

For: State and County Offices

**Revised CCC-185, CCC-185-1 (Continuation),
and New CCC-185-D, Determination for FSFL Program**

Approved by: Acting Deputy Administrator, Farm Programs



1 Overview

A Background

CCC-185 (Exhibit 1) has been revised and is used by applicants to request FSFL's.

CCC-185-1 (Exhibit 2) has been revised and shall be used when additional space or information must be provided to support information provided on CCC-185.

CCC-185-D (Exhibit 3) is a **new** form and is used by STC's and COC's to determine eligibility and approve or disapprove the FSFL request.

B Purpose

This notice informs State and County Offices:

- that CCC-185, CCC-185-D, and CCC-185-1 (dated 1-11-16) are available online at:
 - <http://intra3.fsa.usda.gov/dam/ffasforms/forms.html>
 - <http://forms.sc.egov.usda.gov/eForms/welcomeAction.do?Home>
- about instructions for entering FSFL's in DLS for new eligible commodities.

Notes: All previous versions of CCC-185's and CCC-185-1's must be destroyed.

Disposal Date	Distribution
September 1, 2016	State Offices; State Offices relay to County Offices

Notice FSFL-126

1 Overview (Continued)

C Contact

If there are questions about this notice, contact one of the following as applicable.

IF the question relates to...	THEN contact...
FSFL policy	Toni Williams by either of the following: <ul style="list-style-type: none">• e-mail at toni.williams@wdc.usda.gov• telephone at 202-720-2270.
FSFL 1utomation (applications)	Brittany Ramsburg by either of the following: <ul style="list-style-type: none">• e-mail at brittany.ramsburg@wdc.usda.gov• telephone at 202-260-9303.
FSFL automation (payments)	Stacy Carroll by either of the following: <ul style="list-style-type: none">• e-mail at stacy.carroll@wdc.usda.gov• telephone at 202-690-8037.

2 Entering FSFL Request for New Eligible Commodities in DLS

A DLS Temporary Instructions for New Eligible Commodities

For entry of new eligible commodities, State and County Office employees **must**:

- complete loan entry actions according to 2-FSFL, Part 3
- enter loan information
- for facility information, select the applicable structure type from the drop-down menu on the “Facility” tab
- from the drop-down menu on the Farm Production Screen, select the applicable commodity
- enter existing capacity
- enter the proposed capacity
- submit the application package.

Notice FSFL-126

3 Action

A State Office Action

State Offices shall ensure that County Offices are aware of the contents of this notice.

B County Office Action

Effective immediately, County Offices shall:

- provide producers the revised CCC-185 and CCC-185-1, if necessary, dated 1-11-16, for requesting FSFL's
- dispose of all CCC-185's and CCC-185-1's with a previous date
- use CCC-185-D for STC and/or COC use.

Completing CCC-185, Loan Application for Farm Storage Facility Loan Program

A Instructions for Completing CCC-185

Complete CCC-185 according to the following instructions.

Item	Instructions
1A	Enter State code.
1B	Enter county code.
1C	Leave blank until a number is assigned by DLS. Enter DLS-assigned FSFL number that is formatted with FY and FSFL number; for example “2016/00002”.
2A	Enter the name and complete address including ZIP code for the loan applicant who will be applying for FSFL.
2B	Enter the last 4 digits of the producer or loan applicant’s TIN. If applying as an entity, use the entity’s ID number.
2C	Enter the loan applicant’s telephone number including area code.
3A	Enter the requested dollar amount.
3B	Check the box for the requested loan term of the loan. The requested loan term must be consistent with the eligible terms for the requested loan amount in Item 3A according to the following: <ul style="list-style-type: none"> • \$100,000 or less, 7-year loan term • \$100,000.01 to \$250,000, 7 or 10-year loan term • \$250,000.01 to \$500,000, 7, 10, or 12-year loan term.
3C	Check the applicable box for disbursement type requested.
4	Check the applicable commodity(s) type for the FSFL request.
5	Check facility and equipment needed for the storage based on the commodity(s) selected. If the FSFL is for drying and/or handling equipment only, do not complete Items 7 and 8.
6	Provide a detailed description of the facility or equipment type.
Storage Need Calculation - Complete Either Item 7 or 8	
7	Determined Yields Calculation of Storage Capacity Need (May be used for commodities with determined yields.) Answer whether the producer is self-certifying to the storage need.
7A	Enter the commodity(s) type.
7B	Enter the total amount of acres for the commodity type.
7C	Enter the yield per acre for the commodity type.
7D	Enter the sum of Item B and C to determine the total established production for the commodity type.
7E	Enter the existing storage capacity, if available that is now used for the commodity(s) listed in Item A.
7F	Enter the sum of Item D minus E to determine the additional storage capacity needed.

