

UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency
Washington, DC 20250

**Common Management and
Operating Provisions
1-CM (Revision 3)**

Amendment 39

Approved by: Acting Deputy Administrator, Farm Programs



Amendment Transmittal

A Background

This amendment contains changes because of the Food, Conservation, and Energy Act of 2008, SCIMS database software enhancements, and outdated information.

B Reason for Amendment

Subparagraph 1 C has been amended to update related handbooks references.

Subparagraph 1 D has been amended to add the Food, Conservation, and Energy Act of 2008 to authorities.

Part 4, Section 2 has been withdrawn because the programs no longer exist.

Part 4, Section 3 has been amended to update crop table references.

Paragraph 104 has been withdrawn because the content has been incorporated into paragraph 96.

Subparagraph 121 B has been amended to edit the note about 1 member LLC's and revocable trusts.

Subparagraph 122 A has been amended to edit the note about revocable trusts using Social Security numbers.

Paragraph 126 has been withdrawn because FLP assigned numbers are no longer used and have ceased to exist.

Subparagraph 130 D has been amended to update the subparagraph referenced in the table.

Subparagraph 141 F has been amended to update the eAuthentication Login screen print.

Paragraph 155 has been amended to provide additional information about Potential Duplicate Reports.

Amendment Transmittal (Continued)

B Reason for Amendment (Continued)

Subparagraph 175 I has been amended to update Navigation Bar options on the Customer Search Page.

Subparagraph 177 A has been amended to update the Add Individual Customer Screen example.

Subparagraphs 177 B and 178 B have been amended to provide a note about **not** inactivating FLP customers.

Subparagraph 178 A has been amended to update the Add Business Customer Screen example.

Subparagraph 178 B has been amended to add a bullet to the note about optional voting district entries.

Paragraph 178.6 has been amended to provide information about 1 member LLC's.

Paragraphs 178.7 and 178.8 have been amended to provide minor edits.

Subparagraph 178.9 C has been removed because the voting flag is now DAFO's responsibility.

Paragraph 193.5 has been added to provide procedure for the SCIMS Transmission Sequence Error Reports.

Subparagraph 197 C has been amended to edit the "Action" field for FLP customers.

Subparagraph 707 D has been amended to update the paragraph referenced.

Subparagraphs 708 C, 709 D, 710 E, 711 D, 712 B, 713 E, 714 B, 715 E, 716 B, 717 C, 728.5 A, and 728.5 B have been amended to include a note about DAFO program forms being revised to include "By" and "Title/Relationship" in applicable signature boxes.

Subparagraph 711 A has been amended to provide clarification in the first bullet.

Paragraph 728 has been amended to include multiple policy and procedure edits because of the revised FSA-211 (12-17-08).

Subparagraph 728.5 C has been amended to include a note about spousal signature requirements **not** applying to NRCS.

Subparagraph 729 A has been amended to remove bullets referencing automated fiduciary/power of attorney files.

Subparagraphs 729.4 A and 279.6 A have been amended to remove bullets referencing automated power of attorney file.

Amendment Transmittal (Continued)

B Reason for Amendment (Continued)

Exhibit 11.5 has been amended to update National and State SCIMS Security Officers referenced.

Exhibit 50 has been amended to:

- update list of forms and documents for which FAXed signatures shall **not** be accepted
- remove FOIA and Privacy Act requests for information.

Exhibit 51 has been amended to:

- add a note to subparagraph A, answer 9, about DAFP program forms being revised to include “By” and “Title/Relationship” in applicable signature boxes
- update subparagraph B, answer 1, to address the new FSA-211.

Exhibit 101 has been amended to update State and county codes for Virginia.

Exhibit 102 has been amended to update approved abbreviations and acronyms.

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Part 1 Basic Provisions

1 Overview

A Handbook Purpose

This handbook contains common management and operating provisions for program management activities, functions, and automated applications.

B Public Information

Follow instructions in 2-INFO, paragraph 69 to make determinations on providing requested producer name and address lists to the public.

C Related Handbooks

FSA handbooks related to common management are:

- 1-AFIDA for foreign person procedure
- 15-AO for county and community persons
- 16-AO for State and county organization and administration
- 25-AS for record keeping requirements
- 3-BU for State and county administrative and program funds
- 3-CM for farm records
- 5-CM for common payment limitation provisions
- 1-CMA for CMA and LSA procedures
- 2-CP for acreage reporting procedures
- 6-CP for HELC and WC procedures
- 1-CRP for Agricultural Resource Conservation Program procedures
- *-1-DCP for DCP procedures
- 2-DCP for DCP automation procedures--*
- 1-FI for fiscal management procedures
- 58-FI for claim and receivable procedures
- 62-FI for reporting data to IRS
- 2-INFO for information available to the public
- 2-IRM for computer backups and storage
- * * *
- 1-PL for payment limitation procedures
- 2-PL for entity file and joint operation procedures
- *-3-PL for web-based subsidiary files
- 4-PL for payment limitation procedure.--*
- * * *

1 Overview (Continued)

D Sources of Authority

Authority for this handbook is in:

- Commodity Credit Corporation Charter Act, as amended
- Food Security Act of 1985
- Federal Agriculture Improvement and Reform Act of 1996
- *--Food, Conservation, and Energy Act of 2008.--*

Part 4 Crop Data Table Maintenance

76 Overview

A Introduction

*--This part covers procedure for accessing, updating, and printing crop or payment parameter tables.

The payment parameter file contains program parameters specific to the direct and counter-cyclical program payments.--*

The crop data table file contains values, flags, and program parameters specific to the production flexibility crop programs for wheat, feed grains, cotton, and rice.

The values and flags for these crops are used to control the operation of application software, particularly the payment process. They permit the software to be changed quickly to reflect program decisions.

Section 1 Accessing Crop Table Maintenance

77 Access Crop Table Maintenance

A Introduction

This paragraph provides steps for accessing the crop records for 1996 and later years.

B Accessing Crop Tables

To access the crop or payment parameter tables from Menu MAAB00 for:

- tobacco or 2001 peanuts:
 - ENTER “1”, “Program Crop Table”, to display Screen MAA00401
 - ENTER “Program Crop Table Year”, to display Screen HCA010-00
 - continue according to subparagraph D
- 2002 and later years DCP crops:
 - ENTER “4”, “Direct Payments Parameter File” or ENTER “6”, “Counter Cyclical Payments Parameter File”
 - continue according to Section 4.

* * *

78-80 (Reserved)

Section 2 (Withdrawn--Am. 39)

81-83 (Withdrawn--Am. 39)

84-95 (Reserved)

--Section 3 Direct and Counter-Cyclical Parameter Crop Table for 2002 and Future Years--**96 Overview****A Introduction**

This section provides:

- procedure for printing the crop table report
- an explanation of the printed data
- instructions for:
 - verifying the downloaded information
 - *--printing the Direct and Counter-Cyclical Parameter Crop Table from Menu MAA000.

B Valid Crops

This section is valid for the following crops **only**:

- barley
- canola
- corn
- crambe
- flax
- grain sorghum
- mustard
- oats
- peanuts
- rapeseed
- rice
- safflower
- sesame
- soybeans
- sunflowers
- upland cotton--*
- wheat.

***--97 Viewing Direct and Counter-Cyclical Parameter Crop Tables From Menu MAAB00**

A Background

The Direct and Counter-Cyclical Parameter Crop Tables are updated during County Office release installation.

B Viewing the Table From Menu MAAB00

Follow the steps in this table to view the Direct and Counter-Cyclical Parameter Crop Tables from Menu MAAB00.

Step	Menu or Screen	Action
1	FAX250	ENTER "3" or "4", "Application Processing", and PRESS "Enter".
2	FAX09002	Enter the appropriate county, if applicable, and PRESS "Enter".
3	FAX07001	ENTER "9", "Common Provisions", and PRESS "Enter".
4	MA0000	ENTER "1", "County Office Table Files Maintenance", and PRESS "Enter".
5	MAA000	ENTER "2", "Crop Table Maintenance", and PRESS "Enter".
6	MAAB00	ENTER either of the following: <ul style="list-style-type: none"> • "4", "Direct Payments Parameter File", and PRESS "Enter" • "6", "Counter-Cyclical Payments Parameter File", and PRESS "Enter".

C Printing Table

Print the Direct and Counter-Cyclical Parameter Crop Tables according to paragraph 98.

D Verifying Table

Verify the Direct and Counter-Cyclical Parameter Crop Table values according to--* paragraph 100.

--98 Printing Direct and Counter-Cyclical Parameter Crop Table Report--

A Printing Program Crop Table

Follow the steps in this table to print the crop table for program crops.

Step	Menu or Screen	Action
1	FAX250	ENTER "3" or "4", "Application Processing", and PRESS "Enter".
2	FAX09002	Enter the appropriate county, if applicable, and PRESS "Enter".
3	FAX07001	ENTER "9", "Common Provisions", and PRESS "Enter".
4	MA0000	ENTER "1", "County Office Table Files Maintenance", and PRESS "Enter".
5	*--MAA000	ENTER "2", "Crop Table Maintenance", and PRESS "Enter".
6	MAAB00	ENTER either of the following: <ul style="list-style-type: none"> • "5", "Print Direct Payments Parameter Crop File", and PRESS "Enter" • "7", "Print Counter-Cyclical Payments Parameter File", and PRESS "Enter".
7	MADPRT01	Enter printer ID and PRESS "Enter".
8	MAA25301	Do either of the following: <ul style="list-style-type: none"> • enter a specific crop year and PRESS "Enter" • ENTER "9", "ALL" and PRESS "Enter".--*

99 Explanation of Program Data

*--A Report MAA251-R001

Following is an example of Report MAA251-R001.

CALIFORNIA	USDA-FSA		Prepared: 03-12-2009
A TULARE	Direct Payment	Program Parameter File	
Report ID: MAA251-R001	2009		Page: 1
WHEAT	0011		
Advance Payment Rate	0.11440000	Final Payment Rate	0.52000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
OATS	0016		
Advance Payment Rate	0.00528000	Final Payment Rate	0.02400000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
RICE	0018		
Advance Payment Rate	0.00517000	Final Payment Rate	0.02350000
FCEA Advance Payment Rate	0.51700000	FCEA Final Payment Rate	2.35000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
UPLAND COTTON	0021		
Advance Payment Rate	0.01467400	Final Payment Rate	0.06670000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
FLAX	0031		
Advance Payment Rate	0.09856000	Final Payment Rate	0.44800000
FCEA Advance Payment Rate	0.17600000	FCEA Final Payment Rate	0.80000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
CORN	0041		
Advance Payment Rate	0.06160000	Final Payment Rate	0.28000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
GRAIN SORGHUM	0051		
Advance Payment Rate	0.07700000	Final Payment Rate	0.35000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
PEANUTS	0075		
Advance Payment Rate	0.00396000	Final Payment Rate	0.01800000
FCEA Advance Payment Rate	7.92000000	FCEA Final Payment Rate	36.00000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011
SUNFLOWERS	0078		
Advance Payment Rate	0.00176000	Final Payment Rate	0.00800000
FCEA Advance Payment Rate	0.17600000	FCEA Final Payment Rate	0.80000000
Beginning Advance Payment Date	12/01/2008	Beginning Final Payment Date	10/01/2009
Ending Advance Payment Date	09/30/2009	Ending Final Payment Date	10/31/2011

--*

99 Explanation of Program Data (Continued)

B Explanation of Data

*--The following table provides an explanation of the data on Report MAA251-R001.

Field	Description
Advance Payment Rate	Rate used to calculate the advance payment.
Beginning Advance Payment Date	Earliest date payment can be issued.
Ending Advance Payment Date	Last date advance payment can be issued.
Final Payment Rate	Rate used to calculate the final payment.
Beginning Final Payment Rate	Earliest date final payment can be issued.
Ending Final Payment Rate	Last date final payment can be issued.
FCEA Advance Payment Rate	Rate determined in the Food, Conservation, and Energy Act of 2008. These rates can be converted for crops that are maintained in a different unit of measure and become the advance or final payment rate, as applicable.
FCEA Final Payment Rate	

--*

--100 Reviewing and Verifying Downloaded Values on Report MAA251-R001--

A Verifying Data

CED shall:

- ensure that 2 County Office employees review and verify that the crop table values are correct by comparing the values to information provided in * * * national notices
- maintain a file, by FY, of the reports printed with the:
 - signatures of the reviewing employees
 - date of the review.

B Reporting Errors

If an error is discovered after the review and comparison of the reports, immediately notify the State Office of the discrepancy.

101-103 (Reserved)

Section 4 Payment Parameter File for 2002 and Future Years

104 (Withdrawn--Am. 39)

105 Direct and Counter-Cyclical Payment Parameters

A Background

The Payment Parameter File is updated:

- during last job processing after receiving the file
- when options 4, 5, 6, or 7 are accessed on Menu MAAB00 if file has not already been built and populated.

B Accessing Payment Parameter Screens

Follow the steps in this table to access the following:

- Screen MAA25002 for direct payments
- Screen MAA25502 for counter-cyclical payments.

Step	Menu or Screen	Action
1	FAX250	ENTER "3" or "4", "Application Processing", and PRESS "Enter".
2	FAX09002	Enter the appropriate county, if applicable, and PRESS "Enter".
3	FAX07001	ENTER "9", "Common Provisions", and PRESS "Enter".
4	MA0000	ENTER "2", "Crop Table Maintenance", and PRESS "Enter".
5	MAAB00	ENTER "4", "Direct Payments Parameter File", or "6", "Counter Cyclical Payments Parameter File", and PRESS "Enter".
6	MAA25001 or MAA25501	Enter the Crop Code and Crop Year, and PRESS "Enter".

Part 6 General Rules for Identifying Numbers

Section 1 Producer Identifying Numbers

121 Requirements and Purpose

A Producer Identifying Number

The Internal Revenue Code requires recipients of program payments to provide identifying numbers to USDA, so that payments can be correctly credited to participants' total earnings and reported to IRS. Except as provided in paragraph 124, make payments to producers who have provided a permanent ID number that IRS and SSA recognize as valid. Do **not** make payments using temporary ID numbers.

Note: See Exhibit 10 for additional information about EIN's.

B Need for Separate ID Numbers

Entities that are **not** required by IRS to have separate ID numbers, such as LLC's with 1 member and revocable trusts * * * may be required to obtain EIN's to differentiate payments.

***--Notes:** If customers use their personal Social Security number for an entity, such as a 1 member LLC or revocable trust, that same Social Security number shall **not** be--* entered in SCIMS for the respective customer as an individual, nor shall they receive monetary benefits from FSA as an individual using their personal Social Security number in the same year.

* * *

--FLP customers using a personal Social Security number for a past or current loan, must obtain EIN for an entity, including 1 member LLC revocable trusts.--

122 Obtaining ID Number

A Obtain ID Number

Follow guidelines in 1-PL to determine the proper identifying number. Instructions in this table provide additional guidance and clarification for obtaining and using identifying numbers in certain cases.

Note See Exhibit 10 for additional information about EIN's.

Condition	Action
Person Signing as an Agent	<ul style="list-style-type: none"> • Obtain the Social Security number, EIN, or IRS identifying number for the producer. Obtain the agent's ID number or assign a temporary ID number. • The superintendent or authorized BIA representative may sign all program documents as an agent for entities on tribal and allotted lands. Issue payments to BIA with the Indian entity as the producer, using BIA number according to paragraph 124.
U.S. Territories, Possessions, and Trusts	<ul style="list-style-type: none"> • Obtain producer's Social Security number, EIN, or IRS identifying number before making producer payments. Inform producers that payments will not be reported to IRS. • Obtain information for determining whether a person is a resident of Puerto Rico from: <div style="text-align: center;"> <p>U.S. INTERNAL REVENUE SERVICE 255 PONCE DE LEON AVE STOP 28 HATO REY PR 00917-1900.</p> </div>

122 Obtaining ID Number (Continued)

A Obtain ID Number (Continued)

Condition	Action
Corporation, LLC, Limited Partnership, Valid Trust, and Estate	<p>Obtain EIN of entity and stockholders, partners, beneficiaries, or heirs according to 1-PL.</p> <p>Notes: For:</p> <ul style="list-style-type: none"> • revocable trusts using a Social Security number, during the lifetime of the grantor of the revocable trust, and while the grantor is serving as trustee of his or her revocable trust, the <ul style="list-style-type: none"> *--Grantor's Social Security number may be used as the revocable trust's TIN; however, on appointment of a third party as trustee or successor trustee, the trust will be required to apply for and use EIN • estates using a Social Security number, IRS requires that--* <ul style="list-style-type: none"> 1 of the first duties of a personal representative, such as executor, administrator, etc. of a decedent, is to apply for an EIN for the estate; IRS requires that payments issued to a decedent before his or her death must be reported on IRS 1099-MISC using the individual's Social Security number; payments issued after his or her death must be reported on IRS 1099-MISC using the estate's EIN. <p>It is the responsibility and duty of the personal representative of *--the estate to provide EIN acquired for the estate to the County Office.--*</p> <p style="text-align: center;">* * *</p>

125 ID Numbers for Land Owned by Federal Government Agencies

A Federal Government Land

This table lists the ID numbers for land owned by Federal Government Agencies that currently reside on the SCIMS database.

Agency	ID Number
Bureau of Indian Affairs	52 1176810
* * *	
Bureau of Land Management	999991101
Bureau of Reclamation	999991102
Farm Service Agency	999991103
<p>*--Note: This ID number is not to be used for payment purposes including assignments to FSA. The tax identification number for FSA, CCC, as indicated in 62-FI, subparagraph 47 C (Step 2), should be used with the "E" ID type for all FLP assignments.--*</p>	
US Forest Service	999991104
United States Army-Army Corps of Engineers	999991105
US Navy-US Marine Corps	999991106
United States Air Force	999991107
US Fish and Wildlife Service	999991108
Bureau of Prisons	999991109
National Park Service	999991110
Nat'l Aeronautics and Space Administration	999991111
Agricultural Research Service	999991112
Department of Energy	999991113
Federal Deposit Insurance Corp	999991114
Tennessee Valley Authority	999991115
Small Business Association	999991116
US Department of Interior	999991117
Department of Justice	999991118

* * *

125 ID Numbers for Land Owned by Federal Government Agencies (Continued)**A Federal Government Land (Continued)**

Agency	ID Number
US Dept Housing Urban Development	999991119
EFP	999991200
Disaster Share Balance	999991210
Internal Revenue Service	999991211
Rural Development Agency	999991212
Department of Veterans Affairs	999991213
Commodity Credit Corporation	999991214
Federal Aviation Administration	999991215
Federal Grain Inspection Service	999991216

Restrictions: County Offices are restricted from updating the following customer data fields for all ID numbers listed in this table:

- “Business Name”
- “Business Type”
- “ID Number”
- “Tax ID Type”.

Changes to these fields are restricted to the National Office only.

Note: The Agency titles agree with the titles used in the SCIMS customer database.

B ID Type for Federal Government

Using the drop-down menu, select “Federal” as the ID type for ID numbers entered for Federal Government Agencies **except** BIA.

C Business Type for Federal Government

Using the drop-down menu, select “Federal owned” as the business type for Federal Agencies.

D Obtaining ID Numbers

Contact State Offices for assistance in obtaining ID numbers from the Common Provisions Branch, PECD for Federal Government Agencies not listed in subparagraph A.

126 (Withdrawn-Am. 39)

127 IRS Identifying Number**A IRS Identifying Number**

The IRS-assigned identifying number is composed of 9 numeric digits and has an ID type of “T”. The first digit is always “9”.

Use these IRS-assigned numbers in the same way as Social Security numbers.

Producers who are non-resident aliens and ineligible to obtain a Social Security (ID type “S”) number, may be issued an IRS-assigned number (ID type “T”) to process FSA payments.

Note: See 1-PL for foreign person eligibility determinations.

B Obtaining IRS Identifying Numbers

To obtain an IRS tax ID number, the producer shall:

- complete IRS form W-7 and return it and any required supporting documents to IRS
- report IRS-assigned identifying number to the County Office.

Note: As a service to producers, County Offices may want to obtain a supply of IRS form W-7 by calling their local IRS office. Order only what is needed, since usage is minimal. Nationally, FSA uses an average of 30 forms per year.

130 Invalid/Questionable Social Security Numbers (Continued)

C Reports

Each time ID numbers are validated according to subparagraph B, a report will be printed, by county, listing the ID numbers that were not found on the SSA table.

The following is an example of the report.

KOMO MKP705R1		U.S. DEPARTMENT OF AGRICULTURE		JOB NO: 102794001		10-27-94		PAGE 6	
STATE: 01 - ALABAMA		FARM SERVICE AGENCY							
COUNTY: 011 - BULLOCK		KANSAS CITY MANAGEMENT OFFICE							
INVALID/QUESTIONABLE SOCIAL SECURITY NUMBERS									
	LAST NAME	FIRST NAME	MI	SSN	CODE*				
	SALTS	WILLIAM	B	000801111 S	I				
	ROBERSON	SAMUEL	J	313072323 S	I				
	WILLIAMS	JOHN		700089131 S	I				
	HALLOWAY	DANIEL	M	900000000 I	Q				
TOTAL RECORDS PRINTED:		4							
*CODES: "I" - INVALID "Q" - QUESTIONABLE - BEGINS WITH "8" OR "9" "N" - NON-NUMERIC SSN									

Notes: The report number will be different, depending on the report being run.

State Offices will receive a summary page listing the total number of records processed for each County Office.

130 Invalid/Questionable Social Security Numbers (Continued)

D County Office Action

County Offices shall follow this table for each entry on the report.

IF the ID number is incorrect...	THEN follow...
and should be changed	subparagraphs 194 B and C to change the ID in SCIMS.
should be changed, and a payment in the current year has been made to the customer using the ID number	*--subparagraph 194 D to change--* the ID in SCIMS.

E State Office Action

State Offices shall follow up with County Offices to ensure that the corrective action in subparagraph D has been taken.

131-140 (Reserved)

141 Accessing Name and Address From SCIMS (Continued)

F eAuthentication Login Screen (Continued)

*--

The screenshot shows the 'Customer Search Page' of the USDA Service Center Information Management System. The page has a green header with the USDA logo and the system name. A left-hand navigation bar contains links for 'Navigation', 'Customer Search', 'Potential Duplicate Report', 'Customer Data Listings', 'Restricted ID', and 'Log Off'. The main content area is a search form with the following fields and options:

- State:** DISTRICT OF COLUMBIA (dropdown)
- County:** DISTRICT OF COLUMBIA (dropdown)
- Service Center:** HEADQUARTERS FACILITY (dropdown)
- National Search:**
- Service Center Details:** (button)
- Type:**
 - Individual
 - Business
 - Both
- Active:** Active Active and Inactive
- Name:**
 - Starts With
 - Exact Match
 - Last or Business:
 - First:
- Tax ID:**
 - ID:
 - ID Type: Select One (dropdown)
 - Whole ID Last 4 Digits
- Other:**
 - Common Name:
 - Zip Code:
 - Phone No.:

At the bottom of the search area are 'Search' and 'Reset' buttons. A 'Notice!' box on the left side of the form contains a disclaimer about the system's use.

--*

Notes: When exiting SCIMS, **always** CLICK “Log Off” on the navigation bar on the left side of the screen.

Never exit SCIMS from the “Close Box” (Red “X” in the upper right-hand corner of the screen on the blue Microsoft Internet Explorer blue banner) or clicking the “Home” button on the tool bar. Exiting from the “Close Box” or “Home” button will lock-out other users from accessing the last customer accessed for 2 hours. If SCIMS is inadvertently exited from the “Close Box” or “Home” button, user shall **immediately** re-access the applicable record and “Log Off” from the navigation bar.

--154 Potential Duplicate Customers*A SCIMS Potential Duplicate Process**

During the SCIMS migration process, customer records were compared to determine whether the customer has potential duplicate records. The potential duplicate process compares customer data that matches other customers, but is not determined an exact match. Not all customers identified as potential duplicates will be duplicates.

Counties shall keep in mind that properly resolving duplicates is a very important process in the success of SCIMS.

B Individual Counts

Individual customer data is compared to other individual customers to determine whether the following data matches:

- last name
- first name
- suffix
- 5-digit ZIP Code.

C Business Criteria

Business customer data is compared to other business customers to determine whether the following data matches:

- business name
- 5-digit ZIP Code.

D Identification Number Criteria

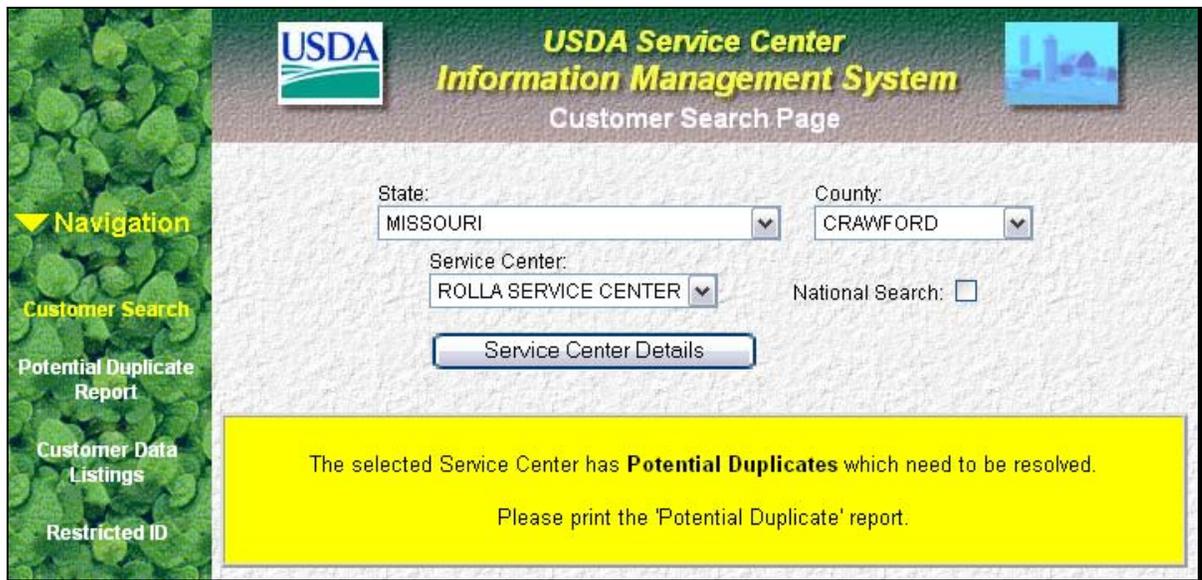
In a separate comparison, the migration process compared individuals and businesses to determine whether only the ID number matches regardless of any other criteria.--*

155 Potential Duplicate Report

A Purpose

A potential duplicate report is available that lists all potential duplicates that have been identified for every County Office. The report is on the SCIMS web site and can be generated and printed as many times as necessary until all duplicates have been resolved.

*--The potential duplicate’s resolution process should be completed as soon as possible when contacted by the State SCIMS officer and/or when the user receives the yellow banner message stating, “The selected Service Center has **Potential Duplicates** which need to be resolved. Please print the ‘Potential Duplicate’ report”, as follows.



Note: Duplicates that have been resolved will **not** be removed from the report until the next **workday**.

B Accessing Report

County Offices shall access and print the Potential Duplicate Report for their county according to the following table.

Step	Action
1	Access SCIMS web site according to paragraph 141.
2	On the Customer Search Page, CLICK “ Potential Duplicate Report ”.--*
3	Select applicable State and Service Center for Potential Duplicate Report.
4	CLICK “ Generate Report ”.
5	On the browser’s Navigation Bar, CLICK “ Print ”.

175 Customer Search in SCIMS (Continued)

H Example of No Records Available Screen

This is an example of the No Records Available Screen.



From this page, the user may elect to add a new customer or return to the Search Page.

Note: Search criteria from previous search will be displayed on Customer Search Page when user elects to search again.

I Navigation Bar

*--The Customer Search Page navigation bar provides options, as follows:

- “Customer Search”
- “Potential Duplicate Report”
- “Customer Data Listings”
- “Restricted ID” (**For National Office Use Only**)
- “Log Off”.

Note: As additional SCIMS options are developed, they will be accessed by clicking the applicable option.--*

By clicking on “Log Off”, the user will be taken out of SCIMS, but will still be in the selected browser. The user’s sign-on and password are still resident and will **not** need to be re-entered when accessing SCIMS later. This creates a security concern, because anyone can use the PC to access SCIMS. To disable the sign-on and password, close the Internet browser.

Note: When exiting SCIMS, **always** CLICK “**Log Off**” on the navigation bar on the left side of the screen. **Never** exit SCIMS from the “Close Box” (Red “X” in the upper right corner of the screen on the blue Microsoft Internet Explorer blue banner) or clicking the “Home” button on the tool bar. Exiting from the “Close Box” or “Home” button will lock out other users from accessing the last customer accessed for 2 hours. If SCIMS is inadvertently exited from the “Close Box” or “Home” button, user shall **immediately** re-access the applicable record and “Log Off” from the navigation bar.

176 Adding Customers to SCIMS**A Purpose**

Customer data that is not in the SCIMS database shall be added according to this paragraph and paragraphs 177 through 179. Sufficient customer core data is required to add a customer. If sufficient data is not entered, a download to the AS/400 name and address files will not occur.

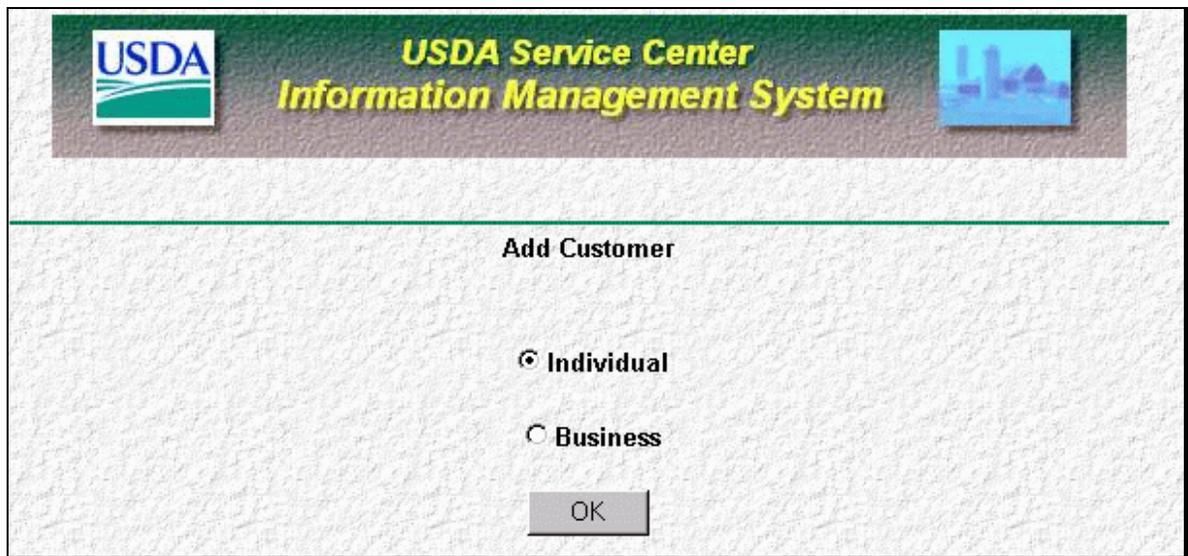
B Type of Customer

The customer shall be added as either of the following:

- “Individual”
- “Business”.

When the selection is made, CLICK “OK”.

This is an example of the Add Customer Screen.



USDA Service Center
Information Management System

Add Customer

Individual

Business

OK

176 Adding Customers to SCIMS (Continued)

C Entering Identification Data

Screens for adding a customer are different depending upon whether the add customer selection is “Individual” or “Business”.

The optional and required fields for core customer data for:

- an individual are described in paragraphs 177 and 179
- a business are described in paragraphs 178 and 179.

***--Note:** Required fields for core customer data are marked with an asterisk.--*

Service Centers shall obtain sufficient information about the customer to create a complete record for downloading to the AS/400.

Obtaining information that is considered optional about the customer is encouraged as long as the customer is willing to provide the information. In no case is the optional data required, except as noted for FLP customers.

177 Entering Customer Core Data for an Individual

A Selecting an Individual

This is an example of the Add Individual Customer Screen.

*--

--*

After selecting an individual, the following information may be added.

Field	Required	Valid Entry	
Tax ID		Customer's Social Security number, EIN, or TIN; required if the customer wants to receive monetary benefits. If an ID number is not entered and the customer is linked to a county, a customer ID will be assigned by SCIMS.	
		--Notes: Do not change tax ID if they were ever an FLP customer without notifying FLP.--	
		Assigned customer ID will not be displayed in SCIMS.	
Tax ID Type		IF an ID number is...	THEN click the drop-down menu to select...
		entered	"IRS Number" or "Social Security Number".
		not entered	"No Tax Id".
Last Name	X	Customer's last name.	
First Name	X	Customer's first name.	

177 Entering Customer Core Data for an Individual (Continued)

B Entering Additional Customer Data (Continued)

Field	Required	Valid Entry
Inactive Customer Indicator		<p>To indicate activity status of customer, use the drop-down menu to select either of the following:</p> <ul style="list-style-type: none"> • active record • inactive record. <p>Notes: Active record must have at least 1 active program participation, including FLP, and at least 1 active address. FSA program participation must have at least 1 legacy link.</p> <p>Inactive record must have all active program participation deleted and inactive customer program participation must be added. FSA program participation must have all legacy links deleted. “Inactive date” will display date and time customer’s inactive record was established below the “inactive customer indicator”.</p> <p>Do not inactivate a customer in SCIMS until all benefits are issued and all program participation, including FLP, is complete.</p> <p>*--Do not inactivate customers if they were ever FLP customers without consulting FLP.--*</p> <p>If multi-county customer, do not inactivate without consulting with other County Offices with existing legacy links, including FLP.</p> <p>If multi-agency customer, user shall not activate or inactivate other agencies’ customers unless authorized by the respective agency.</p>

177 Entering Customer Core Data for an Individual (Continued)

B Entering Additional Customer Data (Continued)

Field	Required	Valid Entry
Prefix		<ul style="list-style-type: none"> • Defaults to “None”. • Use the drop-down menu to select 1 of the following: <ul style="list-style-type: none"> • “DR” • “MISS” • “MR” • “MRS” • “MS” • “REV”. <p>Note: This data is required for FLP customers.</p>
Suffix		<ul style="list-style-type: none"> • Defaults to “None”. • Use the drop-down menu to select 1 of the following: <ul style="list-style-type: none"> • “JR” • “SR” • “I” • “II” • “III” • “IV” • “V” • “DDS” • “DVM” • “MD”.
Legal Name		<p>Indicates that the First Name, Middle Name, and Last Name of the individual have been verified to be their legal name.</p> <p>*--Do not change legal name if they were ever FLP customers without consulting FLP.--*</p> <p>If the customer has completed CCC-10, FSA-2001, or FSA-2301, check applicable “Yes” or “No” box.</p> <p>Note: Legal name indicator does not download to AS/400 name and address record.</p>
Birth Date		<p>If the customer volunteers their birth date, enter the date in the “MM/DD/YYYY” format.</p>

177 Entering Customer Core Data for an Individual (Continued)

B Entering Additional Customer Data (Continued)

Field	Required	Valid Entry
Birth Date Determination Code		<p>To indicate how the birth date of the customer was determined, use the drop-down menu to select either of the following:</p> <ul style="list-style-type: none"> • “Customer Declared” indicates verbal information directly from the customer or submission by the customer on a standard disclosure form •*--“Employee Declared” indicates an unsubstantiated--* judgment or information obtained through a third party.
Marital Status		<p>To indicate the marital status of the customer, use the drop-down menu to select 1 of the following:</p> <ul style="list-style-type: none"> • “Divorced” • “Married” • “Separated” • “Single” • “Unknown N/A” (default) • “Widow(er)”. <p>Note: This information is required for FLP customers.</p>
Voting District	X	<p>To indicate the congressional district of where the customer resides:</p> <ul style="list-style-type: none"> • select a State from the drop-down menu • enter the 2-digit voting district. <p>To determine the 2-digit voting district, access http://www.house.gov/writerep. Enter the applicable State and ZIP Code. In the case of a P.O. Box address, use the ZIP Code of the customer’s physical location, not the post office.</p>

177 Entering Customer Core Data for an Individual (Continued)

B Entering Additional Customer Data (Continued)

Field	Required	Valid Entry
Language Preference	X	Use the drop-down menu to select either of the following: <ul style="list-style-type: none"> • “English” (default) • “Other” • “Spanish”.
Employee Type	X	Use the drop-down menu to select 1 of the following: <ul style="list-style-type: none"> • “Not an Employee” (default) • “Business Associate” of an FSA/NRCS employee • “Close Relative” of an FSA/NRCS Service Center employee such as, uncle, aunt, nephew, or niece • “Family Member” of an FSA/NRCS Service Center *--employee such as, wife, husband, son, or daughter, including minor children--* • “FSA Employee/Producer”, including DD’s, State Office employees, SED, STC, NRCS AC, and NRCS State Conservationist • “Service Center Employee”, including employees of other Service Center agencies. <p>Note: Ensure that employee type is changed when customer’s status changes.</p>
Ethnicity	X	Use the drop-down menu to select either of the following: <ul style="list-style-type: none"> • “Hispanic or Latino” • “Not Hispanic or Latino”.
Ethnicity Determination Code	X	To indicate how the ethnicity of the customer was determined, use the drop-down menu to select either of the following: <ul style="list-style-type: none"> • “Customer Declared” indicates verbal information directly from the customer or submission by the customer on a standard disclosure form • “Employee Declared” indicates an unsubstantiated judgment or information obtained through a third party. <p>Note: The determination code must be the same as the determination code entered in “race”.</p>

178 Entering Customer Core Data for a Business

A Selecting a Business

This is an example of the Add Business Customer Screen.

*--

After the selection of a business, the following information may be added.

Field	Required	Valid Entry
Tax ID		<p>Business' Federal TIN; required if the business wants to receive monetary benefits. For Federal agencies, use the ID numbers in subparagraph 125 A.</p> <p>Note: If the Federal agency is not listed in subparagraph 125 A, follow subparagraph 125 D.</p>

--*

178 Entering Customer Core Data for a Business (Continued)

A Selecting a Business (Continued)

Field	Required	Valid Entry	
--Tax ID Type--		IF an ID number is...	THEN click the drop-down menu to select...
		entered	1 of the following: <ul style="list-style-type: none"> • “Employer ID” • “Federal” • “Social Security”. Note: The only businesses that can be loaded with a Social Security number are the following: <ul style="list-style-type: none"> • LLC’s (paragraph 178.6) • revocable trusts (paragraph 178.8). For CMA or LSA, ID type must be “employer ID”.
		not entered	“No Tax Id”.
Business Name	X	The business’ name is required.	
***		***	
Business Type	X	Select the business type from the drop-down menu. Notes: The business type selected will download to AS/400 an entity type. See Exhibit 11 for the entity type codes. For CMA or LSA, business type must be “Corporation”.	
ZIP Code	X	The business’ ZIP Code is required. Note: To add a customer with a foreign address that contains alphanumeric characters in the ZIP Code, the County Office’s respective ZIP Code will initially have to be entered to continue to the Enter Customer Data Page. The “ZIP Code” field will not accept alphanumeric characters.	

After the data in this subparagraph is entered, CLICK “Add”. To clear the fields of data entered without adding, CLICK “Reset”.

If a “potential duplicate” message is received, see paragraph 192 for resolving the potential duplicate.

178 Entering Customer Core Data for a Business (Continued)

B Entering Additional Business Data

Business information entered on the previous page is brought forward to the Business Information page. Additional customer data is entered according to the table in this subparagraph. Sufficient customer data should be entered to easily identify the customer.

This is an example of the Business Information page.

*--


Business Information

Common Name: JONES FARMS	Tax ID: 552222222
* Customer Type: Business	Tax ID Type: Employer Id ▼

* Business Name: JONES FARMS	
* Legal Name: Yes <input type="checkbox"/> No <input type="checkbox"/>	
* Business Type: General Partnership ▼	
Business Prior1: General Partnership	
Business Prior2: General Partnership	

Gender: Select One ▼	Gender Determination Code: Select One ▼
Receive Mail Indicators: FSA <input checked="" type="checkbox"/> NRCS <input checked="" type="checkbox"/> RD <input type="checkbox"/>	* Voting District: Select One ▼ * <input type="text"/>
Limited Resource Producer: Select One ▼	Originating Country: UNITED STATES ▼
Inactive Customer Indicator: Active record ▼	Ethnicity: Select One ▼
	Ethnicity Determination Code: Select One ▼

--*

The options on the navigation bar at the top of this page may be used to access the information sections described in paragraph 179. Clicking on “Bottom” will take the user to the very bottom of the page where the “Submit” and “Reset” buttons are located as described in subparagraph 179 K.

178 Entering Customer Core Data for a Business (Continued)

B Entering Additional Business Data (Continued)

The following table lists additional customer data elements. Some entries are required to create the core data in SCIMS.

Field	Required	Valid Entry
Common Name		This will default to the business name, but may be changed.
Customer Type		The only businesses using a Social Security number that can be changed to an individual are: <ul style="list-style-type: none"> • revocable trust • limited liability company.
Business Prior1		The user cannot update. Note: The Business Prior 1 is updated each year at rollover with the previous year's value.
Business Prior2		The user cannot update. Note: The Business Prior 2 is updated each year at rollover with the Business Prior 1 value.
Gender		Indicate the business owner's gender by using the drop-down menu to select 1 of the following: <ul style="list-style-type: none"> • "Org Other" • "Org/Fem Owned" • "Org/Male Owned" • "Unknown".
Gender Determination Code		To indicate how the gender of the business owner was determined, use the drop-down menu to select either of the following: <ul style="list-style-type: none"> • "Customer Declared" indicates verbal information directly from the customer or submission by the customer on a standard disclosure form • "Employee Declared" indicates an unsubstantiated judgment or information obtained through a third party. <p>*--Note: The Determination Code is a required entry if "Gender" is entered.--*</p>

178 Entering Customer Core Data for a Business (Continued)

B Entering Additional Business Data (Continued)

Field	Required	Valid Entry
Receive Mail Indicators		<p>The receive mail indicators:</p> <ul style="list-style-type: none"> • default to blank • must be checked if the customer has requested to receive mail from applicable agency. <p>Note: Must be left blank for CMA or LSA.</p>
Voting District	X	<p>To indicate the congressional district of where the majority of the business' farming interests are situated:</p> <ul style="list-style-type: none"> • select a State from the drop-down menu • enter the 2-digit voting district. <p>To determine the 2-digit voting district, access http://www.house.gov/writerep. Enter the applicable State and ZIP Code.</p> <p>Note: Voting district is an optional entry for the following business types:</p> <ul style="list-style-type: none"> • *--business with "originating country" other than U.S.--* • news media * * * • public body • other.
Limited Resource Producer		<p>To indicate the limited resource producer status, use the drop-down menu to select 1 of the following:</p> <ul style="list-style-type: none"> • "Yes" • "No" (default) • "Unknown". <p>Note: See Exhibit 2 for definition of "limited resource producer" before updating this field.</p>
Originating Country		<p>The country of origin for the foreign entity:</p> <ul style="list-style-type: none"> • defaults to "United States" • may be changed by selecting a country from the drop-down menu. <p>Note: A <u>foreign entity</u> is a corporation, trust, estate, or other similar organization, that has more than 10 percent of its beneficial interest held by individuals who are not:</p> <ul style="list-style-type: none"> • citizens of the U.S. • lawful aliens possessing a valid Alien Registration Receipt Card (Form I-551 or I-151) • see 1-PL, subparagraph 236 A.

178 Entering Customer Core Data for a Business (Continued)

B Entering Additional Business Data (Continued)

Field	Required	Valid Entry
Inactive Customer Indicator		<p>To indicate activity status of customer, use the drop-down menu to select either of the following:</p> <ul style="list-style-type: none"> • “active record” • “inactive record”. <p>Notes: Active record must have at least 1 active program participation, including FLP, and at least 1 active address. FSA program participation must have at least 1 legacy link.</p> <p>Inactive record must have all active program participation deleted and inactive customer program participation must be added. FSA program participation must have all legacy links deleted. “Inactive date” will display date and time customer’s inactive record was established below the “inactive customer indicator”.</p> <p>Do not inactivate a customer in SCIMS until all benefits are issued and all program participation, including FLP, is complete.</p> <p>*--Do not inactivate customers if they were ever FLP customers. If unsure if a customer was ever an FLP customer, consult FLP.--*</p> <p>If multi-county customer, do not inactivate without consulting with other County Offices with existing legacy links, including FLP.</p> <p>If multi-agency customer, user shall not activate or inactivate other agencies’ customers unless authorized by the respective agency.</p>
Ethnicity		<p>To indicate the business owner’s ethnicity, use the drop-down menu to select either of the following:</p> <ul style="list-style-type: none"> • “Hispanic or Latino” • “Not Hispanic or Latino”.
Ethnicity Determination Code		<p>To indicate how the ethnicity of the customer was determined, use the drop-down menu to select either of the following:</p> <ul style="list-style-type: none"> • “Customer Declared” indicates verbal information directly from the customer or submission by the customer on a standard disclosure form • “Employee Declared” indicates an unsubstantiated judgment or information obtained through a third party. <p>Note: The determination code:</p> <ul style="list-style-type: none"> • is a required entry if “Ethnicity” is entered • must be the same as the determination code entered in “Race”.

178.5 Establishing an Estate in SCIMS

A Purpose

*--Estates shall be loaded in SCIMS as a business, using **only** a Federal EIN.

Note: Using a decedent's Social Security number is not consistent with IRS requirements for estates.

One of the first duties of a personal representative, such as executor, administrator, etc., of a decedent is to apply for an EIN for the estate. It is the responsibility and duty of the personal representative of the estate to provide the EIN acquired for the estate to all parties of interest. Go to <http://www.irs.gov/pub/irs-pdf/p559.pdf>, page 2, "personal Representative/Duties" for additional information.

Estates may be loaded in SCIMS without TIN's; however, they will **not** be eligible to be paid until they obtain an EIN.--*

B Loading an Estate in SCIMS

*--When entering an estate in SCIMS, Service Centers shall enter the estate's name as it appears on court documents presented by the executor/administrator of the estate.

Notes: If a deceased customer is currently loaded in SCIMS as an individual with a Social Security number, the record shall **not** be updated and used by the estate. A complete new record shall be loaded in SCIMS as a business for the estate and submitted.

Records that exist in SCIMS for the deceased customer as an individual must be inactivated and unlinked from the database according to subparagraph 178 B and paragraph 195 respectively.--*

* * *

178.6 Establishing LLC's in SCIMS

A Purpose

LLC's shall be loaded in SCIMS using **either** of the following:

- a customer's Social Security number
* * *
- a Federal EIN.

***--Note:** If a customer is a 1 member LLC using their personal Social Security number for LLC, that same Social Security number shall **not** be entered in SCIMS for the respective customer as an individual, nor shall they receive monetary benefits from FSA as an individual or a member of another entity using their personal Social Security number.

B Loading LLC in SCIMS

When entering a new or updating an existing LLC in SCIMS, Service Centers shall enter the customer's name as it appears on the LLC's operating agreement.

LLC should be entered in SCIMS as a business customer with a Federal EIN, Social Security number, or no TIN.--*

Note: If no TIN was entered in SCIMS, a customer ID number will be assigned. Customer ID numbers will **not** be eligible to receive payments.

* * *

178.7 Establishing Irrevocable Trusts in SCIMS

A Purpose

Irrevocable trusts shall be loaded in SCIMS using a Federal EIN.

178.7 Establishing Irrevocable Trusts in SCIMS (Continued)**B Loading an Irrevocable Trust in SCIMS**

When entering a new or updating an existing irrevocable trust in SCIMS, Service Centers *--shall enter the irrevocable trust's name as it appears on the trust documents.--*

* * *

The irrevocable trust should be entered in SCIMS as a business customer with a Federal EIN or no tax ID number.

Note: If no TIN was entered in SCIMS, a customer ID number will be assigned. Customer ID numbers will **not** be eligible to receive payments.

178.8 Establishing a Revocable Trust in SCIMS**A Purpose**

Revocable trusts shall be loaded in SCIMS:

- *--using a Federal EIN or Social Security number, if applicable, or no tax ID number--*
- selecting "Revocable Trust" as the business type.

B Loading a Revocable Trust in SCIMS

When entering a new or updating an existing revocable trust in SCIMS, Service Centers shall *--enter the revocable trust by using the trust's name as it appears on the trust documents.--*

* * *

The revocable trust should be entered in SCIMS as a business customer with a Federal EIN, Social Security number, or no tax ID number.

Notes: If no TIN was entered in SCIMS, a customer ID number will be assigned. Customer ID numbers will **not** be eligible to receive payments.

During the lifetime of the grantor of a revocable trust, and while the grantor is serving as trustee of his or her revocable trust, the grantor's Social Security number may be used as the revocable trust's TIN; however, on appointment of a third party as trustee or successor trustee, the trust shall obtain an EIN.

If customers elect to use their personal Social Security number for a revocable trust, that same Social Security number shall **not** be entered in SCIMS for the respective *--customer as an individual or member of another entity, nor shall they receive--* monetary benefits from FSA, as an individual using their personal Social Security number.

178.9 Establishing Unknowns in SCIMS

A Purpose

There are instances when County Offices do not know who is the owner of a farm/tract of land. If owners/operators are unknown, County Offices shall do thorough research to ensure that the owner/operator is unknown. If the owner/operator is determined to be unknown, County Offices shall record the “unknown” owner/operator in SCIMS as an “unknown”.

B Recording an “Unknown” in SCIMS

Record the “unknown” in SCIMS as follows:

- use the administrative county name for the unknown customer’s “first name”
- use the State abbreviation for the last name
- use the administrative County Office address for all “unknowns”
- follow procedure in 3-CM to add the “unknown” to the farm and remove the previous owner.

Notes: County Offices shall only establish 1 unknown with the administrative county and State abbreviation as the name. This creates 1 customer ID. The **same** customer ID will be used for all unknown owners and/or operators.

Unknown customers are **not** to be entered in SCIMS with any reference to or use of the word “**Delete**”, and any records previously recorded or migrated from the System 36 referencing “Delete” shall be changed to “Unknown” according to this paragraph.

* * *

179 Additional Customer Entries

A Introduction

The following subparagraphs detail customer information to enter for individual or business customers.

After the addition of information in each of the following sections, the Customer Information page will be redisplayed.

B Race Type

Race information for a customer is added by clicking “Add” in the Race Type section. Multiple races may be entered by clicking “Add” for each additional race type.

*--

 * Race Type			
Click to Modify	Click to Delete	Race Type	Race Determination Code
Modify	Select for Deletion	White. Origins in original peoples of Europe, the Middle East, N Africa	Employee Declared
<input type="button" value="Add"/>			
Go to Top Go to Bottom			

* Race Type Code:

* Race Determination:

Select One
Customer Declared
Employee Declared

*** Required**

--*

179 Additional Customer Entries (Continued)

I Legacy Link

The legacy link is used to direct the customer’s core data to the appropriate AS/400 for use by specific programs. All FSA customers must be linked to at least 1 State and county.

Click to Modify	Click to Delete	State	County	Address
Modify	Select for Deletion	SOUTH DAKOTA	MINNEHAHA	33333 222ST ST, HARTFORD, PA 66666-5746

Add

| [Go to Top](#) || [Go to Bottom](#) |

State:

County:

Check One	Delivery Address	City, State ZIP Code
<input checked="" type="radio"/>	33333 222ST ST	HARTFORD, PA 66666-5746

OK Cancel

Add information to this section according to the following table. All legacy link data is required.

Field	Valid Entry
State	Identify the State where the customer’s record should be downloaded to by selecting from the drop-down menu. The default is the State corresponding to the Service Center selected according to subparagraph 141 F.
County	Identify the county where the customer’s record should be downloaded to by selecting from the drop-down menu. The default is the county corresponding to the Service Center selected according to subparagraph 141 F. *--Note: “State Office” has been added to the top of the drop-down menu for Financial Services’ use.--*
Check One	Identify the customer’s address that should be linked with the State and county selected.

179 Additional Customer Entries (Continued)

I Legacy Link (Continued)

Before creating a legacy link, review and make any modifications to the customer’s core data.

For any customer with:

- 1 address, that address should be linked to each county in which the producer participates
- multiple addresses, an address must be linked to each county in which the producer participates.

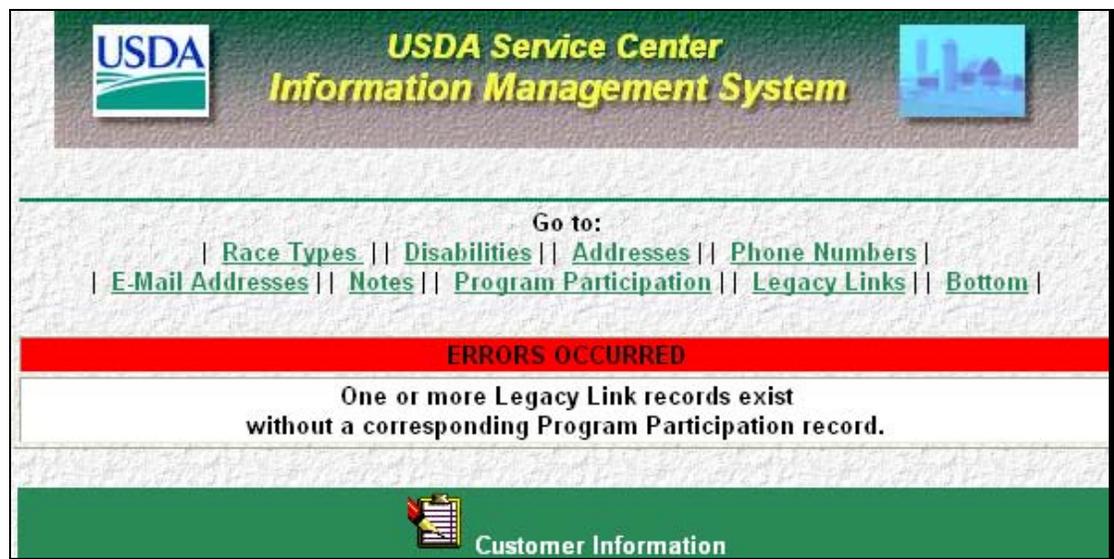
Note: In some cases, different addresses may be linked to different counties. The customer must specify which address is to be directed to each Service Center.

If a linked address is:

- modified, the updated address will be sent to each Service Center it is linked
- deleted, the legacy link must be deleted also.

To retain the entered data, CLICK “OK”. To return to the Customer Information Page and not retain the entered data, CLICK “Cancel”.

***--Note:** FSA Program Participation records and corresponding Legacy Link records **must** exist for **all** newly added and existing records, for the record to be updated. If corresponding records do **not** exist, the following screens will be displayed with error messages to alert users of the missing data.



--*

--193.5 SCIMS Transmission Sequence Error Report*A Introduction**

The SCIMS Transmission Sequence Error Report will print on the AS/400 system printer to notify the Service Center when an out-of-sequence error condition occurs while processing a SCIMS transmission. Out-of-sequence conditions commonly occur in the following circumstances:

- when the files that SCIMS generates are **not** processed in the correct order or 1 file is skipped during processing
- if files are created on more than 1 server for the same State and county because multiple customers are being updated at the same time.

B Reporting Out-of-Sequence Conditions

Out-of-sequence conditions should correct themselves within a few minutes. However, if an out-of-sequence condition does **not** correct itself within 10 minutes, the Service Center should report the problem to their respective State Office SCIMS Security Officer.

C SCIMS Security Officer Action

SCIMS Security Officers shall report out-of-sequence conditions that do **not** correct themselves to the Help Desk.--*

194 Changing or Adding Tax ID Number in SCIMS**A Introduction**

SCIMS allows changing or adding tax ID number for a customer who is established in SCIMS. The ID number will be added in all counties' AS/400 name and address file where the customer is linked.

