
FAS Petition #	Enter the assigned FAS Petition # applicable to the commodity for which application is made. See Exhibit 6.
Application Software Petition #	Enter the assigned Application Software Petition # applicable to the commodity for which application is made. See Exhibit 6.
√ - Date	Enter a check mark and/or date documents are received and date applicable action is taken.
Notes	Enter any additional information that may need to be noted regarding this application.

TRADE ADJUSTMENT ASSISTANCE (TAA) CHECKLIST

Applicant _____ WEB Application # _____

Marketing Year _____ Commodity _____

FAS Petition # _____ Application Software Petition # _____

√ - Date	Documents	Additional Information
	FSA-229 (9-23-03) Application for TAA (To Be Submitted by Application Deadline)	1-SP, paragraphs 51, 57, and 58 and Exhibit 6
	<input type="checkbox"/> Share Worksheet, if applicable	1-SP, paragraph 27 D
	FSA-237 FAX Authorization, if applicable	1-SP, paragraph 57
	AGI Certification on FSA-229	1-SP, paragraphs 51 and 55
	<input type="checkbox"/> CCC-526, if applicable	1-PL, Part 6.5
	Production Evidence for applicable calendar year (i.e. sales receipts, scale/delivery tickets, invoice w/quantity, cannery statements, fish tickets, etc.) (To Be Submitted by Application Deadline)	1-SP, paragraphs 52, 58, and Exhibit 6
	<input type="checkbox"/> Correct varieties/weight basis	1-SP, Exhibit 7
	<input type="checkbox"/> Marketed in approved State	1-SP, paragraph 40 B
	SF-1199A, Direct Deposit Form or FFAS-12 Waiver	1-SP, paragraph 57 and 1-FI, Part 3
	Applicable CCC-502 form	1-SP, paragraphs 29 and 57
	<input type="checkbox"/> Person Determination for marketing year	1-SP, paragraphs 29 and 51 1-PL, Part 2, Section 6
	AD-1026, HELC and WC Certification	1-SP, paragraph 57 and 6-CP

TRADE ADJUSTMENT ASSISTANCE (TAA) CHECKLIST, continued

Applicant _____ WEB Application # _____

√ - Date	Documents	Additional Information
	Income Certification on FSA-229 (net fish/farming income for benefit year is less than previous year fish/farming income)	1-SP, paragraphs 51 and 54
	<input type="checkbox"/> Schedule C of Income Tax Form or other acceptable documents for evidence of income (To Be Submitted by COB Sept. 30 of FY Application Filed)	1-SP, paragraph 54
	SCIMS Worksheet	
	<input type="checkbox"/> Recorded in SCIMS	1-SP, paragraphs 71 and 85
	CSREES Certification Form for proof of Technical Assistance provided (To Be Submitted by COB Sept. 30 of FY Application Filed)	1-SP, paragraphs 51 and 53 and Exhibit 5
	TAA Application loaded in WEB application software	1-SP, paragraphs 72, 73, 85, and 86
	COC or designee Approval/Disapproval	1-SP, paragraph 72 and Exhibit 1
	<input type="checkbox"/> Signed/approved FSA-229 sent to applicant	1-SP, paragraph 72
	<input type="checkbox"/> Disapproval letter sent, if applicable	1-SP, paragraph 72
	Payment issued	
	<input type="checkbox"/> Year	

Notes: