



# 4

## Easy Steps to Get Started With FSA

### Jump-Start Your Farming or Ranching Operation With FSA

**Do you farm or ranch and want to grow your operation or make improvements?**

*The Farm Service Agency offers financial assistance to help farmers start a farm, expand their operation, improve natural resources or recover from natural disasters. Get started today to see how FSA can help you.*



Contact your local Farm Service Agency County Office to schedule an appointment. You can find your local county office online at <http://offices.usda.gov>.

During your first visit, be sure to bring:

- Proof of identity (driver's license, social security card, IRS EIN number)
- Proof of Ownership (copy of recorded deed)
- Leases
- Entity Identification Status (articles of incorporation, trust & estate documents, partnership agreement)

We will sit down with you one-on-one, review your documents and register your farm with FSA. Registering your farm allows you to apply for FSA programs. We then discuss what programs and loans are best to help you accomplish your goals. As a registered farm, you also will receive monthly newsletters, have access to various resources and be eligible to vote in FSA County Committee Elections.

After we determine your eligibility to participate in FSA programs and loans, we walk you through the application process. More information may be needed depending on the program.

# First Visit? What to Bring

## Documents to Get Started



## Information Required for Farm Number

Producers can establish a farm with Farm Service Agency (FSA) if they plan to apply for a program administered by FSA or another USDA agency that requires a farm number. To establish a farm, the following documentation can be provided to your local FSA office:

1. FSA form AD-2047 to collect personal information including address, Social Security Number, phone number(s), fax number(s), email address, etc., for **each member** of the farming operation,.

If the farming interest is through an entity, the same information must be provided for the entity.

2. Copy of the deed or other legal document that transferred ownership of the property to you with all required signatures and stamps to show it has been notarized and recorded. Ownership information must be provided for all the agricultural land in which there is an interest (i.e. owner, operator, tenant, etc.), not only the farm that will be enrolled in an FSA or other USDA agency program.

If you lease a farm, a deed must be provided to FSA to establish the farm, in addition to a copy of the lease(s) to verify the current operator or tenant on the farm.

3. If the property is owned and/or operated through an entity (i.e. corporation, LLC, partnership, etc.), copies of the official documents must be provided for the entity. This is required by federal regulation as verification for: (1) the representative authorized to sign for the entity, and (2) the entity exists and is recognized by the Colorado Secretary of State, if applicable.

4. A map is not required to be submitted, but may assist FSA staff in locating property. Assessor account numbers, parcel IDs, and/or legal descriptions will also help us locate the property.

Additional information may be requested, as required by FSA handbook 10-CM.

Once the farm has been established, it will be assigned a farm number. The farm number is used by other USDA agencies for the program applications (i.e. NRCS uses farm numbers for EQIP applications, etc.). Producers will also be included on FSA's mailing list and will receive monthly newsletters and other general mailings pertaining to USDA programs.

## Information Required for Land Changes

If information for an existing farm number needs to be updated, such as the owner(s), operator, or the addition or removal of land, the below information can be provided to FSA to request the record change:

- Copy of Recorded Deed or Lease
- Copy of Field Notes and Survey
- Copy of the Plat Map

## Short List

1. AD-2047
2. Copy of Deed
3. Lease Agreement, if applicable.
4. Copies of official documents for entity, if applicable.
5. Maps are not required, but may assist FSA staff in locating property.

If you have additional questions on what documents may be needed to get started, contact your local FSA office.

Find your local Service Center at [farmers.gov](https://farmers.gov)

FSA has additional flexibilities for operators of heirs' property in obtaining a farm number or being declared operator of a farm.

Visit [farmers.gov/heirs](https://farmers.gov/heirs) for more information.

## Establishing Producer Record

To create a producer record with FSA, the information for the applicable producer type must be submitted to your local FSA office. Additional information may be requested for determining payment eligibility to participate in FSA or other USDA programs.

## Individuals

- AD-2047
- Social Security Number
- Voided Check (if participating in FSA programs)

## Estates

- Copy of Death Certificate
- Copy of Employer Identification Number (EIN) assigned to the Estate by the IRS
- Copy of Order to Probate, if the Estate will be probated
- Copy of Will or Copy of Affidavit of Heirship
- Original Letter of Testamentary or Letter of Administration
- FSA-325: Application for Payment for Person's who have died

## Trusts

- Copy of Certificate of Trust
- Copy of Trust Agreement, if trust is irrevocable
- Copy of SS-4 letter from the IRS assigning the EIN if applicable; for revocable trusts, SSN or EIN may be used; for irrevocable trusts EIN issued must be assigned from IRS

## Corporations\*

- Copy of Articles of Incorporation
- Copy of Bylaws
- Copy of Certification of Incorporation
- Copy of Organizational Meeting Minutes
- Copy of SS-4 letter from the IRS assigning the EIN for the corporation

## Limited Liability Company (LLC)\*

- Copy of Certificate of Organization
- Copy of Limited Liability Company Regulation
- Copy of Operating Agreement
- Copy of Organizational Meeting Minutes
- Copy of SS-4 letter from the IRS assigning the EIN for the LLC

## Limited Partnership (LTD) or (LP)\*

- Copy of Certificate of Limited Partnership
- Copy of Limited Partnership Agreement
- Copy of SS-4 letter from the IRS assigning the EIN for the LTD or LP

## General Partnership (GP)\*

- Copy of Certificate of General Partnership
- Copy of General Partnership Agreement
- Copy of SS-4 letter from the IRS assigning the EIN for the GP

**\*Note:** If the Corp/LTD/LP/LLC is made up of all individuals, the information for new individuals will be required as identified above.

If the LTD/LP is made up of a corporation or LLC, the information required for that entity type will be required as identified on the page.\*

**AD-2047**  
 (01-08-24)

**U.S. DEPARTMENT OF AGRICULTURE**  
 Farm Service Agency  
 Rural Development  
 Natural Resources Conservation Service  
 Risk Management Agency  
 Agricultural Marketing Service

**CUSTOMER DATA WORKSHEET**

**NOTE:** 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 the Computer Security Act of 1987 (Pub. L. 100-235), OMB Circular A-123, Federal Managers' Financial Integrity Act of 1982, and Privacy Act of 1974 (5 USC 552a - as amended). The information will be used to document a request by the producer for updating the business partner record. 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 Notices for AMS-3, Perishable Agricultural Commodities Act (PACA), USDA/FSA-2, Farm Records File (Automated), USDA/NRCS-1, Landowner, Operator, Producer, Cooperator, or Participant Files, and USDA/RD-1, Applicant, Borrower, Grantee, or Tenant File. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to request changes within the business partner record.

**Public Burden Statement (Paperwork Reduction Act Statement):** 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 0560-0265. The time required to complete this information collection is estimated to average 3 minutes (.05 hours) 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.

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.**

**PART A CUSTOMER INFORMATION**

1. Reason for Request (Check appropriate box(es) below:)

- New Customer       Update Existing Customer Record

2A. Customer's Full Name or Business Name and Address  
 (Including Zip Code)

2B. Customer Business Type (Example: Individual, Corporation, LLC, Estate, Trust, etc.)

2C. Home Telephone Number (Area Code)

2D. Business Telephone Number (Area Code)

2E. Mobile Telephone Number (Area Code)

2F. Email Address

2G. Does the customer want to receive sensitive (but non-PII) Producer or farm specific related emails?  
 YES       NO

3A. Taxpayer Identification Number (Complete TIN for new customer or last 4 digits for existing customer) and Type (SSN, EIN, ITN, etc)

3B. Birthdate (Only required if the customer is a minor)

3C. Citizenship Status: (For Individuals Only)

- U.S. Resident       Resident Alien (I-551 Required)  
 Not a US Citizen or Resident Alien  
 Citizenship country if not US:

3D. Originating Country (For Foreign Entities Only)

**Demographic Information**

Departmental Regulation 4370-001 provides USDA's policies for collecting demographic data, including race, ethnicity and gender. Providing demographic information is voluntary and at the discretion of the customer. Demographic information is used by USDA for statistical purposes only and will not be used to determine an applicant's eligibility for programs or services for which they apply. You may disregard providing information in items 4A, 4B or 4C if the information has previously been provided to USDA. A customer identified in Item 2A that is a legal entity must base responses to the race, ethnicity and gender on the individual persons holding at least 50 percent ownership interest in the legal entity.

4A. Race: (Note: More than 1 may be selected)

- American Indian / Alaskan Native  
 Native Hawaiian/Other Pacific Islander  
 Asian  
 White  
 Black/African American  
 I do not want to provide Race information at this time.