B Changing or Adding TIN's

To change or add a customer's ID number, access the customer in SCIMS according to paragraph 175. After the customer has been selected, the user may add or change tax ID number by entering the new ID number in the "Tax ID" field.

When a customer's tax ID number is changed or added, SCIMS attempts to change the ID number in all counties where the customer is linked.

194 Changing or Adding Tax ID Number in SCIMS (Continued)

C Notification of Changed ID

If the incorrect ID cannot be deleted from the AS/400 because the customer is active in a county where the ID is linked, the message, **“ID has been changed but cannot be deleted from Name and Address because the ID is still active in a program.”** will print on the system printer.

The following table outlines actions that will be required when an ID number is changed.

IF the customer is...	THEN...	Action
not active in any county's: <ul style="list-style-type: none"> • entity file • farm records • program that would prevent the ID from being deleted 	<ul style="list-style-type: none"> • the changed ID will be added to the AS/400 name and address file • the previous ID will be moved to “Deleted” status by KC-ITSDO. 	The County Office will not receive a report. No action is required.
active in any county's: <ul style="list-style-type: none"> • entity file • farm records • program that would prevent the original ID from being deleted 	<ul style="list-style-type: none"> • all counties where the ID is active will be notified by report that the ID has been changed, but cannot be deleted until made inactive • both ID's will be maintained on the AS/400 name and address file until the original ID is made inactive. 	The County Office or Offices where the original ID is active shall take action to make the original ID inactive according to *--paragraph 197.--*

197 SCIMS to Name and Address Update Report (Continued)

C Messages and Actions (Continued)

Message	Reason for Message	Action
Farm Loan Programs	Customer filed an application for FLP loan.	*--Leave "Y" flag in place if customer ever filed an application for FLP loan, regardless of whether the customer is still participating or ever participated in FLP.--*
Loans	Customer had a price support loan within the last 6 months.	None. Price Support runs a monthly edit to reset customers who have had no loan activity for 6 months and their outstanding balance is zero. Note: LDP's keep the IND-DEL-LOAN flag active for 1 year and 9 months.
CRP	This flag is currently not being checked when flagging a producer for deletion.	Ensure that producer has no active CRP participation when flagging for deletion.
Accounting	Customer's flag is set to "Y" in 1 of the following: <ul style="list-style-type: none"> • direct deposit • claims • receivables. 	If the flag is no longer applicable, reset the flag to "N". ITSD-ADC periodically runs edits to correct these.

Note: If a SCIMS to Name and Address Update Report prints with any of these messages, then the customer is placed in a "Pending Delete" status.

198 Documenting Customer Data Changes in SCIMS

A Critical Producer Data Changes

Critical producer data is:

- customer name
- current mailing address
- tax identification number.

B Documentation

All critical producer data changes made in SCIMS shall be documented by the Service Center employee making the change according to the following table.

IF the request for changes is made...	THEN Service Center employee shall screen print applicable changes and...
in person	request that customer verify, initial, and date applicable changes.
by telephone	initial and date applicable changes and file documentation in a pending file for customer’s review and initials upon their next visit to the County Office.
by mail or FAX	initial and date screen print and attach hard copy of mailed or FAXed request to screen print.
by trusted data source including: <ul style="list-style-type: none"> • change of address notification from customer or USPS • “911” county-wide address changes 	attach copy of data source.

C Maintenance

All critical producer data change documentation shall be filed according to 25-AS, Exhibit 22 in file ADP-5 SCIMS and maintained for a period of 10 years.

* * *

199-206 (Reserved)

707 Policy on Evidence of Authority and Signature Limitations (Continued)

D County Office Employees

County Office and Federal employees:

- shall not act as a power of attorney in the County Office where employed on behalf of any person, including family members
- shall not sign on behalf of a spouse in the County Office where employed
- may in unusual situations such as a hardship case, make a written request to SED for waiver
- are not limited from acting in a fiduciary capacity, such as:
 - guardian
 - administrator
 - conservator
 - executor
 - trustee
 - receiver.

Note: This policy does not apply to COC or CMC members. It does apply for former farm loan employees.

E Limited Waiver of Signature Authority

Limited waiver of signature authority requirements may be granted to immediate family members (paragraph 729.5).--*

707 Policy on Evidence of Authority and Signature Limitations (Continued)**F Entities Granted Signature Authority**

Producers may grant entities, such as lending institutions, farm management companies, farm management corporations, limited liability companies, or other similar entities, authority to sign on their behalf.

Entities granted authority to sign for a producer must designate the individuals who are authorized to sign for the entity using 1 of the following:

- a letter signed by the entity's officer who has authority to designate signature authority for the entity
- FSA-211 signed by the entity's officer who has authority to designate signature authority for the entity.

Example: Jane White appoints the Nationwide Bank to act on her behalf as attorney-in-fact on FSA-211. Nationwide Bank must designate the individuals who are authorized to sign for the bank. Joe Black, Nationwide Bank president, provides the Service Center with a list of individuals who are authorized to sign for Nationwide Bank. The individuals authorized to sign for Nationwide Bank may sign for Nationwide Bank on behalf of Jane White.

G FLP Resources

FLP directives regarding evidence of authority and signature limitations are available in County Offices. FLP:

- maintains copies of applicable entity documents
- can assist in reviewing entity documents.

*--State Supplements to applicable FLP handbooks address signature requirements for entities under State law. State Supplements to FLP handbooks are cleared according to 1-AS. Therefore, County Offices shall refer to the appropriate State Supplements **before** contacting the Regional OGC with questions.--*

708 Individual (Continued)

B Acceptable Signatures for Spouses

The signature of a spouse on behalf of the other shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
 - name of individual signing in representative capacity
 - name of individual signing in representative capacity and name of spouse
 - name of individual signing in representative capacity followed by “spouse”.

C Spouse Signature Examples

Following are examples of signatures that may be accepted when one spouse signs on behalf of the other spouse.

Name on Document	Acceptable Signatures
John R. Smith	<ul style="list-style-type: none"> • <i>by Sharon H. Smith</i> • <i>John R. Smith by Sharon H. Smith</i> • <i>by Sharon H. Smith, Spouse</i> • <i>Sharon H. Smith for John H. Smith</i>
John R. Smith Sharon H. Smith	<ul style="list-style-type: none"> • <i>John R. Smith by John R. Smith</i> • <i>John R. Smith</i> <i>Sharon H. Smith by John R. Smith</i>

Notes: Other forms may be accepted only if approved by DAFP.

*--DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

709 General Partnership

A General Rules

A partnership must provide the Articles of Partnership. If no Articles of Partnership are available, IRS documents such as Form 1065 (Schedule K-1) showing members and their respective shares may be used. A written statement identifying all members and shares of the partnership and signed by all members of the partnership may be used as acceptable documentation the first year the partnership is in effect or if the membership of the partnership has changed and the partnership has not filed any IRS forms.

Notes: Before July 20, 2004, certain properly executed affidavits may have been used as evidence of signature authority. Properly completed affidavits on file before July 20, 2004, shall continue to be honored as evidence of signature authority by State *--and County Offices. Affidavits filed after July 18, 2001, must be witnessed by an FSA employee or notarized to be considered acceptable.

Before November 20, 2006, general partnerships that did not have an individual authorized to act on behalf of the general partnership could execute FSA-211 to appoint an attorney-in-fact to act on behalf of the general partnership and bind all members. FSA-211's executed before November 20, 2006, according to these instructions, shall continue to be honored as acceptable evidence of signature authority by State and County Offices. The general partnership will be required to provide additional documentation only if the structure and/or membership of the general partnership changes.--*

Any member of a general partnership may sign for the general partnership and bind all members unless the Articles of Partnership are more restrictive.

Note: This policy is adopted by FSA because the majority of States have laws that provide for this; however, this is **not** the case for any other business enterprise.

A member of a general partnership may execute FSA-211 to appoint an attorney-in-fact to act on behalf of the general partnership and bind all members, unless the Articles of Partnership restrict member's authority.

Note: Certain FSA and CCC forms, such as CCC-502's, require each member's individual signature. Accordingly, each member or individual authorized by the members, **must** sign such forms regardless of whether an individual has authority to act on behalf of the general partnership.

Spouses shall **not** sign on behalf of each other as an authorized signatory for a partnership. Individuals that are appointed as an attorney-in-fact for another individual shall **not** sign for that individual as an authorized signatory for a partnership.

Example: John Smith is a member of ABC partnership. The articles of partnership provide John Smith the authority to sign for the partnership and bind all members of the partnership. John Smith's spouse is not a member of the partnership and shall **not** sign for John Smith as the authorized signatory for ABC partnership. John Smith appointed Bill Brown as his personal attorney-in-fact on FSA-211. Bill Brown shall **not** sign for John Smith as the authorized signatory for ABC partnership.

709 General Partnership (Continued)

C Acceptable Signatures

The signature for an individual authorized to sign for a general partnership shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
 - individual’s name
 - individual’s name and capacity
 - individual’s name, capacity, and name of partnership.

D Partnership Signature Examples

Following are examples of signatures that may be accepted for general partnerships.

Name on Document	Acceptable Signature
John R. Smith & Sons, a Partnership	<ul style="list-style-type: none"> • <i>by George C. Smith</i> • <i>by George C. Smith, Partner</i>
Smith & Roe Partnership	<ul style="list-style-type: none"> • <i>by John R. Smith</i> • <i>Smith and Roe Partnership, by John R. Smith, Partner</i>
Jones and Smith, a Partnership	<ul style="list-style-type: none"> • <i>by Richard H. Roe</i> • <i>Richard H. Roe, Agent for Jones and Smith, a Partnership</i>
XYZ Company	<ul style="list-style-type: none"> • <i>by Richard Roe</i> • <i>XYZ Company by Richard Roe</i>

Notes: Other forms and title may be accepted only if approved by DAFP.

*--DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

710 Joint Venture (Continued)

C Examples of Signature Requirements for Joint Ventures (Continued)

Note: Because RST Joint Venture does not have a permanent ID number, payments cannot be issued to the joint venture. When a joint venture does not have a permanent ID number, payments must be issued to the individual members using their respective ID numbers.

Each member (Mr. Jackson, Mrs. Doe, and Mrs. Green) must sign for their individual interest on CCC-509.

D Acceptable Signatures

The signature for an individual authorized to sign for a joint venture shall consist of 1 of the following:

- individual’s name
- individual’s name and capacity
- individual’s name, capacity, and name of the joint venture.

Signatures shall also consist of an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity.

E Joint Venture Signature Examples

The following are examples of signatures that may be accepted for joint ventures.

Name on Document	Acceptable Signatures
Bob and Bill Joint Venture	<ul style="list-style-type: none"> • <i>by Joe Black</i> • <i>Joe Black for Bob and Bill Joint Venture</i>
Jones and Smith Joint Venture	<ul style="list-style-type: none"> • <i>by Jim Smith</i> • <i>Mary Brown, Power of Attorney for Jones and Smith Joint Venture</i>

***--Note:** DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

F Husband and Wife Joint Ventures

Spouses may sign documents on behalf of each other for a husband and wife joint venture with a permanent tax ID number, effective August 1, 1992, unless written notification denying a spouse this authority has been provided to the County Office.

711 Corporations, Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies, and Other Similar Entities

A Authorization

A copy of any of the following applicable documents will authorize an officer, manager, member, or representative to sign:

- the corporate charter, bylaws, articles of organization, operating agreement, or partnership papers executed according to State law, that designates officers, members, *--or managers as authorized signatories--*
- resolution by the corporation's board of directors, signed by the corporation's secretary or an officer other than the signatory being extended signature authority

Note: If the intent of the resolution is to extend signature authority to all officers of a corporation, then all officers must sign the resolution.

Exception: For a **1 person corporation**, that person is authorized to sign for the corporation by default if documentation, such as a corporate charter, is on file in the County Office which **both**:

- identifies the "one person"
- validates that 100 percent of the corporation's shares are held by that "one person".
- signed corporate minutes
- letter signed by an authorized representative of the entity designating who may sign for the entity.

Note: This letter may only be used as valid documentation when the entity is **not** receiving monetary benefits from FSA.

Example: XYZ Chemical Company contracts with producers to test their products on special acreages on farms participating in DCP. There are instances when these producers do not have 100 percent risk in all of the base acres. XYZ Chemical Company then, has to be on CCC-509 for a share of the payments even if they are ineligible or do not wish to receive the payments. XYZ Chemical Company is required to sign CCC-509 and therefore, signature authorization is required.

711 Corporations, Limited Partnerships, Limited Liability Partnerships, Limited Liability Companies, and Other Similar Entities (Continued)

C Acceptable Signatures

The signature for an individual authorized to sign for a corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
 - individual’s name
 - individual’s name and capacity
 - individual’s name, capacity, and name of the corporation, limited partnership, limited liability partnership, limited liability company, or other similar entity.

D Corporation Signature Examples

Following are examples of signatures that may be accepted for a corporation.

Name on Document	Acceptable Signature
Smith Bros., Inc.	<ul style="list-style-type: none"> • <i>by John H. Smith</i> • <i>by John H. Smith, President</i> • <i>by Richard R. Roe, Treasurer of Smith Bros., Inc.</i>
First National Bank	<ul style="list-style-type: none"> • <i>by John H. Smith</i> • <i>First National Bank by John H. Smith, Cashier</i> • <i>John H. Smith, Cashier for the First National Bank</i>

***--Note:** DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

712 Sole Proprietor

A Acceptable Signatures

The signature for an individual who is the sole proprietor of a business operation shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
 - individual’s name
 - individual’s name and title
 - individual’s name, title, and name of the business operation.

Note: Spouses may sign on behalf of each other for a sole proprietorship unless written notification denying a spouse authority has been provided to the County Office.

B Sole Proprietor Signature Examples

The following are examples of acceptable signatures for a business operation conducted by an individual under a name other than the individual.

Name on Document	Acceptable Signature
Smith Company	<ul style="list-style-type: none"> • <i>by John R. Smith</i> • <i>Smith Company by John R. Smith, Sole Proprietor</i> • <i>by John R. Smith, Sole Owner of Smith Company</i> • <i>Smith Company by J. R. Smith, Owner</i>

Notes: Other signature formats may be accepted only if approved by DAFP.

*--DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

713 Estate, Trust, Conservatorship, or Guardianship (Continued)

E Fiduciary Signature Examples (Continued)

Name Printed on Document	Acceptable Signature
John H. Smith, Trustee for heirs of Richard R. Roe, Deceased	<i>by John H. Smith, Trustee</i>
John H. Smith, Trustee for Mary L. Roe and Richard R. Roe	<ul style="list-style-type: none"> <li data-bbox="789 407 1398 478">• <i>Mary L. Roe and Richard R. Roe by John H. Smith, Trustee</i> <li data-bbox="789 516 1166 548">• <i>by John H. Smith, Trustee</i>
John W. Smith, Trustee for Heirs of Richard R. Roe, Deceased	<ul style="list-style-type: none"> <li data-bbox="789 558 1455 627">• <i>Mary J. Smith, Agent for John W. Smith, Trustee of Heirs of Richard R. Roe, Deceased</i> <li data-bbox="789 665 1446 699">• <i>John W. Smith, Trustee by Mary J. Smith, Agent</i>
Richard Roe Trust	<ul style="list-style-type: none"> <li data-bbox="789 709 1170 743">• <i>by John W. Smith, Trustee</i> <li data-bbox="789 747 1463 779">• <i>for John W. Smith, Trustee by Mary Jones, Agent</i>

Notes: Other forms and title may be accepted only if approved by DAFP.

*--DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

714 **Bankruptcy and Receivership**

A Acceptable Signatures for Bankruptcy and Receivership

The signature of an individual authorized to sign for a bankruptcy or receivership shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- individuals name, capacity, and name of the entity or individual in bankruptcy or receivership.

B Bankruptcy and Receivership Signature Examples

The following are examples of acceptable signatures when signing for a bankruptcy or receivership.

Name on Document	Acceptable Signatures
John Smith, Inc.	<ul style="list-style-type: none"> • <i>John Smith Inc., by Joe Jones, Trustee</i> • <i>Joe Jones, Receiver for John Smith, Inc.</i>

Notes: Other forms and title may be accepted if approved by DAFP.

*--DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

715 Federal, State, County, or Municipal Office and Public Schools

A Governmental Body Authorization

One of the following documents signed by a governmental official will authorize an individual to sign on behalf of a governmental body.

Governmental Body	Acceptable Document
Federal agency, or division thereof	One of the following documents: <ul style="list-style-type: none"> • order of appointment • statute • letter of authorization.
State agency or department thereof County agency or department thereof Municipal agency or department thereof	One of the following documents: <ul style="list-style-type: none"> • order of appointment • letter of authorization containing an official seal • a certification.

B Public School Authorization

For a public school, accept a letter of administration signed by the president of the school board or governing body, or designee, as applicable, with either of the following:

- an affixed official seal
- a certification.

C Other Authorization

*--Individuals authorized according to subparagraph A or B may redelegate authority to an agent on FSA-211.

Notes: See Section 4 for power of attorney.

See paragraph 707 when the agent granted signature authority is an entity.--*

715 Federal, State, County, or Municipal Office and Public Schools (Continued)

D Acceptable Signatures

The signature for an individual authorized to sign for a governmental body shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
 - individual’s name
 - individual’s name and capacity
 - individual’s name, capacity, and name of governmental body.

E Signature Examples

The following are examples of acceptable signatures for a governmental body.

Name on Document	Acceptable Signature
Douglas County, Michigan, Board of County Commissioners	<ul style="list-style-type: none"> • <i>by John H. Smith</i> • <i>John H. Smith, for Board of County Commissioners</i>
Brown County Farm	<ul style="list-style-type: none"> • <i>by John H. Smith</i> • <i>Brown County Farm by John H. Smith, Judge, Brown County Court</i> • <i>Brown County Farm by Richard R. Smith, Farm Manager</i>
City of Dallas, Park Commission	<ul style="list-style-type: none"> • <i>by John H. Smith</i> • <i>City of Dallas, Park Commission, by John H. Smith, Secretary</i>
State of Ohio, Board of Aeronautics	<ul style="list-style-type: none"> • <i>by John H. Smith</i> • <i>by John H. Smith, Director</i>

Notes: Other forms and titles may be accepted if approved by DAFP.

*--DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

716 Churches and Charitable Organizations

A Authorizations

Either of the following documents will authorize an individual to sign on behalf of a church, charitable organization, society, or fraternal organization that is not a corporation:

- letter of authorization signed by either of the following:
 - legal head of the church or organization
 - head of the local church body, if applicable
- individuals authorized in this subparagraph may redelegate authority to an agent on FSA-211.

Notes: See Section 4 for power of attorney.