Completing CCC-185, Loan Application for Farm Storage Facility Loan Program (Continued)

A Instructions for Completing CCC-185 (Continued)

Item	Instructions
8	<p>Storage Capacity Need Determination (May be used for all eligible commodities.)</p> <p>Answer whether the producer is self-certifying to the storage need.</p>
8A	Enter the commodity(s) type.
8B	Enter the proposed capacity.
8C	Enter the existing storage capacity, if available, that is now used for the commodity(s) listed in Item A.
8D	Enter the sum of Item B minus C to determine the additional storage capacity needed.
9	Enter legal description of real estate for the site where the facility and/or equipment will be erected or installed.
10	Enter the complete name or names of the owner of the real estate, only if it is different than the producer or loan applicant who is applying for the loan.
11A	List the names of all lienholders on the real estate where the storage will be located.
11B	If there are no lienholders enter “None” and initial and date.
12	Applicant must thoroughly read the applicant’s certification and initial and date if information is provided in the other space.
13	Applicant certifies for DCIA compliance by checking (<input type="checkbox"/>) “Yes” or “No”. If “YES”, provide details in Item 14 “Additional Remarks.”
14	Enter additional remarks that will assist the CCC official with determining loan eligibility.
15A through 15C	The applicant shall sign and date.
16A through 18C	Co-applicant(s) shall sign and date.

Completing CCC-185, Loan Application for Farm Storage Facility Loan Program (Continued)

B Example of CCC-185

The following is an example of CCC-185.

This form is available electronically. (See Page 2 for Privacy Act and Paperwork Reduction Act Statements)

CCC-185 (01-11-16)		U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		FOR COUNTY USE ONLY		
LOAN APPLICATION FOR FARM STORAGE FACILITY LOAN PROGRAM				1. LOAN IDENTIFICATION NUMBER		
		A. State Code	B. County Code	C. Loan No.		
2A. Name and Address of Loan Applicant (Including ZIP Code)			2B. Tax Identification No. (last 4 digits)	2C. Telephone No. (Including Area Code)		
3A. Requested Loan Amount \$		3B. Requested Loan Term <input type="checkbox"/> 7 years <input type="checkbox"/> 10 years <input type="checkbox"/> 12 years		3C. Disbursement Type <input type="checkbox"/> Partial/Final <input type="checkbox"/> Final		
4. COMMODITY TYPE (Check one or more commodity types). Check all that apply: <ul style="list-style-type: none"> <input type="checkbox"/> Biomass <input type="checkbox"/> Dairy Products (Butter, Yogurt, Cheese) <input type="checkbox"/> Eggs <input type="checkbox"/> Floriculture <input type="checkbox"/> Grain <input type="checkbox"/> Hay <input type="checkbox"/> Honey <input type="checkbox"/> Hops <input type="checkbox"/> Maple Sap <input type="checkbox"/> Meats <input type="checkbox"/> Milk <input type="checkbox"/> Poultry <input type="checkbox"/> Rye <input type="checkbox"/> Other: _____ 			5. FACILITY OR EQUIPMENT TYPE (Check facility and equipment needed for the storage based on the commodity(s) selected. If the FSFL request is for drying and/or handling equipment only do not complete Items 7 and 8.) <ul style="list-style-type: none"> <input type="checkbox"/> Additions/Modifications to Existing Storage <input type="checkbox"/> Affixed Drying Equipment <input type="checkbox"/> Affixed Handling Equipment <input type="checkbox"/> Biomass Structure <input type="checkbox"/> Bulk Tank <input type="checkbox"/> Bunker/Silo (High Moisture Grain) <input type="checkbox"/> Bunker/Silo (Silage) <input type="checkbox"/> Cold Storage <input type="checkbox"/> Flat Storage <input type="checkbox"/> Freezer <input type="checkbox"/> Hay Storage <input type="checkbox"/> Storage Bin <input type="checkbox"/> Storage Crib <input type="checkbox"/> Upright Silo <input type="checkbox"/> Other: _____ 			
6. Description of Facility or Equipment Type						
STORAGE NEED CALCULATION – COMPLETE EITHER ITEM 7 OR 8						
7. Determined Yields Calculation of Storage Capacity Need (May be used for commodities with determined yields). Use CCC-185-1 for additional space, if necessary.					FOR COUNTY USE ONLY	
Are you self-certifying to the storage need? <input type="checkbox"/> YES <input type="checkbox"/> NO						
A. Commodity	B. Acres	C. Yield Per Acre	D. Total Established Production (Item B x Item C)	E. Existing Capacity, if available	F. Additional Capacity Needed (Item D minus Item E)	G. Total Determined Capacity (Sum of Item F x applicable years to store the commodity)
8. Storage Capacity Need Determination (May be used for all eligible commodities). Use CCC-185-1 for additional space, if necessary.					FOR COUNTY USE ONLY	
Are you self-certifying to the storage need? <input type="checkbox"/> YES <input type="checkbox"/> NO						
A. Commodity	B. Proposed Capacity	C. Existing Capacity, if available	D. Total Estimated Additional Capacity Needed (Item B minus Item C)	E. Total Determined Capacity (Sum of Item D x applicable years to store the commodity)		

