

**UNITED STATES DEPARTMENT OF AGRICULTURE**

Farm Service Agency  
Washington, DC 20250

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**Acreage and Compliance Determinations**  
**2-CP (Revision 15)**

**Amendment 66**

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



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**Amendment Transmittal**

**A Reasons for Amendment**

Subparagraph 4 E has been added to clarify that SED's are responsible for maintaining the State Compliance Plan of Operations, but are no longer required to FAX the plan to the Common Provisions Branch, PECD.

Subparagraph 4 F has been amended to remove the requirement for STC to establish begin and end flying dates for aerial photography.

Subparagraph 321 E has been amended to add ACRE, ALAP, ELAP, LFP, LIP, MILC, and SURE to the list of programs included in the compliance review process.

Subparagraph 322 A has been amended to clarify that only the tax id type of a producer selected for spot check will be displayed on the National Compliance Review and Spot check Producer Listing.

Subparagraph 322 D has been amended to add additional guidance about what years/applications to consider when conducting compliance reviews and spot checks.

Subparagraph 322 E has been added to provide a list of tools County Offices may use to assist in identifying the specific programs producers selected for spot check and review are participating.

Paragraph 349 has been withdrawn to remove CDP as a program included in the national compliance review and spot check process.

Subparagraph 351 B has been amended to provide DCP compliance review questions.

Subparagraph 355 B has been amended to provide revised NAP general compliance review questions.

Subparagraph 356 A has been amended to provide revised TAP compliance review questions.

## Amendment Transmittal (Continued)

### A Reasons for Amendment (Continued)

Paragraph 357 has been added to incorporate ACRE compliance review and spot check questions.

Paragraph 357.5 has been added to incorporate ALAP compliance review and spot check questions.

Paragraph 357.6 has been added to incorporate ELAP compliance review and spot check questions.

Paragraph 357.7 has been added to incorporate LIP compliance review and spot check questions.

Paragraph 357.8 has been added to incorporate LFP compliance review and spot check questions.

Paragraph 357.9 has been added to incorporate MILC compliance review and spot check questions.

Paragraph 357.10 has been added to incorporate SURE compliance review and spot check questions.

Subparagraph 359 B has been amended to clarify that data for all programs does not have to be entered simultaneously.

Subparagraph 360 A has been amended to update instructions for accessing the National Compliance Review Database.

Subparagraph 361 A has been amended to provide updated instructions for entering data in the National Compliance Review Database.

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## 4 Responsibilities

### A Producer's Responsibilities

Each producer who expects to receive benefits under FSA programs is responsible for complying with every provision of that program, including:

- \* \* \* HELC and WC provisions
- \* \* \* accurate acreage reports and production evidence when required.

### B CED's Responsibilities

CED's shall:

- ensure that all compliance activities are completed in a timely manner and according to procedure
- recruit, train, and qualify County Office employees for compliance activities
- obtain producers' reports of acreage
- monitor quality of producer-filed acreage reports by inspecting a statistically sound number of producers, employees, and committee members, as well as all late-filed acreage reports filed for crops
- develop plans for the following:
  - preparing materials needed for producer acreage and production reports
  - assembling documents and equipment for field and program assistants
  - ensuring efficient workflow in the office and the field
  - checking compliance work as directed by STC
- make farm and field inspections, using approved compliance method
- \*--maintain a copy of the acreage reports register, if using an acreage report register was necessary according to subparagraph 18 D.--\*

**4 Responsibilities (Continued)**

**C COC Responsibilities**

COC shall:

- ensure that compliance activities are performed using techniques provided by STC
- ensure that measurement service requests are completed in a timely manner
- review all late-filed acreage reports.

**D DD Responsibilities**

DD shall:

- serve as liaison officer between the State and County Office
- supervise all County Office compliance activities
- assist the State Office in supervising and reviewing all phases of compliance work
- assist CED in training employees involved in acreage and production determinations
- review certification registers and send a copy to the State Office.

**E SED Responsibilities**

\*--SED shall maintain the State Compliance Plan of Operation and shall include plans for the following:

- helping CED's train employees involved in acreage and production determination methods
- supervising County Office compliance operations
- requiring DD's and CED's to make an adequate check of employees' work and provide additional training when necessary
- establishing policy and providing guidance to DD's in the review of County Office compliance activities.--\*

**4 Responsibilities (Continued)**

**F STC Responsibilities**

STC's shall:

- establish the deadline by which County Offices will have completed compliance activities

\* \* \*

- obtain DAFP's approval before implementing deviations from measurement standards
- examine COC recommendations for using other than 3 percent standard deduction for ground measurement
- ensure that all County Offices offer a full range of services, such as:
  - measurement service
  - production determinations.

**5-14 (Reserved)**



**Part 3 Compliance Reviews and Spot Checks****Section 1 General Guidelines, Applicable Programs, and Selection Process****321 Introduction****A Purpose**

County Offices are required to conduct farm inspections to ensure that producers comply with FSA program requirements.

\*--Producers are selected for compliance reviews and spot check through a national selection process. Producers selected shall be spot checked and reviewed for the following programs/activities:

- ALAP
- ACRE
- CRP maintenance and practice checks
- DCP
- ELAP
- FSA-578's
- HELC/WC compliance
- LDP's/MAL's
- LFP, LIP
- MILC
- NAP
- TAP
- SURE.--\*

**B Time of Inspection**

County Offices shall conduct inspections on producers selected through the national selection process at times applicable for the specific program/activity involved. County Offices shall follow applicable program procedure for timing of inspections.

## 322 National Compliance Review and Spot Check Selections

### A National Producer Selection Process

Rather than selecting individual farms, loans, contracts, etc., for compliance reviews, a nationwide selection of producers will be made annually by the National Office using a statistical sampling method. Producers will be selected based on their participation in various programs. FSA employees, committee members, and other required producers are included in the national selection.

**Note:** Because FSA employees, STC and COC members and other “required producers” are included in the national selection, County Offices shall no longer conduct separate spot checks on required producers.

Early each calendar year, the National Office will post the listing of producers selected for annual compliance reviews on the Intranet at

**<http://dc.ffa.intranet.usda.gov/farbill/ccc/default.htm>**.

The national producer selection list will be broken down by State and county. Under each county, the list will display the following:

- producer first and last name and/or business name
- \*--tax ID type (“E”ntity or “S”ocial).

**Notes:** In some cases, there may be multiple producers in the county with the same name. If County Offices have concerns about which producer has been selected for spot check and review, the County Office shall contact the State Office. The State Office shall contact the National Office for TIN for the selected producer.

Producers may operate as an individual and an entity. The national producer selection list will identify the tax ID type associated with the selected producer. County Offices shall only review farms, loans, contracts, etc., associated with the tax ID type listed.

**Example:** Joe Farmer farms as an individual and also farms as a member of a partnership. Joe Farmer was selected for 2007 compliance reviews. The national producer selection list included his first and last name and the tax ID type S. In this example Joe Farmer was selected as an individual (based on his tax ID type). Therefore, County Offices shall only--\* check/review farms, loans, and contacts he is associated with as an individual.

Producers will be listed for each State/county they are associated; thus, compliance reviews and spot checks may be performed for a producer in multiple States/counties depending on the scope of the operation.

County Offices shall print and maintain the list of producers selected in their county. The National Office will **not** make another selection of producers for the year.

**Note:** Not all States and counties may have producers selected for spot check and review.

## 322 National Compliance Review and Spot Check Selections (Continued)

### B DD Concurrence for Nonparticipating Selected Producers

Because the national selection process is based in part on prior years' payments and program participation, some producers selected may not be farming or participating in FSA programs for the current year.

If a County Office determines a producer is not farming for the current year, the County Office shall:

- notate "N/A" by the producer's name on the national producer selection list to indicate that the producer is not participating in FSA programs for the year
- forward the list to DD for review and concurrence.

DD's shall review, initial, and date the list indicating their agreement that the producer is not farming or participating in FSA programs for the year.

### C Adding Additional Producers for Spot Check/Review

Only the producers identified on the national producer selection list are required to be spot checked and reviewed for the programs listed in subparagraph A. However, State and County Offices may spot check any producer not identified on the national producer selection list if there is reason to question the producer's compliance with any program provisions.

### D County Office Responsibilities

County Offices shall:

- continue to flag all required producers in the name and address file in the System 36 according to 1-CM \* \* \*

**Notes:** Although separate inspections will not be conducted on required producers, all required producers must be flagged in the System 36 to ensure they are included in the national selection process. Separate inspections for required producers shall **not** be conducted unless the producer has been selected for spot check under the national selection process.

Required producers include the following:

- State level FSA employees, including SED's, STC members, DD's, and their spouse and minor children
- County level FSA employees, including CED's, COC members, Federal employees employed in the County Office, and their spouse and minor children
- producers with controlling interest in a firm, such as a gin or warehouse, if the records of the firm are used to substantiate production for other producers.