See paragraph 707 when the agent granted signature authority is an entity.

B Acceptable Signatures

The signature for an individual authorized to sign for a church, charitable organization, society, or fraternal organization, shall consist of 1 of the following:

- individual's name
- individual's name and capacity
- individual's name, capacity, and name of the church, charitable organization, society, or fraternal organization.

Signature shall also consist of an indicator, such as "by" or "for", illustrating that the individual is signing in the representative capacity, if applicable.

***--Note:** DAFP forms include or will include "By" and "Title/Relationship" in the applicable signature boxes. An indicator, such as "by" or "for", is **not** required for the revised forms; however, the "Title/Relationship" box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

717 Indian Tribal Ventures and BIA**A Indian Tribal Venture Authorizations**

A copy of tribal bylaws designating members authorized to sign and bind other members of the venture will authorize a member to sign and obligate other members of the Indian tribal venture.

Note: Before July 20, 2004, certain properly executed affidavits may have been used as evidence of signature authority. Properly completed affidavits on file before July 20, 2004, shall continue to be honored as evidence of signature authority by State and County Offices. Affidavits filed after July 18, 2001, must be witnessed by an FSA employee or notarized to be considered acceptable.

B BIA Authorizations

Management of tribal and allotted lands is regulated by statute.

Any duly authorized representative for BIA may sign for BIA.

C Acceptable Signatures

The signature for an individual authorized to sign for Indian tribal ventures or BIA shall consist of 1 of the following:

- individual's name and capacity
- individual's name, capacity, and name of tribal venture
- individual's name, capacity, and BIA.

***--Note:** DAFP forms include or will include "By" and "Title/Relationship" in the applicable signature boxes. An indicator, such as "by" or "for", is **not** required for the revised forms; however, the "Title/Relationship" box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

718-727 (Reserved)

Section 4 Power of Attorney and Rules on Authority

728 Policy for Powers of Attorney

A General Policy

--In the Service Center where employed, Service Center employees shall not act as-- attorney-in-fact on behalf of any producer, including family members (paragraph 707).

Minors may **not** appoint an attorney-in-fact to act on their behalf or be appointed an attorney-in-fact to act on grantor's behalf.

Since August 1, 1992, spouses may sign documents on behalf of each other for FSA and CCC programs in which either has an interest without completing FSA-211 or FSA-211-1, unless written notification denying this authority has been provided to the County Office.

*--**Note:** This does **not** apply to NRCS.--*

Exceptions: See paragraph 707 for exceptions to spouse's authority to sign on the other's behalf.

From April 17, 1996, to August 25, 2002:

- producers wishing to appoint an attorney-in-fact to act on their behalf for FSA and CCC programs must have completed FSA-211 or FSA-211-1, as applicable
- FSA no longer accepted power of attorney forms other than FSA-211 or FSA-211-1, as applicable, for FSA and CCC programs.

Exception: FSA accepted certain power of attorney forms other than FSA-211 in unique cases when a producer could not complete FSA-211, such as incompetence or incapacitation. Acceptance of power of attorney forms other than FSA-211 in these cases required review and approval by the regional attorney.

Since August 25, 2002:

- producers wishing to appoint an attorney-in-fact to act on their behalf for FSA and CCC programs must complete FSA-211
- FSA-211-1 is obsolete
- FSA shall not accept power of attorney forms other than FSA-211 except in:
 - unique cases when a producer could not complete FSA-211, such as incapacitation
 - cases involving members of the U.S. Armed Forces under active military duty.

728 Policy for Powers of Attorney (Continued)

A General Policy (Continued)

***--Exception:** Producers were authorized to submit non-FSA and durable powers of attorney; such as living wills, from December 17, 2008, until January 14, 2009. Non-FSA and durable powers of attorney submitted from December 17, 2008, until January 14, 2009, will be considered valid if they are reviewed and approved by the regional attorney.

B FSA-211’s Executed Before the Food, Conservation, and Energy Act of 2008

The Food, Conservation, and Energy Act of 2008 (Pub. L. 110-246):

- was enacted into law on June 18, 2008
- authorizes FSA to administer several new programs.

FSA-211 and FSA-211A, dated 12-17-08:

- reflect the changes because of the Food, Conservation, and Energy Act of 2008
- include NRCS programs.

IF on FSA-211 grantor checked...	THEN FSA-211...
Section A, item 1, “All current programs”	is not valid for programs authorized by the Food, Conservation, and Energy Act of 2008.
Section A, item 2, “All current and all future programs”	is valid for programs authorized by the Food, Conservation, and Energy Act of 2008.
Section B: <ul style="list-style-type: none"> • item 1, “All actions” • item 7, “Other” specifies CCC-526 	
Section A, item 2, “All current and all future programs”, and the grantor now wants to provide authority for the attorney-in-fact to sign on their behalf for NRCS conservation programs	dated 12-17-08 or later must completed by the grantor.

Notes: FSA-211 is **not** valid for FLP loan purposes.

“All current programs” and “All current and future programs”, include programs authorized by the Food, Conservation, and Energy Act of 2008, but **not** yet implemented; such as biomass crop assistance and forest restoration.

“AGI Certification” and “Routing Banking Accounts” have been added as specific transactions and no longer need to be written in as “Other”.--*

728 Policy for Powers of Attorney (Continued)

C FSA-211

A separate FSA-211 shall be completed for each grantor and each attorney-in-fact. The County Office shall not process FSA-211 providing more than 1 grantor or more than 1 attorney-in-fact.

A grantor wishing to appoint more than 1 attorney-in-fact shall complete and submit a separate FSA-211 for each attorney-in-fact. Two or more grantors wishing to appoint the same attorney-in-fact to act on their behalf shall each complete and submit separate FSA-211's.

Example 1: Mike Jones wishes to appoint both Jane Smith and Bob Brown as attorney-in-fact to act on his behalf. Mike Jones must complete one FSA-211 appointing Jane Smith and a separate FSA-211 appointing Bob Brown.

Example 2: Mary White and John Green both wish to appoint Joe Black as their attorney-in-fact. Mary White must complete and submit FSA-211 appointing Joe Black to act on her behalf, and John Green must complete and submit a separate FSA-211 appointing Joe Black to act on his behalf.

FSA-211 shall be used to appoint 1 attorney-in-fact to act on behalf of the grantor for FSA and CCC programs. The authority granted using FSA-211 may be for any of the following:

- *--all current and all future FSA, CCC, and NRCS programs
- all current FSA, CCC, and NRCS programs
- specific FSA, CCC, and NRCS programs.--*

FSA-211 may be used to appoint an attorney-in-fact to act on behalf of the grantor for FCIC-insured crops.

Note: It is the producer's responsibility to provide a copy of FSA-211 to the applicable crop insurance agent.

728 Policy for Powers of Attorney (Continued)

C FSA-211 (Continued)

FSA-211 authority does **not** provide the appointed attorney-in-fact the authority to sign or act on behalf of the grantor for any of the following:

- COC elections
- FSA-211
- requesting electronic access
- *--any program that is **not** a FSA, CCC, and NRCS program, such as TAA program
- FLP loan purposes.

Notes: See subparagraph G for procedure about routing payments to financial institution accounts.

See subparagraph H for procedure about executing CCC-605 using FSA-211.

FSA shall:

- process and record properly executed FSA-211's
- accept FSA-211's for NRCS customers; NRCS employees may accept FSA-211's for FSA customers

Note: FSA County Office employees are the **only** employees authorized to witness FSA-211 signatures. If an FSA employee does **not** witness FSA-211 signatures, FSA-211 **must** be notarized by a Notary Public.--*

- **not** process nor record FSA-211 that is:
 - incomplete
 - inaccurate
 - **not** properly witnessed by an FSA employee or acknowledged by a valid Notary Public.

Note: When the grantor is a corporation, the corporate seal of the grantor may be accepted in place of FSA employee witness or notarization.

See Exhibit 60 for:

- instructions for completing FSA-211
- instructions for completing FSA-211A
- an example of FSA-211
- an example of FSA-211A.

728 Policy for Powers of Attorney (Continued)

D Duration

FSA-211 shall remain in full force and effect from the date the FSA-211 is correctly executed until 1 of the following occurs:

- grantor cancels FSA-211 in writing by either of the following:
 - *--providing written notification of FSA-211 cancellation to the applicable Service Center agency

Important: The Service Center agency shall attach written notification to the applicable FSA-211.--*
 - writing “CANCELED” on original FSA-211, and initialing and dating
- either grantor or appointed attorney-in-fact:
 - dies
 - becomes incompetent or incapacitated
 - is a legal entity, and the entity becomes dissolved
- if FSA-211 is for specific FSN’s only and applicable FSN’s no longer exist.

E Changes

Changes made to an accepted power of attorney require the authority to be reissued on a new FSA-211.

Note: Transferring a farming operation to a different County Office does not invalidate a power of attorney.

728 Policy for Powers of Attorney (Continued)**F Designating Power of Attorney by FSN**

*--A grantor may appoint an attorney-in-fact to act on their behalf on specific FSN's. In FSA-211, Section B, Transactions for FSA, NRCS and CCC Programs, item 7, enter FSN's for which the attorney-in-fact is responsible.

Example: Sandy owns the following farms: FSN 22, FSN 35, FSN 43, and FSN 49. Sandy would like Tracey to be her attorney-in-fact on FSN 22 **only**. In FSA-211, Section B, Transactions for FSA, NRCS and CCC Programs, item 7, ENTER **"ON FSN 22 ONLY"**.

G Routing Payments to Financial Institution Accounts

An individual may route payments to financial institution accounts; such as completing SF-1199A or SF-3881, on behalf of another when FSA-211 signed by the grantor provides either of the following under Section B:

- grantor selects item 1, "All actions"
- grantor selects item 6, "Routing Bank Accounts".

* * *

728 Policy for Powers of Attorney (Continued)

H Executing CCC-605 to Redeem Cotton Pledged as Collateral

An individual may execute CCC-605 on behalf of another **only** when FSA-211 signed by the *--grantor provides **both** of the following:

- grantor selected 1 of the following, under Section A, FSA, NRCS and CCC Programs:
 - item 1, “All current programs”
 - item 2, “All current and all future programs”
 - item 11, “Marketing Assistance Loans and Loan Deficiency Payments”
- grantor selected, under Section B, Transactions for FSA, NRCS and CCC Programs, item 7, “Other”, and ENTERed “**Executing CCC-605**”.

Important: If FSA-211 does **not** meet both of the requirements, the appointed--* attorney-in-fact shall **not** be authorized to execute CCC-605 on behalf of the grantor.

Producers **must** be fully aware that appointing an attorney-in-fact to execute CCC-605’s grants that agent the authority to further delegate authority to another agent.

An agent appointed attorney-in-fact on FSA-211 shall **not** execute FSA-211 to further delegate this authority.

I Executing CCC-526 to Certify Adjusted Gross Income

*--An individual may execute CCC-526 on behalf of another when either of the following is provided by the grantor on FSA-211:

- grantor selected, under Section B, Transactions for FSA, NRCS and CCC Programs, item 1, “All actions”
- grantor selected, under Section B, Transactions for FSA, NRCS and CCC Programs, item 5, “AGI Certification”.

Note: CCC-526’s executed before March 18, 2003, which used a valid FSA-211 on file--* at that time, are considered valid.

728.5 Signature Requirements for Powers of Attorney

A Acceptable Signatures for Individuals

For individuals granted authority to act as attorney-in-fact on behalf of another individual or entity, the signature shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- 1 of the following:
 - individual’s name
 - individual’s name and capacity
 - individual’s name, capacity, and name of individual or entity that granted authority.

The following are examples of acceptable signatures for individuals when signing as an appointed attorney-in-fact.

Name on Document	Acceptable Signature
John H. Jones	<ul style="list-style-type: none"> • <i>by Jane Smith</i> • <i>by Jane Smith, Power of Attorney</i> • <i>by Jane Smith, Agent</i> • <i>Jane Smith, Power of Attorney for John H. Jones</i>
ABC Corporation	<ul style="list-style-type: none"> • <i>by Mary Jones</i> • <i>by Mary Jones, Power of Attorney</i> • <i>by Mary Jones, Agent</i> • <i>ABC Corporation, by Mary Jones, Power of Attorney</i>

***--Note:** DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

B Acceptable Signatures for Representatives of Entities

Producers may grant entities, such as lending institutions, farm management companies, or other similar entities, authority to sign on their behalf. Entities granted authority to sign for a producer must designate the individuals who are authorized to sign for the entity (paragraph 707).

728.5 Signature Requirements for Powers of Attorney (Continued)

B Acceptable Signatures for Representatives of Entities (Continued)

For individuals who are designated to sign for an entity that has authority to act on behalf of a producer as attorney-in-fact, the signature shall consist of both of the following:

- an indicator, such as “by” or “for”, illustrating that the individual is signing in a representative capacity
- either of the following:
 - individual’s name, capacity, and name of entity that was granted authority to act as attorney-in-fact
 - individual’s name, capacity, name of entity that was granted authority to act as attorney-in-fact, and name of individual that granted authority to the entity.

The following are examples of acceptable signatures for individuals when signing as a representative of an entity that is an appointed attorney-in-fact.

Name on Document	Acceptable Signature
John H. Jones	<ul style="list-style-type: none"> • <i>by Joe Black, President for Nationwide Bank, Power of Attorney</i> • <i>Joe Black, President for Nationwide Bank, Power of Attorney for John H. Jones</i>
ABC Corporation	<ul style="list-style-type: none"> • <i>by Joe Black, President for Nationwide Bank, Power of Attorney</i> • <i>ABC Corporation, by Joe Black, President for Nationwide Bank, Power of Attorney</i>

***--Note:** DAFP forms include or will include “By” and “Title/Relationship” in the applicable signature boxes. An indicator, such as “by” or “for”, is **not** required for the revised forms; however, the “Title/Relationship” box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

728.5 Signature Requirements for Powers of Attorney (Continued)**C Spouse Signature Requirements**

Effective August 1, 1992, spouses may sign documents on behalf of each other for FSA and CCC programs in which either has an interest, unless written notification denying a spouse this authority has been provided to the County Office (paragraph 707).

Exceptions: Spouses:

- shall not sign FSA-211 on behalf of the other
- shall not sign on behalf of the other as an authorized signatory for a partnership, joint venture, corporation, or other similar entity
- must have a power of attorney on file or sign personally for claim settlements, such as promissory notes.

Important: See paragraph 707 about spouses' requests for agency records of the other spouse.

***--Note:** These spousal signature requirements do **not** apply to NRCS.--*

729 Policy for Incompetent Individuals**A General Policy**

Producers wishing to appoint an attorney-in-fact to act on their behalf must execute and submit FSA-211 (paragraph 728). Exceptions apply according to subparagraph B and paragraph 729.6.

FSA-211 signed by an individual after that individual has been declared incompetent:

- is **not** valid
- shall **not** be processed or recorded by FSA.

When an individual is declared incompetent and a conservator has been appointed by the court to act on behalf of the incompetent individual:

- the conservator may act on behalf of the incompetent individual for FSA and CCC programs
- neither FSA-211 nor non-FSA power of attorney form is required for the conservator to act on behalf of the incompetent individual.

* * *

Important: Before an individual may sign as a conservator, a copy of the court order must be provided to the County Office (paragraph 713).

--729.4 Policy for Incapacitated Individuals--**A Acceptable Non-FSA Power of Attorney Forms for an Incapacitated Individual**

County Offices may process and record a non-FSA power of attorney form for incapacitated individuals **only** when **all** of the following are met:

- grantor cannot complete FSA-211 because of incapacitation
- conservator for the grantor has not been appointed by the court
- individual appointed as attorney-in-fact by the non-FSA power of attorney form **signs and dates** the Non-FSA Power of Attorney Certification in Exhibit 62
- County Office is provided a legible copy of the non-FSA power of attorney form to maintain on file
- regional attorney reviews and approves the non-FSA power of attorney form to ensure that the form meets both of the following:
 - provides legally sufficient authority for the attorney-in-fact to act on behalf of the grantor for FSA and CCC programs
 - compliance with applicable State and local laws.

Note: If the County Office has documentation of a previous review and approval of non-FSA power of attorney by a regional attorney, the County Office is not required to resubmit the non-FSA power of attorney form for regional attorney review. CED shall review the regional attorney's approval to ensure the approval did not contain any limitations. The non-FSA power of attorney must be resubmitted if the regional attorney noted any limitations that could affect the new programs authorized by the Farm Security and Rural Investment Act of 2002.

Important: The State Office shall contact the National Office if the regional attorney declines to review non-FSA power of attorney forms.

729.4 Policy for Incapacitated Individuals (Continued)

A Acceptable Non-FSA Power of Attorney Forms for an Incapacitated Individual (Continued)

County Offices shall:

- submit a copy of the non-FSA power of attorney form and the signed and dated Non-FSA Power of Attorney Certification to the State Office for regional attorney review
- attach both of the following to the non-FSA power of attorney form, and maintain all of the following on file:
 - **signed and dated** Non-FSA Power of Attorney Certification
 - regional attorney determination
- notify applicable individuals of regional attorney determination
- **not** process any document signed by the attorney-in-fact until regional attorney review and determination is received.

* * *

State Offices shall:

- ensure that the Non-FSA Power of Attorney Certification is signed and dated by the individual appointed as attorney-in-fact by the non-FSA power of attorney form
- submit a copy of the non-FSA power of attorney form and the signed and dated Non-FSA Power of Attorney Certification to the regional attorney for review

--729.6 Policy for Active Military Duty Personnel*A Acceptable Non-FSA Power of Attorney Forms for Active Military Duty Personnel**

County Offices may process and record the non-FSA power of attorney form for active military duty personnel **only** when **all** of the following are met:

- grantor is a member of the United States Armed Forces under active military duty
- County Office is provided a legible copy of the non-FSA power of attorney form to maintain on file
- regional attorney reviews and approves the non-FSA power of attorney form to ensure that the form meets both of the following:
 - provides legally sufficient authority for the attorney-in-fact to act on behalf of the grantor for FSA and CCC programs
 - compliance with applicable State and local laws.

Important: The State Office shall contact the National Office if the regional attorney declines to review non-FSA power of attorney forms.

County Offices shall:

- submit a copy of the non-FSA power of attorney form to the State Office for regional attorney review
- attach regional attorney determination to the non-FSA power of attorney form, and maintain on file
- notify applicable individuals of regional attorney determination--*

729.6 Policy for Active Military Duty Personnel (Continued)

A Acceptable Non-FSA Power of Attorney Forms for Active Military Duty Personnel (Continued)

- **not** process any document signed by the attorney-in-fact until regional attorney review and determination is received

* * *

State Offices shall:

- submit a copy of the non-FSA power of attorney form to the regional attorney for review
- **not**, under any circumstance, make a determination about the acceptability of a non-FSA power of attorney form

Important: The State Office shall contact the National Office if the regional attorney declines to review non-FSA power of attorney forms.