Completing CCC-185, Loan Application for Farm Storage Facility Loan Program (Continued)

B Example of CCC-185 (Continued)

CCC-185 (01-11-16)		Page 2 of 2
9. Legal Description of Real Estate on which structure and/or equipment will be erected or installed. <i>(Attach additional documentation if needed.)</i>		
10. Name of Owner of Real Estate in Item 9 <i>(If Other than Applicant)</i>	11A. Lien Information <i>(Name of Person Having a Lien or Interest in the Real Estate)</i>	
	11B. If there are no lienholders enter "None" and initial and date. Initial: _____ Date: _____	
APPLICANT'S CERTIFICATION		
<i>The Applicant certifies that the statements made on this application are true, complete and correct to the best of the applicant's knowledge and belief, and made in good faith to obtain a loan. Section 1001 of Title 18, United States Code provides for criminal penalties to those who provide false statements on loan applications. Applicants are aware that credit reports will be requested on all applicants and co-applicants. By signing below, I acknowledge that FSFL requirements must be met before loan disbursement.</i>		
12. I certify that I am aware that, in accordance with the above certification: <ul style="list-style-type: none"> All-Peril Structural Insurance shall be in place prior to loan closing and through the loan period Multi-Peril Crop Insurance, NAP coverage, MPP, or LGM as applicable shall be purchased prior to loan closing and through the loan period Provide Additional Security, if required as a condition of approval Annually provide proof of real estate tax being paid on secured property and where loan collateral is located. Flood insurance, if applicable Annually allow FSA access to the farm for spot check purposes Cost of Appraisal, if required Shares Other: _____ <div style="text-align: right; margin-top: 10px;">_____ <i>(Initial and Date)</i></div>		
13. Are you or any co-applicant delinquent on any Federal non-tax debt? <i>(If "YES", provide details in the remarks)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO		
14. Additional Remarks		
15A. Signature of Applicant (By)	15B. Title/Relationship of the Individual if Signing in a Representative Capacity	15C. Date of Application (MM-DD-YYYY)
16A. Signature of Co-applicant (By)	16B. Title/Relationship of the Individual if Signing in a Representative Capacity	16C. Date of Application (MM-DD-YYYY)
17A. Signature of Co-applicant (By)	17B. Title/Relationship of the Individual if Signing in a Representative Capacity	17C. Date of Application (MM-DD-YYYY)
18A. Signature of Co-applicant (By)	18B. Title/Relationship of the Individual if Signing in a Representative Capacity	18C. Date of Application (MM-DD-YYYY)
<p>NOTE: <i>The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1436, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Farm Storage Facility Loan Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Farm Storage Facility Loan Program.</i></p> <p><i>This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of criminal and civil fraud, privacy and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.</i></p> <p><small>In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.</small></p> <p><small>Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.</small></p> <p><small>To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (800) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.</small></p>		

