OMB Approved No: 0503-0028
OMB Expiration Date: 10/31/2027

FSA-970
(09-15-25)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

EMERGENCY LIVESTOCK RELIEF PROGRAM (ELRP) 2023 & 2024 FLOOD & WILDFIRE (FW) APPLICATION

FOR COUNTY OFFICE USE ONLY	
1. Recording State *Name* / *Code*	2. Recording County *Name* / *Code*
3. Program Year	4. Application Number
5A. Recording County FSA Office Name and Address	
5B. Recording County FSA Office Telephone Number	

INSTRUCTIONS: Return this completed form to your Recording County FSA Office.

PART A – PRODUCER INFORMATION

6. Producer's Name *(Person or Legal Entity)*			7. Information Line
8A. Address Line 1			9A. Primary Phone Number ☐ Home ☐ Cell
8B. Address Line 2			9B. Alternate Phone Number ☐ Home ☐ Cell
8C. City	8D. State	8E. Zip	10. Email Address

PART B – PRODUCER AGREEMENT

The Farm Service Agency (FSA) will provide assistance under ELRP 2023 & 2024 FW to eligible livestock producers that have suffered increased supplemental feed costs due to a qualifying flood or qualifying wildfire in calendar year 2023 or 2024, meeting all program eligibility requirements, and subject to the availability of funds. The following information is required in order for FSA to determine that the livestock producer is eligible to receive ELRP 2023 & 2024 FW assistance. By submitting this application, the livestock producer agrees:

To comply with the regulatory requirements in 7 CFR part 760, Subpart U. A copy of these regulations may be found at: https://www.fsa.usda.gov/resources/programs/emergency-livestock-relief-program-elrp;

To provide FSA the following supporting documentation:

- Proof of livestock inventories by kind, type, and weight as of the beginning date of the qualifying disaster event;
- Documentation that an eligible qualifying flood or qualifying wildfire, as defined, occurred in the physical location of the producer's livestock in calendar year 2023 or 2024, if applicable;
- Any additional information FSA requests to determine eligibility that verifies and supports all information provided on this application, including the producer's certification, and the producer understands the application may be disapproved if they fail to provide any such information requested by FSA;

To comply with payment attribution and payment eligibility provisions by ensuring the following forms are submitted prior to payment and within one year of the announced application deadline, if not already on file with FSA:

- CCC-902, Farm Operating Plan for Payment Eligibility
- CCC-901, Member Information for Legal Entities (if applicable)
- AD-1026, Highly Erodible Land Conservation (HELC) and Wetland Conservation (WC) Certification (for the producer and affiliated persons)
- FSA-510, Request for an Exception to the $125,000 Payment Limitation for Certain Programs (optional; for the producer and members of legal entities, if applicable).

DATE STAMP

The application will not be considered complete until all items required, including Parts C, D, E and F have been completed. Failure to timely submit all required information and supporting documentation may result in no payment or a reduced payment.

A list of counties that have been determined by the Deputy Administrator for Farm Programs (DAFP) as having a qualifying flood or qualifying wildfire in calendar year 2023 or 2024 is available through local FSA service centers and at https://www.fsa.usda.gov/resources/programs/emergency-livestock-relief-program-elrp.

PART C – DISASTER EVENT

11. Disaster Event Number	12. Physical State and County	13. Disaster Event Type (Flood or Wildfire)	14. Beginning Date of Disaster Event (MM/DD/YYYY)	15. Qualifying Disaster Event Eligibility
				☐ County – DAFP Approved ☐ Individual – Supporting Documentation Required
				☐ County – DAFP Approved ☐ Individual – Supporting Documentation Required
				☐ County – DAFP Approved ☐ Individual – Supporting Documentation Required

PART D – LIVESTOCK INFORMATION

16. Disaster Event Number	17. Livestock Kind/Type/Weight	18. Number of Livestock in Inventory on the Beginning Date of Disaster Event	19. Share %	COC USE ONLY	
				20. COC Adjusted Number of Livestock in Inventory	21. COC Determination
					☐ Approved ☐ Disapproved
					☐ Approved ☐ Disapproved
					☐ Approved ☐ Disapproved

PART E – PRODUCER ELIGIBILITY

Item	Yes	No
22. The livestock reported in Part D were physically located, or would have normally been located in absence of the qualifying disaster event, in the associated county listed in Item 12 on the beginning date of the qualifying disaster event in Item 14.	☐	☐
23. I owned, leased, entered into a contract to purchase, or was an eligible contract grower of the livestock reported in Part D, and I physically maintained control of all such livestock on the beginning date of the qualifying disaster event in Item 14.	☐	☐
24. The livestock reported in Part D meet all eligibility criteria in 7 CFR part 760, Subpart U, including being produced and maintained for commercial use as part of my livestock operation.	☐	☐
25. I submitted the required supporting documentation to verify my eligible livestock inventories reported in Part D as of the beginning date of the qualifying disaster event in Item 14.	☐	☐
26. If applying as an individual, I am a citizen of the United States or a resident alien; if applying as a partnership, the members of the partnership are citizens of the United States; or if applying as a corporation, limited liability corporation, or other farm organizational structure, the entity is organized under State law, and is comprised solely of U.S. citizens or legal resident aliens. If applying as an Indian tribe or tribal organization, the tribe meets the definition according to the terms as defined in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304).	☐	☐

27. Associated Producers:

PART F – PRODUCER CERTIFICATION

I hereby sign and certify under penalty of perjury in accordance with 28 U.S.C. 1746 and 18 U.S.C. 1621 that all information on this application, whether entered by me or by someone else on my behalf, is true and correct. I understand that if any information is determined to be in error, the application may be denied, and such errors may result in a determination of ineligibility in whole or in part.

28A. Producer's Signature	28B. Title/Relationship of Representative	28C. Date *(MM/DD/YYYY)*

PART G – COC OR DESIGNEE SIGNATURE

29A. COC or Designee Signature	29B. Date *(MM/DD/YYYY)*

Privacy Act Statement: *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 American Relief Act, 2025 (Pub. L. 118-158). The information will be used to determine eligibility for program benefits. 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-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility for program benefits.*

Public Burden Statement (Paperwork Reduction Act): *According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0503-0028. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden by emailing to: askusda@usda.gov (Subject: OMB NO. 0503-0028).*

Non-Discrimination Statement: *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, 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 State or local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). 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 https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint 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, Mail Stop 9410, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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