- provide the County Office with a copy of the regional attorney determination.

Reports, Forms, Abbreviations, and Delegations of Authority

Reports

None

Forms

This table lists all forms referenced in this handbook.

Number	Title	Display Reference	Reference
AD-1026	Highly Erodible Land Conservation (HELC) and Wetland Conservation (WC) Certification		750, 753
AD-2017	Service Center Information Management System (SCIMS) Access Form	Ex. 11.4	141, Ex. 2
CCC-10	Representations for Commodity Credit Corporation or Farm Service Agency Loans and Authorization to File a Financing Statement and Related Documents		177
CCC-36	Assignment of Payment		211, 934
CCC-37	Joint Payment Authorization		211, 934
CCC-64	Surety Bond (Minor)	677	
CCC-184	CCC Check		679, 779
CCC-501A	Member's Information		753
CCC-502	Farm Operating Plan for Payment Eligibility Review		753
CCC-509	Direct and Counter-Cyclical Program Contract		709, 710
CCC-526	Payment Eligibility Average Adjusted Gross Income Certification		72, 753
CCC-605	Designation of Agent - Cotton		728, 731
CCC-1099-G	Report of Payments to Producers		276
CRP-1	Conservation Reserve Program Contract		211

Reports, Forms, Abbreviations, and Redelegations of Authority (Continued)

Forms (Continued)

Number	Title	Display Reference	Reference
FFAS-12	Electronic Funds Transfer (EFT) Hardship Waiver Request		728
FSA-211	Power of Attorney	Ex. 60	Part 25, 178, 709, Ex. 2
FSA-211-1 <u>1/</u>	Power of Attorney for Husband and Wife		728
FSA-211A	Power of Attorney Signature Continuation Sheet	Ex. 60	728
FSA-325	Application for Payment of Amounts Due Persons Who Have Died, Disappeared, or Have Been Declared Incompetent	779	
FSA-570	Waiver of Eligibility for Emergency Assistance	802	801
FSA-2001	Request for Direct Loan Assistance		177
FSA-2301	Request For Youth Loan		177
I-151	Alien Registration Receipt Card		178, 932
I-551	Alien Registration Receipt Card		178, 932
IRS 1099-MISC	Miscellaneous Income		122
SF-256	Self-Identification of Handicap	Ex. 13	179
SF-1055	Claim Against the United States for Amounts Due in the Case of a Deceased Creditor	780	
SF-1199A	Direct Deposit Sign-Up Form		728
SF-3881	ACH Vendor/Miscellaneous Payment Enrollment Form		728
UCC-1	UCC Financing Statement		681
UCC-1F	Effective Financing Statement		681
W-7	Application for IRS Individual Taxpayer Identification Number		127

1/ FSA-211-1 is obsolete.

Reports, Forms, Abbreviations, and Redelegations of Authority (Continued)

Abbreviations Not Listed in Exhibit 102

The following abbreviations are not listed in Exhibit 102.

Approved Abbreviation	Term	Reference
AGI	adjusted gross income	750
APO	Army Post Office	179, 932
CCE	Common Computing Environment	141
CY	current year	208, 212
DBA	doing business as	177
e-FC	electronic funds control	20
EIN	employer ID number	121, 122, 178.5, 178.6, 178.7, 178.8, Ex. 11
EQIP	Environmental Quality Incentives Program	750-754
FIPS	Federal Information Processing Standards	Ex. 101
FRS	Farm Records Management System	752
FSRIA	Farm Security and Rural Investment Act of 2002	106, 107
HC	highway content	179
IE	Internet Explorer	141
ITSD-ADC	Information Technology Services Division - Application Development Center	141, 156
LAA	local administrative area	142, 208, 212, 291, 294, 305
LLC	Limited Liability Company	121, 122, 177, 178, 178.6
MQ	Marketing Quota	208, 209
NSCP	Naval Stores Conservation Program	779, 918
OT	other producer	197
PYBC	Prior Year Business Code	141, Ex. 11.4
RR	rural route	179, 208
SCIMS	Service Center Information Management System	Text, Ex. 11, 11.5, 12, 12.5-12.10, 104
TAA	Trade Adjustment Assistance	728
TIN	tax ID number	121, 122, 178, 178.5-178.8

Re delegations of Authority

This table lists redelegations of authority in this handbook.

Redelegation	Reference
Authority to act for entities may be redelegated by the representative by filing FSA-211 for an agent to perform for the trust or estate.	730

Menu and Screen Index

The following menus and screens are displayed in this handbook.

Menu or Screen	Title	Principal Reference
	FSA Intranet FSA Applications	141
	USDA eAuthentication Login	141
	USDA eAuthentication Status	141
	USDA eAuthentication Warning Screen	141
	USDA Service Center Information Management System Page	141
	USDA Service Center Information Management System Add Business Customer Screen	178
	USDA Service Center Information Management System Add Individual Customer Screen	177
	USDA Service Center Information Management System Customer Search Page	141, 155, 175
	USDA Service Center Information Management System No Records Available Screen	175
MAA10001	County Data Table Maintenance Screen	23
MAA10005	County Data Table Maintenance Screen	26
MAA10501	County Data Table Maintenance Screen	24
MAA11002	County Data Table Maintenance Screen	26
MAA25002	Direct Payment Crop Table Screen	106
MAA25502	Counter-Cyclical Crop Table Screen	107
MAB09401	COC/LAA Change Screen	305
MAB09601	Producer Name and Address - Elections Screen	305
MAB100	Name/Address Report Menu	291
MAB35203	Fiduciary Record Screen	763
MAB35302	Producer List of Farms Screen	762
MAB35303	Fiduciary Record Screen	762
MAB35304	Fiduciary ID Listing Screen	762

Menu and Screen Index (Continued)

Menu or Screen	Title	Principal Reference
MAC000	Facility Selection Menu	931
MAC01102	Facility Display Screen	933
MAC01202	Facility Change Screen	934
MAC01302	Facility Add Screen	932
MAC01401	Facility Delete Screen	935
MAC01601	Facility Reactivate Screen	937
MAC01701	Supplemental Data Screen	933, 934
MAC02001	Name and Address Maintenance Screen	936
MACI00	Name/Address Selection Menu	142
MACI1001	Producer Selection Screen	207
MACI2001	Individual Basic Data Screen	208
MACI2501	Supplemental Data Screen	209
MACI3001	Additional Supplemental Data Screen	210
MACI3501	Application Use Flags Screen	211
MACI4001	Spouse Basic Data Screen	212
MACI6001	Record Update Screen	211
MACR01-01	Common Routine to Select ID Number Screen	761
MACS0301	Facility Name and Address Screen	931

Recording Business Types (Continued)

A Business Type Name (Continued)

SCIMS Business Type	* * *	Use
State and Local Government	* * *	To record a State-owned, city-owned, or county-owned entity, except for State-owned, city-owned, or county-owned public school lands that are exempt from payment limitation according to 1-PL.
Churches, Charities, and Non-Profit Organizations	* * *	To record fraternal or religious organizations, clubs, societies, and other associations according to 1-PL.
Public School	* * *	<p>To record an employer ID number to identify payments that are exempt from payment limitation according to 1-PL that are made to:</p> <ul style="list-style-type: none"> • public schools for land that is owned by a public school district • State for State-owned lands used to maintain a public school. <p>A separate ID number shall be required if a public school earns payments on both land that is:</p> <ul style="list-style-type: none"> • exempt from payment limitation according to 1-PL * * * • nonexempt from payment limitation according to 1-PL * * *.

Recording Business Types (Continued)

A Business Type Name (Continued)

SCIMS Business Type	Use
BIA	To record BIA.
Indian Represented by BIA	To record an individual Indian who is represented by BIA.
Trust - Irrevocable	To record a trust that: <ul style="list-style-type: none"> • may not be terminated by the grantor • may not be modified by the grantor • does not revert to the grantor after a specific time period.
Individuals Operating As a Small Business	To record an individual with an employer ID number. Note: Record producer's Social Security number and EIN in the combined producer file according to 2-PL.
* * *	* * *
Indian Tribal Venture	To record Indian tribal ventures.
General Entity Member	To record the members of a general entity.
Financial Institution	To record banks and other financial institutions.
News Media	To record news media (newspaper, radio, television, etc.)
* * *	* * *
Public Body	(for FLP use only)
Other	To add peanut associations, peanut warehouses, peanut handlers, peanut buying points, tobacco auctions, cotton buyers, food, feed, and seed facilities, fertilizer facilities, other agri-businesses, and other FSA County Offices.

SCIMS Security Officers

A National SCIMS Security Officers

Agency	Name
FSA	Sandy Bryant
NRCS	*--Kent Matsutani--*
RD	Vacant

B State SCIMS Security Officers

State	Agency	Name
Alabama	FSA	Samuel L. Hall
Alabama	NRCS	*--Zona Beaty--*
Alabama	RD	Cynthia Smith
Alaska	FSA	Jimmy R. LaVoie
Alaska	NRCS	Philip B. Naegele
Alaska	RD	Robyn Martin
Arizona	FSA	Carla Hill
Arizona	NRCS	Vicky L. Bennett
Arizona	RD	Ron Walch
Arkansas	FSA	Sharon R. Baker
Arkansas	NRCS	*--Dennis Mobley--*
Arkansas	RD	Terrie Rose
California	FSA	Navdeep K. Dhillon
California	NRCS	Carmen De Jesus Ortiz
California	RD	Vacant
Colorado	FSA	*--Luis Alonso--*
Colorado	NRCS	Michael Wall
Colorado	RD	Vacant
Connecticut	FSA	Marilu R. Soileau
Connecticut	NRCS	Michelle Hendricks
Connecticut	RD	Richard A. Lavoie
Delaware	FSA	Robin L. Talley
Delaware	NRCS	Timothy Garrahan
Delaware	RD	Vacant
Florida	FSA	Elaine D. Truluck
Florida	NRCS	Jeff Werner
Florida	RD	Hilary Cook
Georgia	FSA	*--Jennifer Carter--*
Georgia	NRCS	Dot Harris
Georgia	RD	Craig Scroggs
Guam	NRCS	Barbara D. Aflague
Hawaii	FSA	Steve D. Peterson
Hawaii	RD	Clarice H. Osako

SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

State	Agency	Name
Idaho	FSA	*--Jeremy D. Nalder
Idaho	NRCS	Vacant--*
Idaho	RD	Vacant
Illinois	FSA	Stanley W. Wilson
Illinois	NRCS	Paula Hingson
Illinois	RD	Denise A. Pubill
Indiana	FSA	Carl R. Schweikhardt
Indiana	NRCS	John Poenisch
Indiana	RD	Maetta Kellermeyer
Iowa	FSA	Bradley J. Murray
Iowa	NRCS	Roy Campbell
Iowa	RD	Kathy Deppe
Kansas	FSA	Terry L. Hawk
Kansas	NRCS	Chad Volkman
Kansas	RD	Brenda E. Aeillo
Kentucky	FSA	Brenda Johnson
Kentucky	NRCS	Christy Morgan
Kentucky	RD	Shirley Halcomb
Louisiana	FSA	T. Christine Normand
Louisiana	NRCS	Tim Landreneau
Louisiana	RD	Sheila Ford
Maine	FSA	*--Darlene Soto--*
Maine	NRCS	Susan Arrants
Maine	RD	Tammy Carter
Maryland	FSA	Vicky A. Coppage
Maryland	NRCS	Noni Lee-Buchanan
Maryland	RD	Vacant
Massachusetts	FSA	Noreen L. Vassallo
Massachusetts	NRCS	Jeffrey G. Anliker
Massachusetts	RD	Richard A. Lavoie
Michigan	FSA	Kelly D. Losey
Michigan	NRCS	*--Monica R. Wymer--*
Michigan	RD	Lynette McCarty
Minnesota	FSA	Lisa B. MacDonald
Minnesota	NRCS	Mike G. Pageler
Minnesota	RD	Lori Moore
Mississippi	FSA	Gary M. Morrison
Mississippi	NRCS	*--Gregory W. Brinson--*
Mississippi	RD	Cynthia White

SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

State	Agency	Name
Missouri	FSA	*--Mike Lafolette--*
Missouri	NRCS	David Gruber
Missouri	RD	Dean Olson
Montana	FSA	*--Regan Anderson--*
Montana	NRCS	Dave Kascht
Montana	RD	Vacant
Nebraska	FSA	Michael L. Sander
Nebraska	NRCS	*--Doug Wagner--*
Nebraska	RD	Krista Stevens
Nevada	FSA	Debbie G. Goin
Nevada	NRCS	Rod Dahl
Nevada	RD	Vacant
New Hampshire	FSA	Linda L. Grames
New Hampshire	NRCS	*--Priscilla L. Johnson--*
New Hampshire	RD	Raymond B. Fredericks
New Jersey	FSA	Christopher K. Scheirer
New Jersey	NRCS	Nancy Paolini
New Jersey	RD	Vacant
New Mexico	FSA	Brandon M. Terrazas
New Mexico	NRCS	Linda Branch
New Mexico	RD	Brooke Bishop
New York	FSA	*--Heather K. Grady
New York	NRCS	Dianna Power--*
North Carolina	FSA	Cathy D. Moore
North Carolina	NRCS	Mike Sugg
North Carolina	RD	Neal Sherrod
North Dakota	FSA	*--Bryan Olschlager--*
North Dakota	NRCS	Tanya Riehl
North Dakota	RD	Vacant
Ohio	FSA	Richard L. Borland
Ohio	NRCS	*--Jennifer Chen--*
Ohio	RD	Vacant
Oklahoma	FSA	Tona J. Huggins
Oklahoma	RCS	Suzanne Collier
Oklahoma	RD	Jody Harris
Oregon	FSA	Anthony M. Meeuwssen
Oregon	NRCS	Danny Burgett
Oregon	RD	Faith Harris
Pacific Basin	NRCS	Kurencio Ngowakl
Pacific Islands, East	NRCS	*--Barbara A. Fossum--*

SCIMS Security Officers (Continued)

B State SCIMS Security Officers (Continued)

State	Agency	Name
Pennsylvania	FSA	Jackie M. Stonfer
Pennsylvania	NRCS	Lisa Walker
Pennsylvania	RD	Dane Bowerman
Puerto Rico	FSA	Edgar Maldonado
Puerto Rico	NRCS	*--Edgar Diaz-Osuna--*
Puerto Rico	RD	Jorge Lopez
Rhode Island	FSA	*--Marilu R. Soileau--*
Rhode Island	NRCS	Jackie Pashnik
Rhode Island	RD	Richard A. Lavoie
South Carolina	FSA	W. Riley Odum
South Carolina	NRCS	*--Kellee Melton--*
South Carolina	RD	Vacant
South Dakota	FSA	Allen R. Barton
South Dakota	NRCS	*--Kim Brannen--*
South Dakota	RD	Kay Daugherty
Tennessee	FSA	*--Sally Martin--*
Tennessee	NRCS	Grace Lutz
Tennessee	RD	Vacant
Texas	FSA	Christi A. Morris
Texas	NRCS	*--Dexter Svetlik--*
Texas	RD	Larry McDonald
Utah	FSA	Cary B. Son
Utah	NRCS	James Huggard
Utah	RD	Vacant
Vermont	FSA	Rachel Cadieux
Vermont	NRCS	*--Kathryn Hakey--*
Vermont	RD	Raymond B. Fredericks
Virginia	FSA	*--Emily M. Horsley--*
Virginia	NRCS	Rod Wood
Virginia	RD	Nancy A. Lewis
Washington	FSA	*--Amy Paulson
Washington	NRCS	Cheryl K. Jacobson--*
Washington	RD	James A. Wehrer
West Virginia	FSA	Leanne M. Dilsworth
West Virginia	NRCS	Bill O'Donnell
West Virginia	RD	Vacant
Wisconsin	FSA	*--Barbara A. Quam--*
Wisconsin	NRCS	Michelle Komiskey
Wisconsin	RD	Jolane Rankin
Wyoming	FSA	*--Todd Even--*
Wyoming	NRCS	Sharon Williams
Wyoming	RD	Mary A. Sessin
* * *	* * *	* * *

Forms and Documents Not Approved for FAXed Signatures

This table provides forms and documents for which FAXed signatures shall **not** be accepted.

Number	Title
CCC-36	Assignment of Payment
CCC-37	Joint Payment Authorization
CCC-77	Solicitation, Offer and Award for Janitorial Services
CCC-79	Solicitation for Offers (SFO)
CCC-279	Promissory Note
CCC-576-1	Appraisal/Production Report Noninsured Crop Disaster Assistance Program
CCC-677	Farm Storage Note and Security Agreement
CCC-678	Warehouse Storage Note and Security Agreement
CCC-694-2	Acknowledgment of Commodity Certificate Purchase
CCC-959	Tobacco Transition Payment Program Assignment of Payment
FSA-211	Power of Attorney (includes FSA-211A)
FSA-669	OFFICIAL BALLOT for FSA Committee Elections
FSA-1007	Inspection Certificate and Sales Memorandum
FSA-1007 VC	Inspection Certificate and Sales Memorandum - VC
FSA-1008	Application for Peanut Handler Registration Number
--FSA-2025	Notice of Approval, Terms and Conditions and Borrower Responsibilities--
FSA-2026	Promissory Note
FSA-2029	Real Estate Mortgage or Deed of Trust
FSA-2043	Assignment of Proceeds From the Sale of Dairy Products and Release of Security Interest
FSA-2044	Assignment of Income From Real Estate Security
FSA-2140	Deposit Agreement
FSA-2142	Statement of Deposits and Withdrawals
FSA-2231	Request for Obligation of Funds - Guaranteed Loans
--FSA-2313	Notification of Loan Approval and Borrower Responsibilities--
FSA-2465	Assignment, Acceptance, and Release (Wool and Mohair)
FSA-2489	Assumption Agreement
FSA-2570	Offer to Convey Security
GSA-276	Lease Amendment
SF-2	Lease for Real Property
UCC-1	UCC Financing Statement
UCC-1F	Effective Financing Statement

Signature Authority/Power of Attorney Questions and Answers

A Signature Authority

Q1: When signing documents with pre-printed legal names on them, such as James David Doe, would Jim D. Doe be an acceptable signature?

A1: Yes, according to subparagraph 678 A, signatures may contain variations that do not cause the signature to be in disagreement. Jim D. Doe would be acceptable in this case.

Q2: A County Office is required to review and maintain entity documents to make signature authority determinations. Is it required that County Offices copy the entire entity document and keep them on file?

A2: The entire document does not have to be maintained. However, all applicable pages that identify the entity, pertinent authority, and any limitations, etc. are maintained.