## 322 National Compliance Review and Spot Check Selections (Continued)

### D County Office Responsibilities (Continued)

- perform compliance reviews on all producers selected under the national selection process throughout the year for all programs listed in subparagraph 321 A

**Note:** County Offices shall follow Section 2.5 when performing compliance reviews/spot checks.

- \*--when conducting compliance reviews and spot checks, County Offices shall check:

- for FSA-578 spot checks, the current year FSA-578, as well as any prior year FSA-578 that has been revised since the last spot check list

**Note:** When reviewing prior year FSA-578's, County Offices shall ensure that the correct documentation is on file according to 2-CP.

- for all other programs, any application/contract that has been approved for payment since the last spot check list
- document questions from each program area to record in the National Compliance Review Database according to paragraphs 360 and 361.

### E Available Resources

County Offices may use the following resources as tools to assist them in identifying the specific programs selected producers are participating in:

- web-based FSA application reports

**Note:** Approved application reports are available for most web-based applications, including ACRE, DCP, LFP, LIP, and TAP, and identify producers with approved applications.

- farm records to identify active farms for selected producers
- NPS to identify program payments selected producers received
- FWDM will identify LDP, MAL, and MILC program payments received by selected producers
- APSS will identify MAL and LDP payments producers received in a specific county--\*

**322 National Compliance Review and Spot Check Selections (Continued)****\*--E Available Resources (Continued)**

- SORS to identify outstanding MAL's for a selected producer
- System 36 which contains numerous reports identifying producers with active CRP contracts
- COC meeting minutes to identify applications/contracts approved for various programs.--\*

**323 Refusals to Permit Farm Entry****A Producer Refuses Entry**

If a producer refuses to permit an FSA representative to enter the farm, the representative shall:

- immediately notify CED
- document the following on FSA-578, remarks section:
  - refusal date
  - reason for refusal
  - acreage estimate, if obtainable
- sign and date FSA-578, remarks section.

**B County Office Action**

When advised of a refusal to permit entry, the County Office shall immediately notify the farm operator, in writing, of the following:

- refusal date
- person who made the refusal
- person who was refused entry
- consequences of refusal to permit entry. See subparagraph C.

After notifying the farm operator of the situation and the options available, the FSA representative shall make no further effort to enter the farm.

If the producer does not respond to the letter, or continues to refuse entry, consider all producers on the farm ineligible for program benefits.



**Section 2 (Withdrawn--Amend. 41)****344 (Withdrawn--Amend. 41)****345 (Withdrawn--Amend. 33)****346-348 (Withdrawn--Amend. 41)****Section 2.5 Performing Compliance Reviews and Spot Checks****349 (Withdrawn--Amend. 66)****350 CRP Compliance Reviews****A CRP Maintenance Reviews**

The national producer selection process for compliance described in subparagraph 322 A shall be used for CRP compliance. CRP spot checks shall be performed on all contracts where selected producers have a share. When completing spot checks, County Offices shall collect information sufficient to answer the National Compliance Review Database questions and document that information on FSA-578. This information shall be recorded in the National Compliance Review Database according to paragraphs 360 and 361. The questions included in the National Compliance Review Database are as follows.

- Has an approved cover been maintained according to the conservation plan? **Yes or No.** If “No”, select all of the following that apply.
  - Did COC determine that the participant made a good faith effort to comply with the terms and conditions of CRP-1?
  - Is the finding currently in the process of being appealed?
  - Was a violation found on all or a portion of the contract?

**350 CRP Compliance Reviews (Continued)****A CRP Maintenance Reviews (Continued)**

- Has the producer(s) performed required management activities according to the conservation plan? **Yes or No.** If “No”, select all of the following that apply.
  - Did COC determine that the participant made a good faith effort to comply with the terms and conditions of CRP-1?
  - Is the finding currently in the process of being appealed?
  - Was a violation found on all or a portion of CRP-1?
- Has the approved cover been harvested or grazed without authorization or has other commercial use has been made of the forage (exception: emergency haying or grazing)? **Yes or No.** If “Yes”, select all of the following that apply.
  - Did COC determine that the participant made a good faith effort to comply with the terms and conditions of CRP-1?
  - Is the finding currently in the process of being appealed?
  - Was a violation found on all or a portion of CRP-1?

351 DCP Compliance Reviews

**A Introduction**

The DCP spot check process is State, county, and farm specific. Reviews shall be completed on all producers participating in DCP and selected for spot check according to national producer selection process in subparagraph 322 A. County Offices shall ensure that the spot check process is completed for each farm associated with the selected producer.

**\*--B DCP Compliance Review Questions**

The following questions shall be documented during DCP compliance reviews and recorded in the National Compliance Review Database. Findings shall be recorded by FSN.

County Offices must first enter the farm number for the applicable farm being spot checked. County Office users shall take extra caution when entering the farm number in the National Compliance Review database because there is **not** a validation to the farm records maintenance system.--\*

**Question 1 - Does each producer sharing in the base acreage for the applicable farm have control of enough effective DCP cropland to support their share of the DCP base acreage on CCC-509?**

| <b>IF the spot check results indicate the division of payment provisions have...</b> | <b>THEN County Offices shall select...</b> |
|--|--|
| been met   | “Yes”.                                     |
| not been met   | “No”.                                      |

See 1-DCP, paragraph 354 for specific guidelines for determining whether the division of payment provisions have been met, including whether producers claiming a DCP payment share have control of enough DCP cropland to support base acreage.

**Reminder:** Determining whether a producer has control of sufficient acreage to support their claimed payment share is not simply a comparison of the acres on FSA-578 and CCC-509. Various factors, including the terms of the lease agreement, may impact this determination.

351 DCP Compliance Reviews (Continued)

**\*--B DCP Compliance Review Questions (Continued)--\***

**Question 2 - Did the producer accurately report all fruits and vegetables planted on DCP base acres for the farm?**

| <b>IF the spot check results indicate fruits, vegetables, and wild rice are...</b> | <b>THEN County Offices shall select...</b> |
|--|--|
| planted on base acreage and accurately   | “Yes”.                                     |
| planted on base acreage but not accurately reported                                | “No”.                                      |
| <b>not</b> planted on base acreage or the farm                                     | “Not Applicable”.                          |

**Note:** Questions 3 through 5 shall be skipped if “Not Applicable” is selected.

Producers enrolled in DCP agreed to comply with the planting flexibility provisions, which include the prohibition of planting fruits, vegetables, and wild rice on DCP base acreage, when they signed CCC-509 Appendix. See 1-DCP, Part 8 and 4-CP for provisions about the planting of fruits, vegetables, and wild rice on base acreage.

**Question 3 - If fruits and vegetables were planted on base acres on the farm, does 1 of the FAV planting exceptions apply?**

| <b>IF the spot check results indicate that fruits, vegetables, and/or wild rice are planted on the farm and 1 of the 3 planting exceptions are...</b> | <b>County Offices shall select...</b> |
|---|---------------------------------------|
| applicable to the farm and/or producer selected for spot check  | “Yes”.                                |
| <b>not</b> applicable to the farm and/or producer selected for spot check   | “No”.                                 |

**Note:** Question 3 shall be skipped if fruits, vegetables, and/or wild rice are not planted on the farm.

This question is only applicable if fruits, vegetables, and/or wild rice are planted on the farm and “Yes” or “No” was selected for question 2. See 1-DCP, Part 8 for planting exceptions that may be applicable for the farm and/or producer.

351 DCP Compliance Reviews (Continued)

**\*--B DCP Compliance Review Questions (Continued)--\***

**Question 4 - If “Yes”, specify which exception applies.**

| <b>IF the spot check results indicate the...</b>                           | <b>THEN County Offices shall select...</b> |
|--|--|
| double-cropping exception is applicable according to 1-DCP, paragraph 475  | “Double Cropping”.                         |
| producer history exception is applicable according to 1-DCP, paragraph 477 | “Producer History”.                        |
| farm history exception is applicable according to 1-DCP, paragraph 476     | “Farm History”.                            |

**Note:** Question 4 shall be skipped if question 3 is skipped or “No” is selected.

This question is only applicable if both of the following are applicable:

- fruits, vegetables, and/or wild rice is planted on the farm
- 1 of the 3 exceptions is applicable to the farm and/or producer selected for spot check.

**Question 5 - If “Producer History” or “Farm History” was the acre-for-acre payment reduction assessed properly?**

| <b>IF the spot check results indicate the acre-for-acre payment reduction was...</b> | <b>THEN County Offices shall select...</b> |
|--|--|
| assessed properly  | “Yes”.                                     |
| <b>not assessed</b>  | “No”.                                      |

**Note:** Question 5 shall be skipped if question 4 is skipped or “Double-Cropping” is selected.

This question is only applicable if “Producer History” or “Farm History” was selected for question 4.

351 DCP Compliance Reviews (Continued)

**\*--B DCP Compliance Review Questions (Continued)--\***

**Question 6 - If 1 of the exceptions was not applicable, was a planting violation assessed properly for the farm?**

| <b>IF the spot check results indicate the planting violation was...</b> | <b>THEN County Offices shall select...</b> |
|---|--|
| assessed properly   | “Yes”.                                     |
| <b>not</b> assessed   | “No”.                                      |

**Note:** Question 6 shall be skipped if the answer to question 3 is “No”.

This question is only applicable if both of the following are applicable:

- fruits, vegetables, and/or wild rice was planted on base acreage for the farm
- the planting exceptions are not applicable for the farm and/or producer selected for spotcheck.

