

For: State and County Offices

Disapproving Dairy Economic Loss Assistance Payment (DELAP) Phase 2 Program Benefits

Approved by: Deputy Administrator, Farm Programs



1 Ineligible DELAP Applicants

A Background

Dairy operations that did not participate in the Milk Income Loss Contract Program during FY 2009, were required to signup for DELAP program benefits during the secondary phase of the DELAP program. Notice LD-618, paragraph 5, provided State and County Offices with the signup period and benefit request procedure for dairy producers applying for DELAP program benefits during the secondary phase of the DELAP program. The secondary phase of DELAP signup began December 17, 2009, and ended on January 19, 2010.

The National Office:

- has been in contact with State and County Offices to confirm that all eligibility requirements have been met for benefit requests submitted by the signup end date
- will continue processing those requests for benefits that have met eligibility requirements and provide further instructions for payment processing for eligible applicants.

Note: Ineligible applicants that did not meet program eligibility requirements must be notified of their status.

B Purpose

This notice:

- provides State and County FSA Offices with procedure for notifying DELAP Phase 2 applicants determined to be ineligible for program benefits
- obsoletes Notice LD-619.

Disposal Date	Distribution
October 1, 2010	State Offices; State Offices relay to County Offices

Notice LD-620

1 Ineligible DELAP Applicants (Continued)

C DELAP Applicant Eligibility Status Report

The National Office will provide, by e-mail, an eligibility status report of secondary phase DELAP applicants to each applicable State Office specialist responsible for the DELAP program. All DELAP applicants determined to be ineligible, as provided by the eligibility status report, must be notified in writing of the denial of program benefits.

Disapproval letters must be provided to DELAP applicants determined to be ineligible within 30 business days of receiving the eligibility status report from the National Office. An example of a disapproval letter is provided in Exhibit 1. Since a denial of benefits is considered an adverse decision, appropriate appeal rights must be provided to the applicant according to 1-APP.

D DELAP Eligibility Documents Not Submitted

If all required DELAP eligibility documents are not received in the County Office from DELAP applicants by C.O.B. April 12, 2010, the DELAP applicant will be determined ineligible.

E Contact

For questions or situations not addressed in this notice, State Offices shall contact either of the following.

Name	Telephone	E-mail	Program Area
Toni Williams	202-720-2270	toni.williams@wdc.usda.gov	Policy and Procedure
Asime Atuboyedia	202-720-8223	asime.atuboyedia@wdc.usda.gov	Automation

Note: Direct questions about the appeal process to the Appeals and Litigation Staff at 202-690-3297.

2 Action

A State Office Action

SED's and STC's shall:

- ensure that County Offices immediately notify ineligible applicants according to the contents of this notice
- provide guidance to the County Office on the contents of this notice
- forward any DELAP program questions to the National Office according to subparagraph 1 E.

Notice LD-620

2 Action (Continued)

B County Office Action

County Offices shall:

- inform all ineligible DELAP Phase 2 applicants of their status by written notification
- forward questions about the contents of this notice through State Office Specialist.

Example of DELAP Disapproval Letter for Ineligible Applicants

The following letter is an example for illustration purposes **only** and is **not** intended to be an accurate description of program or eligibility provisions.

(Enter County Office name, address, and telephone number)

(Enter date of letter)

(Enter applicant's name and address)

Dear Mr. _____,

This letter is in response to your request for benefits under the Dairy Economic Loss Assistance Payment (DELAP) Program. You submitted your request during the prescribed application period. You subsequently furnished evidence and other documentation required to determine program eligibility.

Your request has been reviewed and determined ineligible for DELAP Phase 2 program benefits. Your request was disapproved because (enter explanation of all reasons for disapproval including citation of applicable 7 CFR 760 reference).

If you believe we have not properly reviewed your request for benefits, you may appeal this determination to the county committee by filing a written request no later than 30 days after you received this notice in accordance with the FSA appeal procedures found at 7 CFR Part 780. If you appeal to the county committee, you have the right to an informal hearing which you or your representative may attend either personally or by telephone. If you appeal this determination to the county committee, you may later appeal any adverse determination of the county committee to the FSA State committee or the National Appeals Division. To appeal, write to the county committee at the following address and explain why you believe this determination is erroneous.

(Enter FSA County Committee name and address)

If you do not timely file an appeal of this determination, this shall be the final administrative determination with respect to this matter in accordance with regulations at 7 CFR part 780.

Please contact this office at (xxx) xxx-xxxx or at the address shown above if you have any questions.

Sincerely,

County Executive Director