CCC-185-1, Loan Application for Farm Storage Facility Loan Program (CCC-185 Continuation Sheet)

The following is an example of CCC-185-1.

This form is available electronically.

<p>CCC-185-1 (01-11-16)</p> <p style="text-align: center;">U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation</p> <p style="text-align: center;">LOAN APPLICATION FOR FARM STORAGE FACILITY LOAN PROGRAM (CCC-185 CONTINUATION SHEET)</p>		<p>FOR COUNTY USE ONLY</p> <p>1. LOAN IDENTIFICATION NUMBER</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">A. State Code</td> <td style="width:33%;">B. County Code</td> <td style="width:33%;">C. Loan No.</td> </tr> <tr> <td style="height: 40px;"></td> <td></td> <td></td> </tr> </table>			A. State Code	B. County Code	C. Loan No.			
A. State Code	B. County Code	C. Loan No.								

STORAGE NEED CALCULATION

7. Determined Yields Calculation of Storage Capacity Need (May be used for commodities with determined yields). Use CCC-185-1 for additional space, if necessary.

Are you self-certifying to the storage need? <input type="checkbox"/> YES <input type="checkbox"/> NO						FOR COUNTY USE ONLY
A. Commodity	B. Acres	C. Yield Per Acre	D. Total Established Production (Item B x Item C)	E. Existing Capacity, if available	F. Additional Capacity Needed (Item D minus Item E)	G. Total Determined Capacity (Sum of Item F x applicable years to store the commodity)

8. Storage Capacity Need Determination (May be used for all eligible commodities). Use CCC-185-1 for additional space, if necessary.

Are you self-certifying to the storage need? <input type="checkbox"/> YES <input type="checkbox"/> NO				FOR COUNTY USE ONLY
A. Commodity	B. Proposed Capacity	C. Existing Capacity, if available	D. Total Estimated Additional Capacity Needed (Item B minus Item C)	E. Total Determined Capacity (Sum of Item D x applicable years to store the commodity)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a - as amended). The authority for requesting the information identified on this form is 7 CFR Part 1436, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine eligibility to participate in and receive benefits under the Farm Storage Facility Loan Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and non-governmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Farm Storage Facility Loan Program.

This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title I, Subtitle F, Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE**

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

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

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (800) 632-9992. Submit your completed form or letter to USDA by (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-0410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

Applicant's Initials: _____	Date Initialed: _____
Co-Applicant's Initials: _____	Date Initialed: _____
Co-Applicant's Initials: _____	Date Initialed: _____
Co-Applicant's Initials: _____	Date Initialed: _____

CCC-185-D, Determination for Farm Storage Facility Loan

A Instructions for Completing CCC-185-D

Complete CCC-185-D according to the following instructions.

Item	Instructions
1A	Enter State code.
1B	Enter county code.
1C	Enter DLS-assigned FSFL number that is formatted with FY and FSFL number; for example, “2016/00002”.
2	Enter applicant’s name as provided on CCC-185.
3	Check the applicable boxes for the loan conditions that must be met before loan closing.
4	Check the applicable boxes for the type of security required by COC and/or STC.
5	Provide remarks, if necessary.
6A	Based on review of loan documents, check the applicable “Approved” or “Disapproved” box.
6B	Enter the loan amount approved pending funding.
7	Check the box for the number of loan installments.
8A	Enter the final loan approval expiration date.
8B	When necessary, enter the 1st loan extension date. Note: The loan will be extended for an additional 6 months from this date.
8C	When necessary, enter the 2nd loan extension date. Note: The loan will be extended for an additional 6 months from this date.
9	Enter the date CCC mailed approval notification letter to applicant. Note: The letter must be mailed after the FSFL obligation is returned in DLS.
10A	Enter the name of COC and/or STC.
10B	Signature of COC and/or STC member.
10C	Signature date.
11A	Enter the final COC and/or STC determination by checking the applicable “Approved” or “Disapproved” box.
11B	Enter the final approved loan amount pending funding.
12A	Enter the name of COC and/or STC.
12B	Signature of COC and/or STC member.
12C	Signature date.