**Question 7 - Were wind erosion, water erosion, and weeds, including noxious weeds, controlled as required on the applicable farm?**

| <b>IF the spot check results indicate wind erosion, water erosion, and weeds were...</b> | <b>THEN County Offices shall select...</b> |
|--|--|
| adequately controlled on the farm  | “Yes”.                                     |
| <b>not</b> controlled on the farm  | “No”.                                      |

Producers enrolled in DCP agreed to control wind erosion, water erosion, and weeds, including noxious weeds, when CCC-509 Appendix was signed. See 1-DCP, paragraph 427 and 4-CP, paragraph 33 for provisions about controlling wind erosion, water erosion, and weeds, including noxious weeds.

351 DCP Compliance Reviews (Continued)

**\*--B DCP Compliance Review Questions (Continued)--\***

**Question 8 - If “No”, did the producer take corrective action to correct the maintenance default on DCP base acreage?**

| <b>IF the spot check results indicate the producer(s) on the farm have...</b>                  | <b>THEN County Offices shall select...</b> |
|--|--|
| taken acceptable corrective action to meet the protection of base acre requirements            | “Yes”.                                     |
| <b>not</b> taken acceptable corrective action to meet the protection of base acre requirements | “No”.                                      |

**Note:** Question 8 shall be skipped if the answer to question 7 is “Yes”.

This question is only applicable if wind erosion, water erosion, and/or weeds were not controlled on the farm as determined necessary by STC.

**\*--Question 9 - If the farm is participating in PTPP, were base reductions approved by the State Office and correctly made for each farm?**

| <b>If the spot check results indicate....</b>  | <b>THEN the County Office shall select...</b> |
|--|---|
| the farm is participating in PTPP and base reductions were approved by State Office and reduced correctly    | “Yes”.  |
| the farm is participating in PTPP and base reduction were <b>not</b> approved by State and reduced correctly | “No”.   |
| farm is not participating in PTPP  | “Not Applicable”.                             |

**Question 10: If the farm is participating in PTPP, does production evidence support processed production for applicable crop year for the base acres that were reduced?**

| <b>If the spot check results indicate....</b>   | <b>THEN the County Office shall select...</b> |
|---|---|
| production evidence supports processed production for the applicable crop year base acres were reduced                | “Yes”.  |
| production evidence does <b>not</b> support processed production for the applicable crop year base acres were reduced | “No”.   |
| farm is not participating in PTPP   | “Not Applicable”.                             |

--\*



351 DCP Compliance Reviews (Continued)

**\*--B DCP Compliance Review Questions (Continued)--\***

**Question 11: If the farm updated pulse crop base acres, is the pulse crop base established on each tract supported by documentation from 1998 through 2001 supporting the base acres that were added?**

| <b>If the spot check results indicate....</b>  | <b>THEN the County Office shall select...</b> |
|--|---|
| the updated pulse crop base established on each tract is supported by 1998 through 2001 documentation            | “Yes”.  |
| the updated pulse crop base established on each tract <b>is not</b> supported by 1998 through 2001 documentation | “No”.   |
| farm did not update pulse crop base acres  | “Not Applicable”.                             |

**Question 12: If the farm updated pulse crop yields, does production evidence support production for the 1998 through 2001 crop years?**

| <b>If the spot check results indicate....</b>   | <b>THEN the County Office shall select...</b> |
|---|---|
| production evidence supports production for updated pulse crop yields on the farm                 | “Yes”.  |
| production evidence does <b>not</b> supports production for updated pulse crop yields on the farm | “No”.   |
| farm did not update pulse crop yields   | “Not Applicable”.                             |

**Question 13: If the farm has a rice acreage base, were rice base acres apportioned to long grain rice and medium grain rice correctly?**

| <b>If the spot check results indicate....</b>   | <b>THEN the County Office shall select...</b> |
|---|---|
| rice base acres were apportioned to long grain and medium grain rice correctly            | “Yes”.  |
| rice base acres were <b>not</b> apportioned to long grain and medium grain rice correctly | “No”.   |
| farm did not have a rice acreage base   | “Not Applicable”.                             |

--\*

**\*--352 FSA-578/Crop Acreage Compliance Reviews****A Introduction**

County Offices shall:

- perform acreage spot checks to ensure the accuracy of reported acreage
- conduct acreage spot checks on all:
  - producers selected in the county through the national compliance review/spot check selection process in subparagraph 322 A
  - late-filed acreage reports filed for crops according to subparagraph 21 A.

**B Time of Inspection**

County Offices shall inspect farms before evidence of the crop is destroyed.

**C When to Use Ground Compliance**

County Offices shall use ground compliance to determine acreage when digital imagery is not received or is not received timely.

**D Performing Reviews**

The entire acreage for the crop reported on FSA-578 must be spot checked.

If a selected producer is a field rent tenant on a farm that has several tenants and landowners, County Offices must check the entire crop acreage of the crop that the selected producer has an interest in, not all crops on the farm.

**Example:** Producer A is a tenant on the farm and only has control of 10 acres on which he has planted corn. Producer A is selected for spot check. In this case, the County Office must check all of the corn on the farm. The County Office does not have to check any other crops on the farm unless Producer A plants another crop.

**E Recording Determined Acreage Results**

County Offices shall:

- enter acreage determinations in the FSA-578 software according to paragraph 251
- use FSA-468 software to notify producers of spot check results.--\*

**\*--354 LDP's/MAL Compliance Reviews (Continued)**

**A Performing Reviews (Continued)**

For MAL's:

- State Code: \_\_\_\_\_
- County Code: \_\_\_\_\_
- Crop Code: \_\_\_\_\_
- Loan No.: \_\_\_\_\_
- Original Loan Quantity: \_\_\_\_\_
- Original Loan Amount: \_\_\_\_\_
- Outstanding Loan Quantity: \_\_\_\_\_
- Outstanding Loan Amount: \_\_\_\_\_
- Was a farm-visit conducted to complete the spot check? **Yes or No.** If No, explain.

**Example:** MAL repaid to zero, but market gain was earned; indicate the type of acceptable production evidence provided.

- Will the spot check farm visit (paid measurement service) be used as final production evidence? **Yes or No.**
- How many farm-storage structures (bins) were spot checked and measured? \_\_\_\_\_. Provide total measured quantity. \_\_\_\_\_
- Was the loan quantity spot checked equal to or greater than the total loan quantity pledged as collateral? **Yes or No.** If no, was loan quantity measured resulted in a shortage or violation? **Shortage or Violation.**
- Was the spot checked quantity properly maintained? Yes or No. If no, explain.
- Was the storage structure in good condition? Yes or No. If no, explain.
- Has the producer violated the terms and conditions of the Loan Note and Security Agreement? **Yes or No.** If yes, explain and indicate the actions taken.--\*

355 NAP Compliance Reviews

**A NAP Approved Yield Reviews**

County Offices shall conduct NAP approved yield reviews on all producers participating in NAP that have been selected through the National selection process according to subparagraph 322 A. NAP approved yield reviews shall be performed according to 1-NAP, paragraph 600.

After completing CCC-579 according to 1-NAP, paragraph 600, record the findings  
\*--in the National Compliance Review Database.

**Note:** Findings shall be recorded by unit, crop, type, intended use, practice, and planting--\*  
period.

- Does production evidence support certified production for the most recent three APH years?
- Was the current approved yield changed as a result of a spot check?
- Will a correction be made to the approved yield for the following year?

**\*--B NAP General Reviews--\***

County Offices shall conduct general NAP reviews for any producer participating in NAP that has been selected for review and spot check through the National selection process according to subparagraph 322 A.

\*--The following shall be documented during general NAP reviews and shall be entered in the National Compliance Review Database. Findings shall be recorded by unit, crop, crop type, intended use, practice, and planting period.

|   | <b>Question</b>  |
|---|--|
| 1 | Was the transfer of NAP coverage initiated after the application closing date and before the earlier of the disaster event or end of coverage? <b>Yes, No, or N/A</b>  |
| 2 | <b>For yield based crops</b> , did the producer exceed acreage and/or production tolerances when reporting acreage and/or production? <b>Yes or No</b><br><br>If <b>yes</b> , did COC determine the producer eligible or ineligible? <b>Eligible or Ineligible</b>   |
| 3 | <b>For value loss crops</b> , did the field market value A (FMVA) and field market value B (FMVB) accurately reflect the producer's accrual inventory records and valuation used to calculate loss? <b>Yes or No</b><br><br>If <b>no</b> , what was the <b>overpayment</b> or <b>underpayment</b> ? \$_____. |

--\*

**\*--355 NAP Compliance Reviews (Continued)**

**C NAP Reports**

Quality control reviews for NAP are required to ensure that NAP is administered according to applicable regulations.