Example: If the trust is represented to be an irrevocable trust, procedure in 1-PL requires review of the trust agreement to determine if it contains a provision that would result in the trust being considered a revocable trust for payment limitation purposes (1-PL, subparagraph 362 B). At a minimum, all pages needed for all programs **must** be maintained.

Q3: During a County Office review, it was discovered that copies of proper signature authority documentation were not on file to validate a customer's signature; for example, on an application, contract, or report. Can the County Office obtain the missing documentation after the fact?

A3: The County Office may secure the documentation, after the fact, to validate the applicable signatures **only** if the respective documentation is valid and was in existence at the time the signature was obtained. If documentation that includes FSA-211 was not in existence, the signature is invalid.

Q4: Can any member of a General Partnership sign on behalf of the partnership without specific authorization?

A4: Yes, any member of a General Partnership may sign on behalf of the partnership and bind all members, unless the articles of partnership are more restrictive (paragraph 709).

Q5: Do trust agreements have to bear signatures or a certification by the officer of the issuing court?

A5: No, trusts are exempt from this requirement (subparagraph 713 B).

Signature Authority/Power of Attorney Questions and Answers (Continued)

A Signature Authority (Continued)

Q6: Several paragraphs in procedure indicate that a properly executed affidavit on file before July 20, 2004, may continue to be used as acceptable signature authority. Why can affidavits no longer be used as acceptable signature authority?

A6: An affidavit is a written declaration of facts confirmed by the oath or affirmation of the party making the declaration or statement of fact and is **not** an instrument that is used to convey authority upon an individual or entity; therefore, we no longer consider them as acceptable evidence for signature authority.

Q7: What constitutes a valid resolution? Do they have to be notarized or witnessed?

A7: A resolution is a determination of policy of a corporation by the vote of its board of directors baring the signature of the corporation secretary or other authorized officer. Generally, resolutions are clearly stated, however if the intent of a resolution or its authenticity is questionable, a copy of supporting documents, such as by laws and/or corporate charter, may be required to determine its validity.

A resolution does not have to be notarized, but must either bear the corporate seal or a witnessed signature.

Q8: If a trust or an estate appoints co-trustees or co-executors, do we need to obtain both applicable signatures?

A8: Yes, both co-trustee's or co-executor's signature would be required, although County Offices should review applicable documents to determine whether co-trustees or co-executors are authorized to act independently.

Q9: When someone is signing in a representative capacity, is a "by" or "for" required to accompany their signature?

A9: All signature examples in 1-CM about someone signing in a representative capacity note that an indicator, such as "by" or "for", is required to illustrate that the individual is signing in a representative capacity (subparagraphs 681 B, 708 B, 709 D, 710 D, 711 C, 712 A, 713 D, 714 A, 715 D, 716 B, and 728.5 A & B).

***--Note:** DAFP forms include or will include "By" and "Title/Relationship" in the applicable signature boxes. An indicator; such as "by" or "for", is **not** required for the revised forms; however, the "Title/Relationship" box shall be completed accordingly for individuals signing in a representative capacity. Instructions for completing the revised forms are included in the applicable program handbook.--*

Signature Authority/Power of Attorney Questions and Answers (Continued)

A Signature Authority (Continued)

Q10: Are illegible signatures acceptable? If so, how are they to be handled?

A10: Yes; however, if the signature is illegible, the person accepting the signature **must** know the correct name of the person signing and initial the document (subparagraph 676 A).

Q11: What establishes signature authority for an estate, trust, conservatorship, or guardianship?

A11: Signature authority is limited to the specifications of the documents listed in subparagraph 713 A.

Notes: If applicable documentation is not specific, signature authority may be redelegated.

Applicable court orders need to be carefully reviewed.

Q12: 1-DCP, subparagraph 390 E allows producers to submit written leases, rental agreements, or other documents signed by the owner as proof that the producer has the land cash leased for the applicable FY. If a written lease is submitted and the lease was signed by someone other than the owner as the owner's representative, are County Offices required to validate signature authority?

A12: No, FSA signature authorities apply to signatures that we require from our customers on FSA forms or certifications to FSA. FSA requirements do **not** apply to documents signed for other purposes, such as leases, bank documents, and other documents created for other purposes. 1-CM, subparagraph 707 A references program documents, such as a NAP application and related documents such as AD-1026, **must** contain valid signatures.

Q13: Can a general partnership appoint an attorney-in fact on a FSA-211?

A13: Yes, unless the Articles of Partnership or other documents provided by the partnership prohibit it. Any member of the partnership may execute an FSA-211 unless the Articles of Partnership restrict the authority for any member to bind the partnership (paragraph 709).

Q14: Are joint ventures allowed to appoint a power of attorney?

A14: Yes, a joint venture may execute a FSA-211 to appoint an attorney-in-fact; however, all members of the joint venture, including the appointed attorney-in-fact, if a member of the joint venture must sign the FSA-211/FSA-211A.

Signature Authority/Power of Attorney Questions and Answers (Continued)

B Power of Attorney

- Q1:** Why are we required to identify the special designations; such as “routing payments to financial institutions”, “Executing CCC-605”, and “Executing CCC-526” on FSA-211? Wouldn’t checking “All current programs” and “All actions” suffice?
- A1:** These special designations were intentionally added to procedure in 1-CM for completing FSA-211 to ensure that the grantor is fully aware of the obligations that are associated *--with these specific transactions; however, with revision of FSA-211 (12-17-08), specific transaction options for “AGI certifications” (item 5) and “routing bank accounts” (item 6) are provided.
- Note:** Because these transaction options are now specifically listed in FSA-211, Section B, if item 1, “All actions” is selected by the grantor, “all actions” includes both routing banking accounts and AGI certifications.--*
- Q2:** During a County Office review it was discovered that FSA program documents had been signed by a representative and a valid FSA-211 was not on file to grant this authority. Can the County Office obtain a new FSA-211 to retroactively make the signature good?
- A2:** No, FSA-211 is effective **only** from the date FSA-211 is correctly executed, and forward (subparagraph 728 C).

FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet

A Completing FSA-211

Use the following instructions to complete FSA-211.

Note: It is the producer’s responsibility to provide a copy of FSA-211 to the applicable crop insurance agent.

*--

Item Number/Section	Instructions
1	Enter name of the individual to whom power of attorney is being granted (attorney-in-fact).
2	Enter address of the individual to whom power of attorney is being granted (attorney-in-fact).
3	Enter county of the individual to whom power of attorney is being granted (attorney-in-fact).
4	Enter State of the individual to whom power of attorney is being granted (attorney-in-fact).
5	<p>If an:</p> <ul style="list-style-type: none"> • individual is granting authority to act on their behalf, enter the name of the individual granting the power of attorney authority (Grantor) • entity, such as corporation, partnership, trust, joint venture, or other similar entity is granting authority to act for the entity and bind all members, enter the name of the entity granting the power of attorney authority (Grantor).
A	<p>Check applicable FSA, NRCS, and CCC programs for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor.</p> <p>To have the appointed attorney-in-fact act on specific FSA, NRCS, and CCC programs not listed, enter the specific FSA, NRCS or CCC programs in item A 13, “Other”.</p> <p>Note: Grantor must select both applicable programs in this section and related transactions in Section B.</p>
B	<p>Check applicable FSA, NRCS and CCC transactions for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor.</p> <p>To have the appointed attorney-in-fact act for specific transactions not listed, only specific farms, or only in specific counties, enter the specific FSA, NRCS and CCC transactions, farm numbers, and/or counties, as applicable, in item B 7, “Other”.</p> <p>Note: Grantor must select both applicable transactions in this section and related programs in Section A.</p>
C	<p>Enter specific insured crops, applicable State, county, and years for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor.</p> <p>To have the appointed attorney-in-fact act for all insured crops, enter “ALL”.</p>
D	<p>Check applicable crop insurance transactions for which the appointed attorney-in-fact will have the authority to act on behalf of the grantor.</p> <p>To have the appointed attorney-in-fact act on specific crop insurance transactions not listed, enter the specific transactions in item D 7, “Other”.</p>

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FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet
(Continued)

A Completing FSA-211 (Continued)

*--

Item Number/Section	Instructions
6 A-B	<p>If the grantor is an individual, the individual granting the authority must sign, and enter effective date, in items 6 A and B, respectively.</p> <p>If the grantor is an entity, such as a general partnership, trust, joint venture, or other similar entity, and there is no individual already authorized to act for the entity, all members of the entity must sign FSA-211.</p> <p>If the grantor is a corporation and the corporate documents do not provide for redelegation of authority, all officers of the corporation or members of the entity must sign FSA-211. If there are more than 2 member/officer signatures required:</p> <ul style="list-style-type: none"> • check box in item 6C • attach completed FSA-211A to FSA-211. <p>Note: Check the box in item 6C only when FSA-211A will be attached to FSA-211.</p> <p>Important: See item 7 if the grantor is an entity and there is an individual already authorized to act for the entity.</p> <p>Signature must be witnessed by an FSA employee who verifies the identity of the grantor according to item 9. Alternatively, FSA-211 may be acknowledged by a valid Notary Public according to item 8.</p>
7 A-C	<p>If the grantor is an entity, such as a corporation, partnership, trust, or joint venture, the individual or individuals granting the authority must sign, enter their official title, and date, in items 7 A, B, and C, respectively. See item 6 for grantors who are individuals.</p> <p>Important: Signatures must be witnessed by an FSA employee who verifies the identity of the grantor according to item 9. Alternatively, FSA-211 may be acknowledged by a valid Notary Public according to item 8.</p>

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FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet
(Continued)

A Completing FSA-211 (Continued)

*--

Item Number/Section	Instructions
8 (a)-(c)	<p>If the signatures in item 6 or 7, as applicable, are not witnessed by at least 1 FSA employee, FSA-211 must be acknowledged by a valid notary public in item 9. The notary public's signature, State, and county of commission, and certification are required.</p> <p>Notes: In general, a notary public's certification must include:</p> <ul style="list-style-type: none"> • acknowledgement ("acknowledged or subscribed before me") • State and county of commission • signature • date • the notary's embossing seal or stamp • the notary's commission expiration date. <p>Questions specific to State law requirements about notary publics should be directed to the Regional Attorney's office or applicable Secretary of State's office.</p>
9 A-C	<p>At least 1 FSA employee must witness the signature in item 6 or 7, as applicable. The FSA employee must verify the grantor's identity by either personal knowledge or by reviewing the grantor's government-issued picture identification, such as a valid driver's license. The employee must sign, date, and enter his or her official position in items 9 A, B, and C, respectively.</p> <p>Notarized FSA-211's may be accepted instead of forms witnessed by an FSA employee (item 8). When the grantor is a corporation, the corporate seal of the grantor may be accepted in place of FSA employee witness or notarization.</p>
10 (a)-(e)	<p>Enter the county and State of the County Office the FSA-211 is served in items 10 (a) and (b), respectively. Enter the day, month, and year the properly completed FSA-211 was served to the County Office in items 10 (c), (d), and (e), respectively.</p> <p>Note: FSA-211 is effective only when all the following are met:</p> <ul style="list-style-type: none"> • all required items are completed • a valid signature and date is obtained, and witnessed or notarized • FSA-211 is served to the County Office.

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FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet
(Continued)

B Completing FSA-211A

Use the following instructions to complete FSA-211A.

*--

Item Number/ Section	Instructions
	<p>FSA-211A shall be used only when all of the following are met:</p> <ul style="list-style-type: none"> • grantor is an entity, such as a general partnership, joint venture, corporation, limited liability company, limited liability partnership, or other similar entity • there is no 1 individual already authorized to act for the entity • more than 2 member signatures are required. <p>Number each continuation sheet consecutively.</p> <p>Example: If there are a total of 3 continuation sheets, they would be numbered “1 of 3”, “2 of 3”, and “3 of 3”, respectively.</p> <p>Important: All continuation sheets must be attached to applicable FSA-211.</p>
1	Enter the name of the attorney-in-fact from FSA-211, item 1.
2	Enter the name of the entity from FSA-211, item 5.
3, 4, 5, 6, 7 A and B	Individual members shall sign and date.
3, 4, 5, 6, 7 C through E	<p>At least 1 FSA employee must witness the grantor’s signature.</p> <p>FSA employee must verify the grantor’s identity by either personal knowledge or by reviewing the grantor’s government issued picture identification, like a valid driver license.</p> <p>Grantor’s signature may be notarized instead of witnessed by an FSA employee.</p>
3, 4, 5, 6, 7 F	<p>If the grantor’s signature is not witnessed by at least 1 FSA employee, the form must be acknowledged by a valid Notary Public. The Notary Public’s signature, State and county of commission, and certification are required.</p> <p>Important: One notary public signature may be accepted for multiple grantors only when the notary public clearly identifies each name of the grantor to which the notary applies.</p> <p>Example: Jane Smith, Joe Brown, and Bill Black each sign FSA-211A at the same time in the presence of the same notary public. The notary public signs FSA-211A only once and indicates the notary signature applies to all 3 grantor signatures by identifying each name of the individuals appearing before the notary public.</p>

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FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet
(Continued)

C Example of FSA-211

The following is an example of FSA-211.

*--

This form is available electronically.

FSA-211
(12-17-08)

U. S. DEPARTMENT OF AGRICULTURE
Farm Service Agency - Natural Resources Conservation Service -
Commodity Credit Corporation - Federal Crop Insurance Corporation - Risk Management Agency

POWER OF ATTORNEY

THE UNDERSIGNED does hereby appoint the following grantee:
(1) _____ of the following address: (2) _____
_____ in the county of: (3) _____ in the State of: _____
(4) _____ the attorney-in-fact for (5) _____

(insert grantor's name) in connection with the Farm Service Agency, Natural Resources Conservation Service Agency, or Commodity Credit Corporation programs checked below. **NOTE: This power of attorney form is not valid for FSA Farm Loan Program purposes.**

<p>A. FSA, NRCS and CCC PROGRAMS (Check applicable programs)</p> <p><input type="checkbox"/> 1. All current programs.</p> <p><input type="checkbox"/> 2. All current and all future programs.</p> <p><input type="checkbox"/> 3. Direct and Counter-Cyclical Program.</p> <p><input type="checkbox"/> 4. Average Crop Revenue Election Program.</p> <p><input type="checkbox"/> 5. Supplemental Revenue Assistance Payments Program (SURE).</p> <p><input type="checkbox"/> 6. Tree Assistance Program (TAP).</p> <p><input type="checkbox"/> 7. Livestock Indemnity Program (LIP).</p> <p><input type="checkbox"/> 8. Livestock Forage Disaster Program (LFP).</p> <p><input type="checkbox"/> 9. Emergency Assistance for Livestock, Honey Bees, and Farm-Raised Fish (ELAP).</p>	<p><input type="checkbox"/> 10. Noninsured Crop Disaster Assistance Program.</p> <p><input type="checkbox"/> 11. Marketing Assistance Loans and Loan Deficiency Payments.</p> <p><input type="checkbox"/> 12. Milk Income Loss Contract Program.</p> <p><input type="checkbox"/> 13. Farm Storage Facility Loan Program.</p> <p><input type="checkbox"/> 14. FSA Conservation Programs.</p> <p><input type="checkbox"/> 15. NRCS Conservation Programs.</p> <p><input type="checkbox"/> 16. Tobacco Programs.</p> <p><input type="checkbox"/> 17. Other (Specify): _____</p>	<p>B. TRANSACTIONS for FSA, NRCS and CCC PROGRAMS (Check applicable actions)</p> <p><input type="checkbox"/> 1. All actions.</p> <p><input type="checkbox"/> 2. Signing applications, agreements, and contracts.</p> <p><input type="checkbox"/> 3. Making reports.</p> <p><input type="checkbox"/> 4. Conducting all marketing assistance loan and LDP transactions.</p> <p><input type="checkbox"/> 5. AGI Certification</p> <p><input type="checkbox"/> 6. Routing Banking Accounts</p> <p><input type="checkbox"/> 7. Other (Specify): _____</p>
--	--	---

This form may also be used to grant authority to an attorney-in-fact to act on the grantor's behalf with respect to FCIC crop insurance policies. Checking any of the FCIC transactions does not have any impact as to the FSA, NRCS or CCC transactions checked above:

<p>C. INSURED CROPS/STATE/COUNTY (Enter "All" or specify each crop, state, county and year(s))</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p>	<p>D. CROP INSURANCE TRANSACTIONS (Check applicable actions)</p> <p><input type="checkbox"/> 1. All actions.</p> <p><input type="checkbox"/> 2. Making application for insurance.</p> <p><input type="checkbox"/> 3. Reporting crop acreage and production reports.</p> <p><input type="checkbox"/> 4. Reporting a notice of damage or loss and making claim for indemnity.</p> <p><input type="checkbox"/> 5. Making transfers and cancellations.</p> <p><input type="checkbox"/> 6. Making contract changes.</p> <p><input type="checkbox"/> 7. Other (Specify): _____</p>
---	---

This Power of Attorney is valid in all counties in the United States unless otherwise noted. This power of attorney shall remain in full force and effect until (1) written notice of its revocation has been duly served upon FSA, NRCS or CCC as appropriate; (2) death of the undersigned grantor; or (3) incompetence or incapacitation of the undersigned grantor. The undersigned grantor shall provide separate written notice of revocation to the applicable crop insurance agent. This power of attorney shall not be effective until properly executed and served to a USDA Service Center.

AUTHORIZED SIGNATURES		
6A. Signature of Grantor (Individual)	6B. Signature Date (MM-DD-YYYY)	6C. For Grantor's Signature Continuation, check here if FSA-211A is attached. <input type="checkbox"/>
7A. Signature of Grantor (Partnership, Corporation, Trust, etc.) (By)	7B. Title/Relationship of Individual Signing in the Representative Capacity	7C. Signature Date (MM-DD-YYYY)
8. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature (a) _____ the State of (b) _____ the County of (c) _____		
FOR FSA USE ONLY		
9A. Witness Signature (FSA Employee Only)	9B. Signature Date	9C. Official Position
10. This power of attorney was served to (a) _____ of _____ and became effective this (c) _____ day of (d) _____, (e) _____, USDA Service Center, (b) State _____.		
<p>NOTE: The primary authority for requesting and safeguarding the information described on this form is the Food, Conservation, and Energy Act of 2008 (Pub. L. 110-246 and any amendments to such act as may follow). The information requested is necessary for the authorized attorney-in-fact to act in a representative capacity for the undersigned grantor. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in a determination of ineligibility for certain program benefits and other financial assistance administered by USDA. The information collected as a result of this form may be released to USDA employees, USDA contractors, or authorized USDA cooperators who are bound to safeguard the information under Section 1619 of the Food, Conservation and Energy Act, the Privacy Act of 1974, the E-Government Act of 2002, and related authorities. The information collection is exempted from the Paperwork Reduction Act, as it is required for the administration of the Food, Conservation, and Energy Act of 2008 (see Pub. L. 110-246, Title I, Subtitle F - Administration and Title II, Subtitle J - Administration). The provisions of criminal, civil, and privacy statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO THE APPLICABLE USDA SERVICE CENTER.</p>		

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

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FSA-211, Power of Attorney and FSA-211A, Power of Attorney Signature Continuation Sheet
(Continued)

D Example of FSA-211A

The following is an example of FSA-211A.