CCC-185-D, Determination for Farm Storage Facility Loan (Continued)

B Example of CCC-185-D

Following is an example of CCC-185 D.

<p>This form is available electronically.</p> <p>CCC-185-D U.S. DEPARTMENT OF AGRICULTURE (01-11-16) Commodity Credit Corporation</p>		<p>FOR COUNTY USE ONLY</p>	
<p>DETERMINATION FOR FARM STORAGE FACILITY LOAN PROGRAM</p>		<p>1. LOAN IDENTIFICATION NUMBER</p>	
		<p>A. State Code</p>	<p>B. County Code</p>
<p>2. Applicants Name</p>			
<p>PART A - CCC APPROVAL</p> <p><i>A loan is approved by CCC for the approximate amount shown in Item 6B below, but not to exceed the amount authorized in the program regulations. Such loan shall be repayable in the number of equal annual installments shown in Item 7. This approval shall become null and void 6 months after the date hereof unless the loan funds have been disbursed or this approval has been extended in writing by the State or County Committee. Loan funds will not be disbursed until structure has been constructed and/or installed, inspected and approved in accordance with program regulations.</i></p>			
<p>3. Approval is conditionally granted with the following conditions being met prior to closing:</p> <p><input type="checkbox"/> All-Peril Structural Insurance</p> <p><input type="checkbox"/> Multi-Peril Crop Insurance or NAP coverage</p> <p><input type="checkbox"/> Flood insurance, if applicable</p> <p><input type="checkbox"/> Marginal Protection Program for Dairy (MPP) or Livestock Gross Margin Dairy Cattle (LGM-Dairy) Insurance for Milk</p> <p><input type="checkbox"/> Additional Security Required – see Item 4 for description</p> <p><input type="checkbox"/> Severance agreement will be provided from: _____</p> <p><input type="checkbox"/> Other: _____</p>			
<p>4. Security Required: When loan approved, check type of security required by COC/STC:</p> <p><input type="checkbox"/> Structure and/or Equipment</p> <p><input type="checkbox"/> Real Estate (Identified Lien Position _____)</p> <p><input type="checkbox"/> Irrevocable Letter of Credit</p> <p><input type="checkbox"/> Other: _____</p>			
<p>5. Remarks</p>			
<p>6A. Original COC/STC Determination:</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Disapproved</p>	<p>6B. Original Loan Amount Approved By CCC Pending Funding</p> <p>\$ _____</p>	<p>7. Number of Loan Installments:</p> <p><input type="checkbox"/> 7 years <input type="checkbox"/> 10 years <input type="checkbox"/> 12 years</p>	
<p>8A. Final Loan Approval Expiration Date (MM-DD-YYYY)</p>	<p>8B. 1st Extension Date (MM-DD-YYYY)</p>	<p>8C. 2nd Extension Date (MM-DD-YYYY)</p>	<p>9. Date CCC Mailed Approval Notification Letter to Applicant (MM-DD-YYYY)</p>
<p>10A. Name of COC/STC</p>	<p>10B. Signature of COC/STC</p>	<p>10C. Date (MM-DD-YYYY)</p>	
<p>PART B – APPROVAL OF LOAN INCREASES</p>			
<p>11A. Final COC/STC Determination:</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Disapproved</p>		<p>11B. Final Approved Loan Amount Pending Funding</p> <p>\$ _____</p>	
<p>12A. Name of COC/STC</p>	<p>12B. Signature of COC/STC</p>	<p>12C. Date (MM-DD-YYYY)</p>	
<p><small>In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.</small></p> <p><small>Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.</small></p> <p><small>To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.</small></p>			