See 1-NAP, Part 10, Section 7 for printing NAP reports.

**D Preharvest Inspections**

Conduct a preharvest inspection according to LAM, paragraph 148, on any producer with previous questionable loss history.

**E LA Reviews**

Complete LA reviews according to subparagraph 332 E.

**Note:** These reviews may be achieved through a combination of field reviews and review of open claims. Performing reviews only of open claims will not satisfy this requirement.

**F Second Party Review of Losses**

See 5-DAP (Rev. 2), subparagraph 276 B for second party review of losses.--\*

356 \* \* \* TAP Compliance Reviews

**A Performing Reviews**

County Offices shall perform \* \* \* TAP compliance reviews for any producer that participated in \* \* \* TAP that was selected for spot check and review through the national producer selection process in subparagraph 322 A.

During reviews, answers to the following questions shall be recorded for entry into the \*--National Compliance Review Database. Data shall be recorded by stand, applicant's share, and crop.

|   | <b>Question</b>   |
|---|---|
| 1 | Was a valid signature obtained on the TAP application in the administrative County Office? <b>Yes or No</b>   |
| 2 | Did the applicant meet RMPR or obtain a waiver on all NAP eligible or insurable crops? <b>Yes, No, or N/A</b>   |
| 3 | Did the applicant meet definition of SDA, limited resource, or beginning farmer or rancher? <b>Yes or No</b>  |
| 4 | Were mortality losses the result of an eligible natural disaster? <b>Yes or No</b>  |
| 5 | Did the applicant complete all practices for the stand as indicated on the TAP application? <b>Yes or No</b>  |
| 6 | Did the applicant's receipts accurately reflect actual costs incurred for all components of the completed practices? <b>Yes or No</b><br><br><ul style="list-style-type: none"> <li>• If <b>yes</b>, no further action is needed.</li> <li>• If <b>no</b>, what was the overpayment or underpayment? \$_____</li> </ul> |
| 7 | Did the applicant accurately certify that no other benefit was received from any other disaster program for the same loss? <b>Yes or No</b><br><br>If <b>yes</b> , what was the name and dollar amount of the other disaster program?   |

--\*

**\*--357 ACRE Compliance Reviews**

**A Performing Reviews**

Reviews shall be completed on all producers participating in ACRE and selected for spot check according to the national producer selection process in subparagraph 322 A. County Offices shall ensure that the spot check process is completed for each farm associated with the selected producer. The following questions shall be documented during ACRE compliance reviews. The applicable responses shall be recorded in the National Compliance Review Database.

|    | <b>Question</b>  |
|----|--|
| 1  | FSN spot checked. <b>Enter actual FSN spot checked.</b>  |
| 2  | Does each producer sharing in the base acreage for the applicable farm have control of enough effective DCP cropland to support their share of the base acreage on CCC-509 ACRE? <b>Yes, No, or N/A</b>  |
| 3  | Did the producer accurately report all FAV's planted on base acres for the farm? <b>Yes, No, or N/A</b>  |
| 4  | If FAV's were planted on base acres on the farm, does 1 of the FAV planting exceptions apply? <b>Yes, No, or N/A</b><br><br>If <b>yes</b> , which exception applies? <b>Double-Cropping, Producer History, Farm History, or N/A</b>  |
| 5  | If "Producer History" or "Farm History" was the acre-for-acre payment reduction assessed properly? <b>Yes, No, or N/A</b>  |
| 6  | If 1 of the exceptions was not applicable, was a planting violation assessed properly for the farm? <b>Yes, No, or N/A</b>   |
| 7  | Were wind erosion, water erosion, and weeds, including noxious weeds, controlled as required on the applicable farm? <b>Yes, No, or N/A</b><br><br>If <b>no</b> , did the producer take corrective action to correct the maintenance default on base acreage? <b>Yes or No</b> |
| 8  | If the farm is participating in PTPP, were base reductions approved by the State Office and were reductions made correctly on each farm participating in PTPP? <b>Yes, No, or N/A</b>  |
| 9  | If the farm is participating in PTPP, does production evidence support processed production for the applicable crop year for the base acres that were reduced? <b>Yes, No, or N/A</b>  |
| 10 | If the farm updated pulse crop base acres, is the pulse crop base established on each tract supported by documentation from 1998 through 2001 supporting the base acres that were added? <b>Yes, No, or N/A</b>  |
| 11 | If the farm updated pulse crop yields, does production evidence support production for the 1998 through 2001 crop years? <b>Yes, No, or N/A</b>  |
| 12 | If the farm has a rice acreage base, were rice base acres apportioned to long grain rice and medium grain rice correctly? <b>Yes, No, or N/A</b>   |
| 13 | Does the production evidence support the FSA-658 certification? <b>Yes or No</b><br><br><b>Important: Require the producer on the farm to furnish production evidence to support the FSA-658 certification.</b>  |

--\*

**\*--357.5 ALAP Compliance Reviews**

**A Performing Reviews**

County Offices shall document the following questions during ALAP reviews. Findings shall be loaded in the National Compliance Review Database.

|   | <b>Question</b>  |
|---|--|
| 1 | Was a valid signature obtained on CCC-895? <b>Yes or No</b>  |
| 2 | Was the ALAP application received during the application period? <b>Yes or No</b>  |
| 3 | Does production evidence support certified production for the 2003 crop asparagus reported on the ALAP application? <b>Yes or No</b>       |
| 4 | Did the producer certify correctly that he/she had an interest in 2003 and 2007 crop year asparagus production on a farm? <b>Yes or No</b> |
| 5 | Was appropriate CCC-502 filed to determine foreign person status? <b>Yes or No</b>   |
| 6 | Was AD-1026 filed to determine compliance with HELC/WC provisions? <b>Yes or No</b>  |
| 7 | Did any discrepancy result in a refund of ALAP benefits? <b>Yes or No</b><br><br>If <b>yes</b> , enter requested refund amount \$_____.    |

--\*

**\*--357.6 ELAP Compliance Reviews**

**A Performing Reviews**

County Offices shall document the following questions during ELAP reviews. Findings shall be loaded in the National Compliance Review Database.

| <b>Question</b>  |  |
|--|--|
| <b>Livestock, Honeybees, and Farm-Raised Fish Losses</b> |  |
| 1  | Was a valid signature obtained on ELAP application? <b>Yes or No</b>   |
| 2  | Did the participant timely file a notice of loss? <b>Yes or No</b>   |
| 3  | Did the participant suffer livestock, honeybees, and/or farm-raised fish losses because of an eligible adverse weather event or loss condition that occurred in the calendar year for which assistance is being requested? <b>Yes or No</b>  |
| 4  | Did the participant meet RMPR for all crops planted or intended to be planted for harvest on every farm in which the producer has an interest, except grazing, or meet the farm-raised fish or honeybee producer exceptions provided in 1-LDAP, subparagraphs 242 M and N? <b>Yes or No</b>  |
| 5  | For discrepancies, did any discrepancy result in a refund of ELAP benefits? <b>Yes or No</b><br><br>If <b>yes</b> , enter requested refund amount \$ _____   |
| <b>Livestock Losses</b>                                  |  |
| 6  | If participant is applying for livestock losses, does participant's current inventory of applicable livestock match the number and/or kind/type/weight range of livestock claimed on the ELAP application? <b>Yes or No</b>  |
| 7  | If participant is applying for livestock losses, did the participant, during the 60 calendar days before the beginning of the eligible adverse weather event or loss condition, own, lease, purchase, enter into a contract to purchase, or was a contract grower of the livestock claimed on the ELAP application? <b>Yes or No</b> |
| 8  | If the participant is applying for livestock losses, did all livestock entered on the ELAP application meet all eligibility criteria, including being maintained for commercial use as part of the participant's farming operation? <b>Yes or No</b>   |
| 9  | If the participant is applying for livestock death losses, did the participant provide verifiable documentation of livestock deaths claimed on FSA-918, including livestock that the participant claims died because of normal mortality? <b>Yes or No</b>   |
| 10   | If the participant is applying for livestock grazing losses, did the participant suffer a grazing loss on eligible grazing lands physically located in the county where the eligible adverse weather or loss condition occurred because of an eligible adverse weather event or loss condition? <b>Yes or No</b>                     |
| 11   | For purchased livestock feed losses, did the participant provide original receipts for forage or feed stuffs purchased? <b>Yes or No</b>   |

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\*--357.6 ELAP Compliance Reviews (Continued)