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This form is available electronically.		
FSA-211A (12-17-08)	U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency - Natural Resources Conservation Service - Federal Crop Insurance Corporation - Commodity Credit Corporation - Risk Management Agency POWER OF ATTORNEY SIGNATURE CONTINUATION SHEET	Attachment Pages ____ of ____
Attach to Form FSA-211		
NOTE: <i>The primary authority for requesting and safeguarding the information described on this form is the Food, Conservation, and Energy Act of 2008 (Pub L. 110-246 and any amendments to such act as may follow). The information requested is necessary for the authorized attorney-in-fact to act in a representative capacity for the undersigned grantor. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in a determination of ineligibility for certain program benefits and other financial assistance administered by USDA. The information collected as a result of this form may be released to USDA employees, USDA contractors, or authorized USDA cooperators who are bound to safeguard the information under Section 1619 of the Food, Conservation and Energy Act, the Privacy Act of 1974, the E-Government Act of 2002, and related authorities. The information collection is exempted from the Paperwork Reduction Act, as it is required for the administration of the Food, Conservation, and Energy Act of 2008 (see Pub. L. 110-246, Title I, Subtitle F- Administration and Title II, Subtitle J - Administration). The provisions of criminal, civil, and privacy statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO THE APPLICABLE USDA SERVICE CENTER.</i>		
1. Name of Attorney-In-Fact (Item (1) from FSA-211)		2. Name of Grantor (Item (5) from FSA-211)
AUTHORIZED SIGNATURES		
3A. Signature of Grantor (By)	3B. Title/Relationship of Individual Signing in the Representative Capacity	3C. Signature Date
3D. Witness Signature (FSA Employee Only)		3E. Signature Date
3F. Official Position		
3G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ the State of _____ the County of _____		
4A. Signature of Grantor (By)	4B. Title/Relationship of Individual Signing in the Representative Capacity	4C. Signature Date
4D. Witness Signature (FSA Employee Only)		4E. Signature Date
4F. Official Position		
4G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ the State of _____ the County of _____		
5A. Signature of Grantor (By)	5B. Title/Relationship of Individual Signing in the Representative Capacity	5C. Signature Date
5D. Witness Signature (FSA Employee Only)		5E. Signature Date
5F. Official Position		
5G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ the State of _____ the County of _____		
6A. Signature of Grantor (By)	6B. Title/Relationship of Individual Signing in the Representative Capacity	6C. Signature Date
6D. Witness Signature (FSA Employee Only)		6E. Signature Date
6F. Official Position		
6G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ the State of _____ the County of _____		
7A. Signature of Grantor (By)	7B. Title/Relationship of Individual Signing in the Representative Capacity	7C. Signature Date
7D. Witness Signature (FSA Employee Only)		7E. Signature Date
7F. Official Position		
7G. Notary Public (this form shall be acknowledged by a Notary Public unless witnessed by a FSA employee or a corporate seal of grantor is affixed). Signature: _____ the State of _____ the County of _____		
<small>The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.</small>		

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State and County Codes and Counties (Continued)

50 Vermont (Continued)									
Codes		County	Non-Ag.	Non-FIPS	Codes		County	Non-Ag.	Non-FIPS
St.	Co.				St.	Co.			
50	017	Orange			50	023	Washington		
50	019	Orleans			50	025	Windham		
50	021	Rutland			50	027	Windsor		
51 Virginia									
Codes		County	Non-Ag.	Non-FIPS	Codes		County	Non-Ag.	Non-FIPS
St.	Co.				St.	Co.			
51	001	Accomack			51	063	Floyd		
51	003	Albemarle		X	51	065	Fluvanna		
51	005	Alleghany		X	51	067	Franklin		
51	007	Amelia			51	069	Frederick		X
51	009	Amherst			51	071	Giles		
51	011	Appomattox			51	073	Gloucester		
51	013	Arlington	X		51	075	Goochland		
51	015	Augusta			51	077	Grayson		X
51	017	Bath			51	079	Greene		
51	019	Bedford			51	081	Greensville		X
51	021	Bland			51	083	Halifax		
51	023	Botetourt			51	085	Hanover		
51	025	Brunswick			51	087	Henrico		X
51	027	Buchanan			51	089	Henry		X
51	029	Buckingham			51	091	Highland		
51	031	Campbell		X	51	093	Isle of Wight		
51	033	Caroline			51	095	James City		X
51	035	Carroll		X	51	097	King and Queen		
51	036	Charles City			51	099	King George		
51	037	Charlotte			51	101	King William		
51	041	Chesterfield			51	103	Lancaster		
51	043	Clarke			51	105	Lee		
51	045	Craig			51	107	Loudoun		
51	047	Culpeper			51	109	Louisa		
51	049	Cumberland			51	111	Lunenburg		
51	051	Dickenson			51	113	Madison		
51	053	Dinwiddie, Petersburg City		*--X--*	51	115	Mathews		
51	057	Essex			51	117	Mecklenburg		
51	059	Fairfax			51	119	Middlesex		
51	061	Fauquier			51	121	Montgomery		X

State and County Codes and Counties (Continued)

51 Virginia (Continued)									
Codes		County	Non-Ag.	Non-FIPS	Codes		County	Non-Ag.	Non-FIPS
St.	Co.				St.	Co.			
51	125	Nelson			51	165	Rockingham, Harrisonburg City		X
51	127	New Kent			51	167	Russell		
51	131	Northampton			51	169	Scott		
51	133	Northumberland			51	171	Shenandoah		
51	135	Nottoway			51	173	Smyth		
51	137	Orange			51	175	Southampton, Franklin City		X
51	139	Page			51	177	Spotsylvania, Fredericksburg City		X
51	141	Patrick			51	179	Stafford		
51	143	Pittsylvania			51	181	Surry		
51	145	Powhatan			51	183	Sussex		
51	147	Prince Edward			51	185	Tazewell		
51	149	Prince George * * *			51	187	Warren		
51	153	Prince William			51	191	Washington, Bristol City		X
51	155	Pulaski			51	193	Westmoreland		
51	157	Rappahannock			51	195	Wise		
51	159	Richmond			51	197	Wythe		
51	161	Roanoke, Roanoke City, Salem City		X	51	199	York, Poquoson City		X
51	163	Rockbridge, Buena Vista City, Lexington City		X					
Independent Cities									
51	510	Alexandria	X		51	670	Hopewell	X	
51	515	Bedford	X		51	683	Manassas	X	
51	550	Chesapeake			51	685	Manassas Park	X	
51	570	Colonial Heights	X		51	700	Newport News		
51	590	Danville	X		51	710	Norfolk	X	
51	600	Fairfax	X		51	720	Norton	X	
51	610	Falls Church	X		51	740	Portsmouth	X	
51	650	Hampton			51	790	Staunton	X	

Approved Abbreviations and Acronyms

A Mandatory Abbreviations and Acronyms

Offices shall use the following table to determine FSA use of mandatory abbreviations and acronyms.

Note: The list is in alphabetical order by abbreviation or acronym.

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Abbreviation or Acronym	Term
AAOM	Associate Administrator for Operations and Management
ACH	Automated Clearing House
ACP	Agricultural Conservation Program
ACR	acreage conservation reserve
ACRE	average crop revenue election
ACRS	Automated Cotton Reporting System
ACS	automated claims system
ADC	Application Development Center
ADP	automated data processing
ADPS	Automated Discrepancy Processing System
AFIDA	Agricultural Foreign Investment Disclosure Act
AGI	adjusted gross income
AgLearn	Agriculture Learning Service Database
AID	Agency for International Development
ALS	Appeals and Litigation Staff
a.m.	before noon
AMD	Acquisition Management Division
AMS	Agricultural Marketing Service
APFO	Aerial Photography Field Office
APH	actual production history
APHIS	Animal and Plant Health Inspection Service
APSS	automated price support system
ARCP	Agricultural Resource Conservation Program
ARP	Acreage Reduction Program
ARS	Agricultural Research Service
ATM	automated teller machine
AWOL	absent without leave
AWP	adjusted world price
BIA	Bureau of Indian Affairs
BLM	Bureau of Land Management
BOC	budget object code
BQL	base quota level
BUD	Budget Division

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
CAB	crop acreage base
CAIVRS	Credit Alert Interactive Voice Response System
CAMS	Combined Administrative Management System
CAT	Catastrophic Risk Protection Program
CCC	Commodity Credit Corporation
CCE	common computing environment
CDP	Crop Disaster Program
CED	County Executive Director
CEPD	Conservation and Environmental Programs Division
CFR	Code of Federal Regulations
CLP	Certified Lender Program
CLU	common land unit
CMA	Cooperative Marketing Association
CMC	Community Committee
COB	close of business
COC	County Committee
COD	Commodity Operations Division
COE	County Office expense
COPS	Cotton Online Processing System
COR	county operations reviewer
CORP	County Operations Review Program
COT	County Operations Trainee
COWM	County Office work measurement
CR	Office of Civil Rights, USDA
CREP	Conservation Reserve Enhancement Program
CRES	Conservation Reporting and Evaluation System
CRP	Conservation Reserve Program
CRP-SIP	CRP-Signing Incentive Payment
CRS	Common Receivable System
CSREES	Cooperative State Research, Education, and Extension Service
CSRS	Civil Service Retirement System
c.t.	central time
CU	conserving uses
CW	converted wetland

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
DACO	Deputy Administrator for Commodity Operations
DAFLP	Deputy Administrator for Farm Loan Programs
DAFO	Deputy Administrator for Field Operations
DAFP	Deputy Administrator for Farm Programs
DALR\$	Debt and Loan Restructuring System
DAM	Deputy Administrator for Management
DCIA	Debt Collection Improvement Act of 1996
DCP	Direct and Counter-Cyclical Program
DD	District Director
DDAP	Dairy Disaster Assistance Payment
DIPP	Dairy Indemnity Payment Program
DLS	Direct Loan System
DMA	Designated Marketing Association
DOI	Department of the Interior
DOJ	Department of Justice
DR	Departmental Regulation
DRPP	Dairy Refund Payment Program
DSA	disaster set-aside
DTP	Dairy Termination Program
DVD	digital video disc

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
EAP	Employee Assistance Program
ECOAA	Equal Credit Opportunity Act
ECP	Emergency Conservation Program
EE	economic emergency loan
EEO	equal employment opportunity
EEOC	Equal Employment Opportunity Commission
EFAP	Emergency Feed Assistance Program
EFP	Emergency Feed Program
EFT	electronic funds transfer
ELS	extra long staple
EM	emergency loan
EPA	Environmental Protection Agency
EQIP	Environmental Quality Incentives Program
ERS	Economic Research Service
ESS	Executive Secretariat Staff
e.t.	eastern time
EWP	Emergency Watershed Protection Program
EWR	electronic warehouse receipt
EWRP	Emergency Wetlands Reserve Program

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
FAS	Foreign Agricultural Service
FAV	fruit and vegetable
FAX	facsimile system or the act of sending a message by the facsimile system
FBI	Federal Bureau of Investigation
FBP	Farm Business Plan
FCA	Farm Credit Administration
FCC	Federal Communications Commission
FCIC	Federal Crop Insurance Corporation
FDA	Food and Drug Administration
FDIC	Federal Deposit Insurance Corporation
FEGLI	Federal Employees' Group Life Insurance
FEHB	Federal Employee Health Benefits
FEMA	Federal Emergency Management Agency
FERS	Federal Employees Retirement System
FFAS	Farm and Foreign Agricultural Services
FFIS	Foundation Financial Information System
FFLP	Farm Facility and Drying Equipment Loan Program
FIP	Forestry Incentive Program
FIPS	Federal Information Processing Standards

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
FLC	Farm Loan Chief
FLM	Farm Loan Manager
FLO	Farm Loan Officer
FLOO	Farm Loan Operations Office, St. Louis, Missouri
FLOT	Farm Loan Officer Trainee
FLP	Farm Loan Programs
FMD	Financial Management Division
FNS	Food and Nutrition Service
FO	farm ownership loan
FOIA	Freedom of Information Act
FR	Federal Register
FRB	Federal Reserve Bank
FRC	Federal Records Center
FS	Forest Service
FSA	Farm Service Agency
FSC	Financial Services Center, FMD
FSFL	Farm Storage Facility Loan
FSIS	Food Safety and Inspection Service Note: Do not confuse with the Federal-State Inspection Service, AMS.
FSN	farm serial number
FTE	full-time equivalent
FTS	Federal Telecommunications System
FWS	Fish and Wildlife Service, DOI
FY	fiscal year

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
GAO	Government Accountability Office
GIPSA	Grain Inspection, Packers, and Stockyards Administration
GIS	Geographic Information System
GLS	Guaranteed Loan System
GPO	Government Printing Office
GRP	Grassland Reserve Program
GS	General Schedule
GSA	General Services Administration
HEL	highly erodible land
HELCS	highly erodible land conservation
HRD	Human Resources Division
ICC	Interstate Commerce Commission
IRS	Internal Revenue Service
ITSD	Information Technology Services Division
KCCC	Kansas City Computer Center
KCCO	Kansas City Commodity Office
KCHRO	Kansas City Human Resources Office

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
LA	loss adjusters
LAA	local administrative area
LAN	local area network
LAP	Livestock Assistance Program
LCP	Livestock Compensation Program
LDP	loan deficiency payment
LFP	Livestock Forage Disaster Program
LIP	Livestock Indemnity Program
LLC	limited liability company
LMD	Loan Making Division
LSA	Loan Servicing Agent
LSPMD	Loan Servicing and Property Management Division
M&IE	meals and incidental expenses
MAC	Management of Agricultural Credit
MAL	marketing assistance loan
MILC	Milk Income Loss Contract
MOU	memorandum of understanding
MPL	marginal pasture land
MSD	Management Services Division
MSPB	Merit Systems Protection Board
m.t.	mountain time
NAD	National Appeals Division
NALR	national average loan rate
NAP	Noninsured Crop Disaster Assistance Program
NASCOE	National Association of FSA County Office Employees
NASS	National Agricultural Statistics Service
NEPA	National Environmental Policy Act
NFC	National Finance Center
NITC	National Information Technology Center
NPS	National Payment Service
NRCS	Natural Resources Conservation Service

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
OALJ	Office of Administrative Law Judges
OBPA	Office of Budget and Program Analysis
OBPI	Office of Business and Program Integration, FSA
OBF	Office of Budget and Finance
OC	Office of Communications
OCFO	Office of the Chief Financial Officer
OCIO	Office of the Chief Information Officer
OCR	Office of Civil Rights, FSA
OEA	Office of External Affairs, FSA
OFR	Office of Federal Register
OGC	Office of the General Counsel
OHRM	Office of Human Resources Management
OIG	Office of the Inspector General
OL	operating loan
OMB	Office of Management and Budget
OO	Office of Operations
OPF	official personnel folder
OPM	Office of Personnel Management
ORACBA	Office of Risk Assessment and Cost-Benefit Analysis
ORAS	Operations Review and Analysis Staff
OSDBU	Office of Small and Disadvantaged Business Utilization
OTC	Operations and Testing Center, ITSD

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
PAS	Public Affairs Staff
PC	personal computer
P&CP	planted and considered planted
PDD	Procurement and Donations Division
PDEED	Program Development and Economic Enhancement Division
PECD	Production, Emergencies, and Compliance Division
PII	personally identifiable information
PLAS	Program Loan Accounting System
PLCE	Program Loan Cost Expense
PLM	payment limitation
p.m.	after noon
P.O.	post office
PPH	producer payment history
PSD	Price Support Division
p.t.	pacific time
PT	Program Technician
Pub. L.	public law
RBS	Rural Business-Cooperative Service
RCO	Regional Compliance Office, RMA
RCWP	Rural Clean Water Program
RD	Rural Development
Rev.	revision
RHF	rural housing loan for farm service buildings
RHS	Rural Housing Service
RIF	reduction-in-force
RIG	Regional Inspector General
RL	recreation loan
RMA	Risk Management Agency
RO	Regional Office, RMA
RUS	Rural Utilities Service

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
SBA	Small Business Administration
SCA	Service Center Agency
SCIMS	Service Center Information Management System
SCOAP	State and County Office Automation Project
SDA	socially disadvantaged
SEC	Office of the Secretary
SED	State Executive Director
SPO	servicing personnel office
SRR	soil rental rate
SSA	Social Security Administration
SSFL	Sugar Storage Facility Loan
Stat.	United States statutes-at-large
STC	State Committee
SW	soil and water loan
T&A	time and attendance
TAA	Trade Adjustment Assistance
TAP	Tree Assistance Program
TDD	telecommunication device for the deaf
TDY	temporary duty
TIN	tax identification number
TOP	Treasury Offset Program
TTPP	Tobacco Transition Payment Program

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Approved Abbreviations and Acronyms (Continued)

A Mandatory Abbreviations and Acronyms (Continued)

*--

Abbreviation or Acronym	Term
UCC	Uniform Commercial Code
UGRSA	Uniform Grain and Rice Storage Agreement
U.S.C.	United States Code
USDA	United States Department of Agriculture
USGS	United States Geological Survey
USPAP	Uniform Standards of Professional Appraisal Practice
USPS	United States Postal Service
VDT	video display terminal
WAOB	World Agricultural Outlook Board
WBP	Water Bank Program
WC	wetland conservation
WGI	within-grade increase
WQIP	Water Quality Incentive Projects
WRP	Wetlands Reserve Program
ZIP Code	Zoning Improvement Plan Code

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Approved Abbreviations and Acronyms (Continued)

B Optional Abbreviations and Acronyms

Offices shall use the following table to determine FSA use of optional abbreviations and acronyms.

Note: The list is in alphabetical order by abbreviation or acronym.

Abbreviation or Acronym	Term
Amend.	amendment
--AU	animal unit--
bu.	bushel
Cntd	continued
Co.	company
C/S	cost share
cwt.	hundredweight; cwt. = 100 pounds
Ex.	exhibit
FAB	flexible acreage base
FFC	failure to fully comply
* * *	* * *
ID	identification
Inc.	incorporated
lb.	pound
MW	Midwest

Approved Abbreviations and Acronyms (Continued)

B Optional Abbreviations and Acronyms (Continued)

Abbreviation or Acronym	Term
N/A	not applicable
NE	Northeast
NL	not subject to payment limitation
No.	number
NW	Northwest
Par.	paragraph
SE	Southeast
SL	subject to payment limitation
SSN	Social Security number
St	street
SW	Southwest
TC	table of contents
T/C	transaction code
U.S.	United States
* **	* **
wt.	weight