A Performing Reviews (Continued)

| <b>Question</b>                     |   |
|-------------------------------------|---|
| <b>Livestock Losses (Continued)</b> |   |
| 12                                  | If the participant is applying for livestock feed losses resulting from the purchase of additional livestock feed, above normal quantities, did the participant provide original receipts or summary purchase receipts for forage or feed stuffs that was purchased by the participant for the time of the eligible adverse weather event or loss condition for the year <b>immediately preceding</b> the calendar year for which additional feed costs are being claimed? <b>Yes or No</b>               |
| 13                                  | If the participant is applying for livestock feed losses resulting from the purchase of additional livestock feed, above normal quantities, did the participant provide original receipts or summary purchase receipts for forage or feed stuffs that was purchased by the participant for the timeframe of the eligible adverse weather event or loss condition for the <b>calendar year</b> for which additional costs are being claimed to feed the participant’s eligible livestock? <b>Yes or No</b> |
| <b>Honeybee Losses</b>              |   |
| 14                                  | If the participant is applying for honeybee losses, did the participant have a risk in the honey production, pollination, or honeybee breeding operation for producing honey, pollinating, or breeding honeybees for commercial use as part of a farming operation on the beginning date of the eligible adverse weather event or loss condition? <b>Yes or No</b>  |
| 15                                  | If the participant is applying for honeybee colony and/or hive losses, did the participant provide acceptable proof of beginning and ending inventory of honeybee colonies and/or hives? <b>Yes or No</b>   |
| 16                                  | If the participant is applying for honeybee colony and/or hive losses, did the participant provide proof of good management practices as established by COC? <b>Yes or No</b>   |
| 17                                  | If the participant is applying for honeybee colony losses because of CCD, did the participant provide a third party certification of honeybee colony losses because of CCD? <b>Yes or No</b>  |

--\*

\*--357.6 ELAP Compliance Reviews (Continued)

A Performing Reviews (Continued)

| <b>Question</b>                    |  |
|------------------------------------|--|
| <b>Honeybee Losses (Continued)</b> |  |
| 18                                 | <p>If the participant is applying for honeybee colony losses because of CCD, did the third party who is providing CCD certification provide <b>all</b> of the following: <b>Yes or No</b></p> <ul style="list-style-type: none"> <li>• specific details about how the third party has knowledge of the honeybee colony loss</li> <li>• the affiliation of the third party to the participant</li> <li>• telephone number and address of the third party</li> <li>• the loss of honeybees was because of the existence of at least 3 of the 5 CCD symptoms</li> <li>• other details necessary for COC and DD to determine whether certification is acceptable?</li> </ul> |
| 19                                 | <p>If the participant is applying for honeybee feed losses, did the participant provide verifiable documentation of purchased feed intended as feed for honeybees that was lost or additional feed purchased above normal quantities to sustain honeybees for a short period of time until additional feed becomes available because of an eligible adverse weather event or loss condition? <b>Yes or No</b></p>  |
| <b>Farm-Raised Fish Losses</b>     |  |
| 20                                 | <p>If the participant is applying for farm-raised fish losses, was the participant a producer of an aquatic species that is propagated and reared in a controlled environment, that is being maintained for commercial use as part of the producer's farming operation? <b>Yes or No</b></p>   |
| 21                                 | <p>If the participant is applying for farm-raised fish feed losses, did the participant provide documentation of the date feed was purchased, type and quantity of feed purchased, and the cost of feed purchased? <b>Yes or No</b></p>  |
| 22                                 | <p>If the participant is applying for farm-raised fish death losses, did the participant suffer from the physical loss of game fish (stockers) or bait fish (not raised as food for food fish)? <b>Yes or No</b></p>   |
| 23                                 | <p>If the participant is applying for farm-raised fish death losses, did the participant provide acceptable documentation verifying the type and amount of game fish or sport fish that was lost? <b>Yes or No</b></p>   |

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**\*--357.7 LIP Compliance Reviews**

**A Performing Reviews**

County Offices shall conduct LIP compliance reviews for all producers selected for compliance review and spot check that participated in LIP. County Offices shall document the following questions during LIP reviews. Findings shall be loaded in the National Compliance Review Database.

|   | <b>Question</b>   |
|---|---|
| 1 | Was a valid signature obtained on FSA-914? <b>Yes or No</b>   |
| 2 | Did the participant timely file a notice of loss? <b>Yes or No</b>  |
| 3 | Did the participant provide verifiable and/or reliable documentation of livestock deaths claimed on FSA-914? <b>Yes, No, or N/A</b><br><br>If <b>no or N/A</b> , go to question 7.  |
| 4 | Did the sources of the documents verify all of the following: <b>Yes or No</b> <ul style="list-style-type: none"> <li>• documents were authentic</li> <li>• participant was a customer or party to the transaction</li> <li>• accuracy of the number and kind/type/weight range of animals listed?</li> </ul>   |
| 5 | Does the proof of death document support the number and kind/type/weight range of animals claimed on FSA-914? <b>Yes or No</b><br><br>If <b>no</b> , go to question 14.   |
| 6 | Was FSA-914 approved based on third party certification? <b>Yes or No</b>   |
| 7 | Did the participant provide FSA-926 certifying to all of the following: <b>Yes or No</b> <ul style="list-style-type: none"> <li>• no other form of proof of death is available</li> <li>• number of livestock, by category, in inventory when the deaths occurred</li> <li>• physical location of livestock by category, in inventory when the deaths occurred.</li> </ul>  |
| 8 | Did the participant provide verifiable documentation to support the reasonableness of the number of livestock inventory when the deaths occurred? <b>Yes or No</b>  |
| 9 | Did the third party who is providing certification provide FSA-926 that included all of the following: <b>Yes or No</b> <ul style="list-style-type: none"> <li>• specific details about how the third party has knowledge of the animal deaths</li> <li>• the affiliation of third party to the participant</li> <li>• telephone number and address of third party</li> <li>• number and kind/type/weight range of participants livestock that died because of the applicable adverse weather events</li> <li>• other details necessary for COC and DD to determine whether certification is acceptable?</li> </ul> |

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**\*--357.7 LIP Compliance Reviews (Continued)**

**A Performing Reviews (Continued)**

|    | <b>Question</b>  |
|----|--|
| 10 | Did the number and kind/type/weight range of animals certified as dead by the third party match the number and kind/type/weight range of animals certified by the participant on FSA-914? <b>Yes or No</b>   |
| 11 | Did the interview of the third party reveal that the individual is a reliable source who was in a position to have knowledge of the number and kind/type/weight range of dead livestock? <b>Yes or No</b>  |
| 12 | Was the death of claimed livestock the result of an eligible adverse weather event? <b>Yes or No</b>   |
| 13 | <b>For contract growers only</b> , is the amount of monetary compensation the contractor provided the participant for the loss of income from death of the claimed livestock different from the amount certified by the participant on FSA-914? <b>Yes, No, or N/A</b> |
| 14 | For discrepancies, did any discrepancy result in a refund of LIP benefits? <b>Yes or No</b><br><br>If <b>yes</b> , enter requested refund amount \$ _____  |

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**\*--357.8 LFP Compliance Reviews**

**A Performing Reviews**

County Offices shall conduct LFP compliance reviews for all producers selected for compliance review and spot check that participated in the program. County Offices shall document the following questions during LFP reviews. Findings shall be loaded in the National Compliance Review Database.

|   | <b>Question</b>  |
|---|--|
| 1 | Was a valid signature obtained on FSA-925? <b>Yes or No</b>  |
| 2 | Does participant’s current inventory of applicable livestock match the number and/or kind/type/weight range of livestock claimed on the LFP application? <b>Yes or No</b>  |
| 3 | Did the participant, during the 60 calendar days before the beginning of the qualifying drought or fire condition, own, lease, purchase, enter into a contract to purchase, or was a contract grower of the livestock claimed on the LFP application? <b>Yes or No</b> |
| 4 | Did all livestock entered on the LFP application meet all eligibility criteria including being maintained for commercial use as part of the participant’s farming operation? <b>Yes or No</b>  |
| 5 | Was the number and kind/type/weight range of claimed livestock on the LFP application accurate? <b>Yes, No, or N/A</b>   |
| 6 | Did all forage information entered on the LFP application meet all eligibility criteria? <b>Yes or No</b>  |
| 7 | Did the participant suffer an eligible grazing loss on rangeland managed by a Federal agency for which the Federal agency prohibited the producer from grazing the normal permitted livestock because of fire? <b>Yes, No, or N/A</b>                                  |
| 8 | Did the participant meet RMPR on all the grazing land, pasture land, or rangeland entered on the LFP application or been approved for a waiver to meet RMPR’s? <b>Yes or No</b>  |
| 9 | Did any discrepancy result in a refund of LFP benefits? <b>Yes or No</b><br><br>If <b>yes</b> , enter requested refund amount \$_____.   |

--\*

**\*--357.9 MILC Compliance Reviews**

**A Performing Reviews**

County Offices shall conduct MILC compliance reviews for producers selected for spot check and review under the national spot check selection process. The following questions shall be documented during MILC reviews. Findings shall be recorded in the National Compliance Review Database.

|   | <b>Question</b>   |
|---|---|
| 1 | Name of dairy operation spot checked. <b>Enter name.</b>  |
| 2 | Was a valid signature obtained on CCC-580? <b>Yes or No</b>   |
| 3 | Does the dairy operation meet the definition of an eligible dairy operation according to users State’s interpretation of a dairy operation under DMLA-III? <b>Yes or No</b>   |
| 4 | Did the MILC program participant meet all eligibility criteria? <b>Yes or No</b>  |
| 5 | Did all production claimed for MILC benefit meet all eligibility criteria including being commercially marketed? <b>Yes or No</b>   |
| 6 | <p>Did the dairy operation complete CCC-580M to make a change to the dairy operation? <b>Yes, No, or N/A</b></p> <p>If <b>yes</b>, select types of changes made:</p> <ul style="list-style-type: none"> <li>• entity name</li> <li>• entity type</li> <li>• producer/shareholder</li> <li>• reconstitution/merger</li> <li>• share percentage</li> <li>• start month</li> <li>• TIN</li> <li>• transfer.</li> </ul>   |
| 7 | Was verifiable production record received in the County Office for each eligible month before payment was issued to the dairy operation? <b>Yes or No</b>   |
| 8 | Does production evidence submitted for each applicable month support production entered and paid a MILC benefit? <b>Yes or No</b>   |
| 9 | <p>If participant submitted CCC-580 during the initial signup period, on or before January 21, 2009, did participant make their start month selection according to the applicable start month selection rules? <b>Yes, No, or N/A</b></p> <p>If <b>yes</b>, select the applicable start month rule used, from the following:</p> <ul style="list-style-type: none"> <li>• month that precedes the month CCC-580 was submitted</li> <li>• month in which CCC-580 was submitted</li> <li>• on or before the 14<sup>th</sup> of the month before the production start month selected for which the payment rate is unknown.</li> </ul> |

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\*--357.9 MILC Compliance Reviews (Continued)

A Performing Reviews (Continued)

|    | Question   |
|----|--|
| 10 | If participant submitted CCC-580 during the extended signup period, beginning January 22, 2009, did participant make their start month selection according to the applicable start month selection rules? <b>Yes, No, or N/A</b>   |
| 11 | If <b>yes</b> , select the applicable start month rule used, from the following: <ul style="list-style-type: none"> <li>• month in which CCC-580 was submitted</li> <li>• on or before the 14<sup>th</sup> of the month before the production start month selected for which the payment rate is unknown.</li> </ul> |
| 12 | Did participant complete CCC-580S, CCC-901, CCC-902E, or CCC-902I? <b>Yes or No</b><br><br>If <b>yes</b> , select which of the following was submitted: <ul style="list-style-type: none"> <li>• CCC-580S</li> <li>• CCC-901</li> <li>• CCC-902E</li> <li>• CCC-902I.</li> </ul>                                     |
| 13 | Was evidence provided to confirm that participant is eligible according to the foreign person provisions and rules? <b>Yes, No, or N/A</b>   |

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**\*--357.10 SURE Compliance Reviews**

**A Performing Reviews**

County Offices shall conduct SURE reviews for all participating producers selected during the National Compliance Review selection process. The following questions shall be documented during SURE reviews. Findings to these questions shall be recorded in the National Compliance Review Database.

|    | <b>Question</b>  |
|----|--|
| 1  | Were all acres on all farms nationwide reported on FSA-578? <b>Yes or No</b>   |
| 2  | Were ownership and shares verified? <b>Yes or No</b>   |
| 3  | Are RMA and FSA acres within tolerance? <b>Yes, No, or N/A</b>   |
| 4  | Was production marketed in the same manner it was shared on FSA-682? <b>Yes, No, or N/A</b>  |
| 5  | Does harvested production evidence support the quality reduction factor? <b>Yes, No, or N/A</b>  |
| 6  | Does the participant meet RMPR on all eligible crops? <b>Yes or No</b>   |
| 7  | If producer elected <i>de minimis</i> , do crops meet <i>de minimis</i> requirements? <b>Yes, No, or N/A</b>   |
| 8  | Does inventory evidence match producer's records for FMVA? <b>Yes, No, or N/A</b>  |
| 9  | Does inventory evidence match producer's records for FMVB? <b>Yes, No, or N/A</b>  |
| 10 | Does reported production match verifiable/reliable records? <b>Yes, No, or N/A</b>   |
| 11 | Was a valid signature obtained on FSA-682? <b>Yes or No</b>  |
| 12 | Were there any discrepancies for the participant that would result in a refund of SURE benefits? <b>Yes or No</b>  |
| 13 | <p>If <b>yes</b>, select all discrepancy types that apply:</p> <ul style="list-style-type: none"> <li>• not all crops/acres recorded on FSA-578</li> <li>• RMA acreage did not meet tolerance</li> <li>• production not marketed as shared</li> <li>• quality reduction not supported by production</li> <li>• RMPR not met on all eligible crops</li> <li>• <i>de minimis</i> election not supported</li> <li>• inventory does not support FMVA</li> <li>• inventory does not support FMVB</li> <li>• reported production does not match records</li> <li>• invalid signature.</li> </ul> <p>Enter amount of requested refund: \$_____.</p> |

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358 (Reserved)



**Section 3 National Compliance Review Database****359 General Information****A Purpose**

The National Compliance Review Database is used to collect data and generate reports from compliance review and spot check findings. At the County Office level, access to the database is restricted to data entry only. Reports will be generated at the National Office level. State Offices will be notified of reporting results and any necessary corrective action.

In addition to sharing compliance results with State Offices, PECD will also share reports with other FSA divisions. The reports will consist of an analysis that identifies any discrepancies, noncompliance trends, and common problems, including errors resulting in improper payments and steps taken to reduce them. This information will assist the agency in:

- identifying noncompliance trends
- directing limited resources to known problem areas
- improving the integrity of FSA programs.

**B Time of Data Entry**

Data shall be entered as soon as compliance reviews and spot checks have been completed. Data for all programs is not required to be entered at the same time. \* \* \*

**\*--360 Accessing the National Compliance Review Database**

**A Instructions for Accessing the National Compliance Review Database**

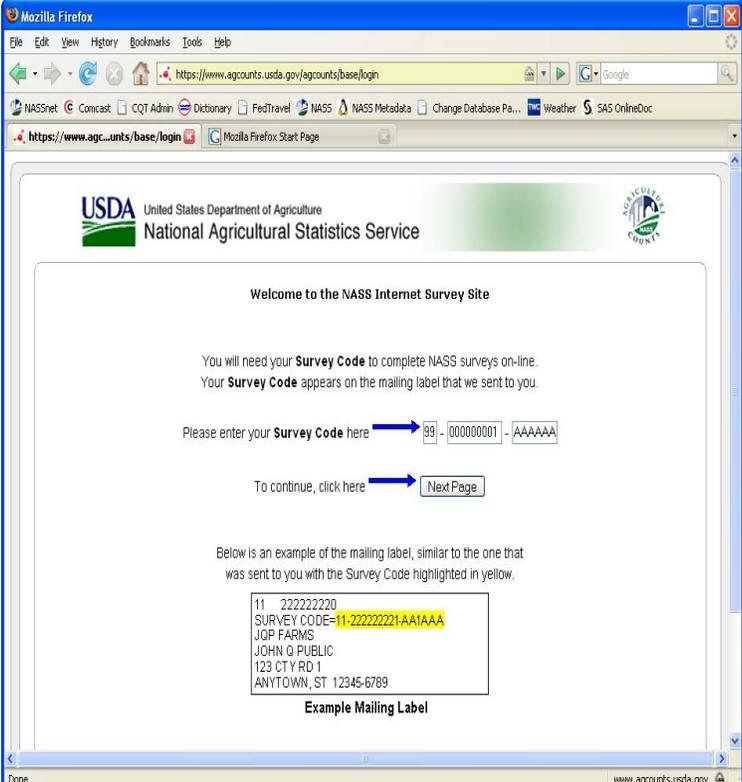
Access the National Compliance Review Database according to the following.

| Step | Action  |
|------|---|
| 1    | <p>Access the National Agricultural Statistics Service Survey Site at <b>http://www.agcounts.usda.gov</b>. The Web Based Data Collection Site Screen will be displayed. CLICK “Next Page”.</p>  <p>The screenshot shows a Mozilla Firefox browser window with the address bar set to <a href="http://www.agcounts.usda.gov/">http://www.agcounts.usda.gov/</a>. The page content includes the USDA logo, the text 'United States Department of Agriculture National Agricultural Statistics Service', and a 'Web Based Data Collection Site' header. A prominent warning message states: '*****WARNING***** This is a United States Department of Agriculture computer system, which may be accessed and used only for official Government business (or as otherwise permitted by regulation) by authorized personnel. Unauthorized access or use of this computer system may subject violators to criminal, civil, and/or administrative action. All information on this computer system may be intercepted, recorded, read, copied, and disclosed by and to authorized personnel for official purposes, including criminal investigations. Access or use of this computer system by any person, whether authorized or unauthorized, constitutes consent to these terms. *****WARNING*****'. Below the warning is a 'Next Page' button and a VeriSign Secured logo.</p> |

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360 Accessing the National Compliance Review Database (Continued)

A Instructions for Accessing the National Compliance Review Database (Continued)

| Step | Action  |
|------|---|
| 2    | <p>Each producer selected for spot check and review will have a unique survey code. The survey code for a producer must be entered to enter compliance review data. The survey codes for all producers selected for spot check and review will be added and displayed on the national producer selection list posted on the Intranet at <a href="http://dc.ffasintranet.usda.gov/farmbill/ccc/default.htm">http://dc.ffasintranet.usda.gov/farmbill/ccc/default.htm</a>.</p> <p>*--Producers who participate in FSA programs in multiple States and/or counties will have a different survey code for each State and/or county. County Offices shall ensure that the survey code is used for the applicable State/county when recording compliance review and spot check results.--*</p> <p>Survey codes for producers shall consist of 2 digit number-9 digit number-sequence of 6 characters consisting of both letters and numbers.</p> <p><b>Example:</b> 01-556677889-ABC123</p> <p>On the Welcome to the NASS Internet Survey Site Screen, enter the appropriate survey code for the selected producer. CLICK “Next Page”.</p> <p><b>Note:</b> If the survey code is entered incorrectly, then an error message will be displayed. Re-enter the survey code and CLICK “Next Page”.</p>  |

360 Accessing the National Compliance Review Database (Continued)

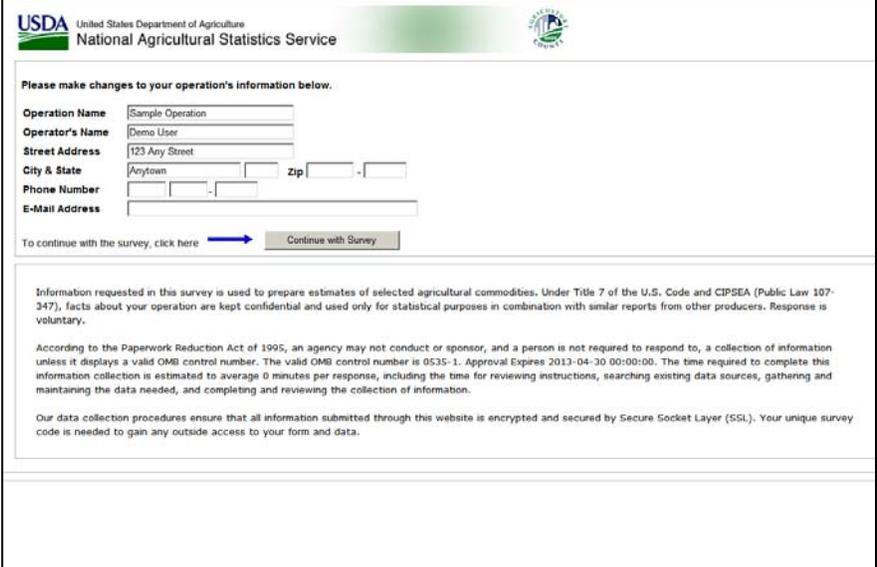
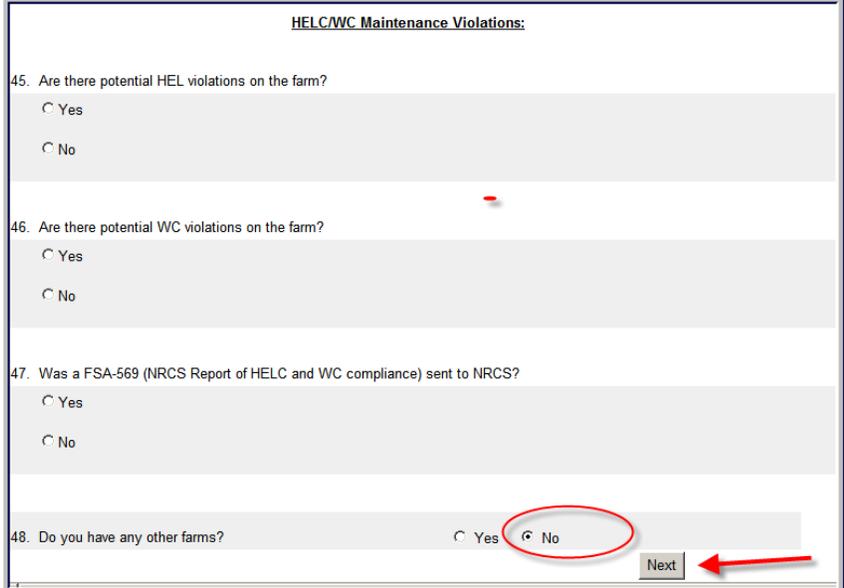
A Instructions for Accessing the National Compliance Review Database (Continued)

| Step  | Action  |  |                  |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
|---|---|--|------------------|--|--|-------------|---------------------------|--|--------|--|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|---|------------|---------------|------------------|--|------------|---------------|------------------|---|------------|---------------|------------------|
| 3   | <p>*--The Available Survey Screen will be displayed with surveys for all programs for the selected producer. County Offices shall CLICK "Click for Survey" of each program survey to view the desired survey.</p> <div data-bbox="342 470 1330 1423" style="border: 1px solid black; padding: 10px;">   <table border="1" data-bbox="391 625 1281 1423"> <thead> <tr> <th colspan="4">Available surveys for: DEMO USER / DEMO_USER</th> </tr> <tr> <th>Survey Name</th> <th colspan="2">Dates Survey is Available</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK ACRE</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK ACREAGE</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK APH</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK CRP</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK DCP</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK LDP</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK LFP</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK LIP</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK MAL</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK MILC</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> <tr> <td>2010 FSA COMPLIANCE REVIEW SPOT CHECK NAP GENERAL</td> <td>05/06/2010</td> <td>to 05/06/2011</td> <td>Click for Survey</td> </tr> </tbody> </table> </div> | Available surveys for: DEMO USER / DEMO_USER |                  |  |  | Survey Name | Dates Survey is Available |  | Status | 2010 FSA COMPLIANCE REVIEW SPOT CHECK ACRE | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK ACREAGE | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK APH | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK CRP | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK DCP | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK LDP | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK LFP | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK LIP | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK MAL | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK MILC | 05/06/2010 | to 05/06/2011 | Click for Survey | 2010 FSA COMPLIANCE REVIEW SPOT CHECK NAP GENERAL | 05/06/2010 | to 05/06/2011 | Click for Survey |
| Available surveys for: DEMO USER / DEMO_USER      |   |  |                  |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| Survey Name                                       | Dates Survey is Available   |  | Status           |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK ACRE        | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK ACREAGE     | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK APH         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK CRP         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK DCP         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK LDP         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK LFP         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK LIP         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK MAL         | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK MILC        | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |
| 2010 FSA COMPLIANCE REVIEW SPOT CHECK NAP GENERAL | 05/06/2010  | to 05/06/2011                                | Click for Survey |  |  |             |                           |  |        |  |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |   |            |               |                  |  |            |               |                  |   |            |               |                  |

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360 Accessing the National Compliance Review Database (Continued)

A Instructions for Accessing the National Compliance Review Database (Continued)

| Step | Action  |
|------|---|
| 4    | <p>*--The following screen will be displayed with the producer’s name and county. CLICK “Continue with Survey” to proceed to the survey questions for the selected survey.</p>   |
| 5    | <p>The selected survey will be displayed. County Office users shall answer the survey questions for the program based on the data collected from the compliance review and spot check.</p> <p>The final question for each program survey is whether the user has another entry for the applicable program. When a user has finished entering data for a specific survey, the user shall select “No” to the final survey question and CLICK “Next”.</p>  |

360 Accessing the National Compliance Review Database (Continued)

A Instructions for Accessing the National Compliance Review Database (Continued)

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| Step | Action   |
|------|--|
| 6    | <p>The following screen will be displayed notifying the user that the survey has been successfully completed and providing the user the option to select a new survey for the selected producer or to select another producer.</p> <p>County Office users shall CLICK:</p> <ul style="list-style-type: none"> <li>• “New Producer” to enter compliance review/spot check results for a different producer</li> <li>• “New Survey” to enter compliance review/spot check results for the same producer but for a different program survey.</li> </ul>  |

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361 Data Entry and Navigation Instructions for the National Compliance Review Database

**A Entering Data**

\*--County Offices may enter compliance review and spot check findings in the National Compliance Review Database throughout the year as reviews and spot checks are completed. All program surveys do not have to be completed at the same time.

If a user has to exit a survey before all data has been entered, CLICK **“Save and Return Later”** located at the top of each survey screen. This will save the data entered and provide County Office users the ability to re-access the survey at a later date and finish entering data.

The **“Not Applicable”** button is available in the upper left hand corner of each program survey. County Offices shall use the **“Not Applicable”** button to indicate that the selected producer did not participate in the program for the year.

**Example:** If a producer selected for spot check only filed FSA-578’s and participated in DCP, County Offices must document all questions for the FSA-578 survey and the DCP survey. Even though the producer did not participate in any other programs, County Offices shall still access each program survey and CLICK **“Not Applicable”**. This will indicate in the system that the producer did not participate in the program for the year.

In cases where DD’s concur that a selected producer was not farming or participating in any FSA programs for the year according to subparagraph 322 D, County Offices shall access each program survey and CLICK **“Not Applicable”** for each survey.

County Offices shall follow the steps in the following when using the **“Not Applicable”** button.

| Step | Action  | Result  |
|------|---|---|
| 1    | Access the applicable program survey.   | Screen will be displayed with all survey questions.   |
| 2    | CLICK <b>“Not Applicable”</b> in the upper left hand corner of each survey screen.  | Check (✓) will be displayed in the box.   |
| 3    | Scroll down to the last question of the survey and select <b>“No”</b> to the final question.  |   |
| 4    | CLICK <b>“Next”</b> .   | A screen will be displayed notifying the user the survey has been successfully completed.   |
| 5    | CLICK <b>“New Survey”</b> to access a new survey for the producer.<br><br>CLICK <b>“New Producer”</b> to enter compliance review and spot check results for a different producer. | Available Survey Screen will be displayed allowing user to select another program survey to enter compliance review results.<br><br>NASS Welcome Screen will be displayed allowing user the option to enter a survey code for a different producer. |

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**361 Data Entry and Navigation Instructions for the National Compliance Review Database  
(Continued)**

**B Navigating Through the Screens**

Use the mouse or tab key to move from question to question on a page. Use the scroll bar on the right side of the screen as necessary. CLICK “Next” to move to the next screen.

**C Exiting the Database**

The survey can be exited at any time, however, CLICK “Save & Return Later” to save the data entered on the current page. To return to a saved survey, go to **<http://www.agcounts.usda.gov>** and enter the survey code for the applicable producer when prompted. When returning to an individual’s survey, the data previously entered will be displayed. Enter additional data or make changes to the existing data.

**D Contact Information**

County Offices shall contact their State Office if they are experiencing problems or have questions on entering data into the National Compliance Database. State Offices can e-mail questions or concerns to Melonie Sullivan at **[melonie.sullivan@wdc.usda.gov](mailto:melonie.sullivan@wdc.usda.gov)**.

**361.5 (Withdrawn--Amend. 53)**

**362, 363 (Withdrawn--Amend. 53)**

**363.5 (Withdrawn--Amend. 53)**

**364 (Withdrawn--Amend. 25)**

**365, 366 (Withdrawn--Amend. 53)**

**367-374 (Reserved)**

## 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 (HELIC) and Wetland Conservation (WC) Certification (Includes Appendix) |                   | 20, 353, 357.5, 501 |
| AD-2007             | FSA/RMA Compliance Referral   |                   | 508                 |
| AD-2027             | RCO Spot Checklist Growing Season Inspection Form   |                   | 508                 |
| CCC-502             | Farm Operating Plan for Payment Eligibility Review  |                   | 357.5               |
| CCC-509             | Direct and Counter- Cyclical Program Contract   |                   | 351                 |
| CCC-509<br>ACRE     | Average Crop Revenue Election (ACRE) Program Irrevocable Election   |                   | 357                 |
| CCC-509<br>Appendix | Appendix to Form CCC-509, Direct and Counter- Cyclical Program Contract                                   |                   | 351                 |
| CCC-576             | Notice of Loss and Application for Payment Noninsured Crop Disaster Assistance Program                    | Ex. 7             | 23, 24, 24.5        |
| CCC-576-1           | Appraisal/Production Report Noninsured Crop Disaster Assistance Program                                   |                   | 332                 |
| CCC-579             | NAP Approved Yield Compliance Worksheet   |                   | 355                 |
| CCC-580             | Milk Income Loss Contract (MILC)  |                   | 357.9               |
| CCC-580M            | Milk Income Loss Contract (MILC) Modification   |                   | 357.9               |
| CCC-580S            | Milk Income Loss Contract (MILC) Supplemental   |                   | 357.9               |
| CCC-895             | Asparagus Revenue Market Loss Assistance Payment (ALAP) Program Application                               |                   | 357.5               |
| CCC-901             | Members Information 2009 and Subsequent Years   |                   | 357.9               |
| CCC-902E            | Farm Operating Plan for an Entity 2009 and Subsequent Program Years                                       |                   | 357.9               |
| CCC-902I            | Farm Operating Plan for an Individual 2009 and Subsequent Program Years                                   |                   | 357.9               |

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

## Forms (Continued)

| Number         | Title   | Display Reference | Reference                      |
|----------------|---|-------------------|--------------------------------|
| CRP-1          | Conservation Reserve Program Contract                         |                   | 16, 78, 308, 350, 497          |
| CRP-1 Appendix | Appendix to Form CRP-1, Conservation Reserve Program Contract |                   | 16                             |
| FSA-54         | County Office Work Measurement System                         |                   | 251                            |
| FSA-409        | Measurement Service Record                                    | 461, 464          | 15, 397, 459, 460, 462         |
| FSA-409A       | Measurement Service Request Register                          | 462               | 459                            |
| FSA-426        | MPCI/FCIC Information Request Worksheet                       | 509               | 510                            |
| FSA-441        | Order for Aerial Photography                                  |                   | 491                            |
| FSA-468        | Notice of Determined Acreage                                  | 376               | 15, 352, 375, 379, 380, 397    |
| FSA-569        | NRCS Report of HELC and WC Compliance for Spotcheck Purposes  |                   | 20, 353                        |
| FSA-577        | Report of Supervisory Check                                   | 332               |                                |
| FSA-578        | Report of Acreage   |                   | Text, Ex. 2, 10.5              |
| FSA-603        | Collection Register for State and County Offices              |                   | 459                            |
| FSA-658        | Record of Production and Yield                                |                   | 357                            |
| FSA-682        | Supplemental Revenue Assistance Payments Program Application  |                   | 357.10                         |
| FSA-914        | Livestock Indemnity Program Application                       |                   | 357.7                          |
| FSA-918        | Emergency Loss Assistance for Livestock Application           |                   | 357.6                          |
| FSA-925        | Livestock Forage Disaster Program Application                 |                   | 357.8                          |
| FSA-926        | Livestock Indemnity Program - Third Party Certification       |                   | 357.7                          |
| NRCS-CPA-026   | Highly Erodible Land and Wetland Conservation Determination   |                   | 495, 501, 502, 503, 505, 506.5 |

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

## Abbreviations Not Listed in 1-CM

The following abbreviations are not listed in 1-CM.

| <b>Approved Abbreviation</b> | <b>Term</b>  | <b>Reference</b>                    |
|------------------------------|--|-------------------------------------|
| ALAP                         | Asparagus Revenue Market Loss Assistance Payment Program | 321, 357.5                          |
| AV                           | administrative variance                                  | 378, 461                            |
| BWEP                         | Boll Weevil Eradication Program                          | 17                                  |
| CARS                         | Crop Acreage Reporting System                            | Part 2.5                            |
| CCD                          | colony collapsed disorder                                | 357.6                               |
| CCM                          | compressed county mosaic                                 | 437                                 |
| CVS                          | Compliance Validation System                             | 41, 308, 308.5                      |
| DGPS                         | Differential Global Positioning System                   | 421                                 |
| DMLA-III                     | Dairy Market Loss Assistance Program III                 | 357.9                               |
| DOQ                          | Digital Orthophotography                                 | 501, Ex. 2                          |
| FAA                          | Federal Aviation Administration                          | 421                                 |
| FGDC                         | Federal Geographic Data Committee                        | 505.5                               |
| FMVA                         | Field Market Value A                                     | 357.10                              |
| FMVB                         | Field Market Value B                                     | 357.10                              |
| FTP                          | file transfer protocol                                   | 501, 504, 505.5, Ex. 37             |
| FW                           | farmed wetland   | 353                                 |
| Gateway                      | Geospatial Data Gateway                                  | 505.5                               |
| GDW                          | Geospatial Data Warehouse                                | 505.5                               |
| GPS                          | global positioning system                                | 390, 394, 420, 421, 460, 463, Ex. 2 |
| ITS                          | Information Technology Services                          | 421                                 |
| LAM                          | Loss Adjustment Manual                                   | 355                                 |
| MDOQ                         | Mosaic Digital Orthophoto Quadrangle                     | 19, 498, 505.5                      |
| MT                           | Maintenance Tool   | 394, 463                            |
| NAIP                         | National Agricultural Imagery Program                    | 437, 444, 505.5, 506.6              |
| NHEL                         | non highly erodible land                                 | 494, 502                            |
| ODB                          | object data base   | 506.5                               |
| OFAV                         | other fruits and vegetables                              | 85, 141                             |

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

**Abbreviations Not Listed in 1-CM (Continued)**

| <b>Approved Abbreviation</b> | <b>Term</b>                            | <b>Reference</b>     |
|------------------------------|--|----------------------|
| PFC                          | Production Flexibility Contract        | 376                  |
| PLSS                         | Public Land Survey System              | 506.5                |
| PTPP                         | Planting Transferability Pilot Program | 351, 357             |
| RMPR                         | risk management purchase requirement   | 357.6, 357.8, 357.10 |
| SOR                          | State Office System of Records         | 322                  |
| SRA                          | Standard Reinsurance Agreement         | 508                  |
| “T” area                     | transitional area                      | 86                   |
| W                            | wetland                                | 353, 494, 495, 499   |
| WAAS                         | Wide Area Augmentation System          | 421                  |

**Delegations of Authority**

None