**Note:** See instructions for legal entities

4B. Ethnicity:

- Hispanic or Latino  
 Not Hispanic or Latino  
 I do not want to provide Ethnicity information at this time.

**Note:** See instructions for legal entities

4C. Gender (Individual):

- Male  
 Female  
 Non-Binary  
 I do not want to provide Gender information at this time.

4D. Gender (Legal Entity)

- Not applicable/unknown  
 Organization/Female Owned  
 Organization/Male Owned  
 Organization/Non-Binary  
 I do not want to provide Gender information at this time.

Date Stamp

5. Customer has interest in one or more of the following agencies. (Check Appropriate Agency(ies) below:)		
<input type="checkbox"/> AMS <input type="checkbox"/> FSA <input type="checkbox"/> NRCS <input type="checkbox"/> RMA <input type="checkbox"/> RD		
6. Is the Customer a Multi-County Producer? <input type="checkbox"/> YES (If "YES," list States and/or Counties below:) <input type="checkbox"/> NO		
7. See form instructions for signature requirements.		
7A. Customer Signature	7B. Title/Relationship	7C. Date (MM-DD-YYYY)
<b>PART B SERVICE CENTER ACTION</b>		
8A. Agency Who Received Request: (Check one below)	8B. Initials of Employee Receiving Request (If Different than Item 12A)	8C. Date Service Center Employee Received the Request (MM-DD-YYYY)
<input type="checkbox"/> FSA <input type="checkbox"/> NRCS <input type="checkbox"/> RD		
9. How the Request for Change was Received:		
<input type="checkbox"/> Office Visit <input type="checkbox"/> Telephone <input type="checkbox"/> FAX <input type="checkbox"/> USPS <input type="checkbox"/> Box <input type="checkbox"/> One Span <input type="checkbox"/> Other (Specify):		
10. COC LAA:		
11. Remarks, if Applicable:		
12A. Signature of Employee Updating Business Partner if not initialed in Item 8B.	12B. Date Service Center Employee Updating Business Partner (MM-DD-YYYY)	

*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](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](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.*

**AD-1026**  
(10-30-14)

**U.S. DEPARTMENT OF AGRICULTURE**  
FarmServiceAgency

**HIGHLY ERODIBLE LAND CONSERVATION (HEL) AND  
WETLAND CONSERVATION (WC) CERTIFICATION**

**Read attached AD-1026 Appendix before completing form.**

**PART A – BASIC INFORMATION**

1. Name of Producer	2. Tax Identification Number (Last 4 digits)	3. Crop Year
4. Names of affiliated persons with farming interests . Enter "None," if applicable.		
<i>Affiliated persons with farming interests must also file an AD-1026. See Item 7 in the Appendix for a definition of an affiliated person.</i>		
5. Check one of these boxes if the statement applies ; otherwise continue to Part B.		
A. <input type="checkbox"/> The producer in Part A does not have interest in land devoted to agriculture. Examples include bee keepers who place their hives on another person's land, producers of crops grown in greenhouses, and producers of aquaculture AND these producers do not own/lease any agricultural land themselves. <b>Note:</b> Do not check this box if the producer shares in a crop.		
B. <input type="checkbox"/> The producer in Part A meets all three of the following: <ul style="list-style-type: none"> <li>• does not participate in any USDA program that is subject to HELC and WC compliance except Federal Crop Insurance.</li> <li>• only has interest in land devoted to agriculture which is exclusively used for perennial crops, except sugarcane, and</li> <li>• has not converted a wetland after February 7, 2014.</li> </ul> Perennial crops include, but are not limited to, tree fruit, tree nuts, grapes, olives , native pasture and perennial forage. A producer that produces alfalfa should contact the Natural Resources Conservation Service at the nearest USDA Service Center to determine whether such production qualifies as production of a perennial crop.		
<b>Note:</b> If either box is checked, and the producer in Part A does not participate in Farm Service Agency (FSA) or Natural Resources Conservation Service (NRCS) programs, the full tax identification number of the producer must be provided, but establishment of detailed farm records with FSA is not required. Go to Part D and sign and date.		

**PART B - HELC/WC COMPLIANCE QUESTIONS**

Indicate YES or NO to each question. <i>If you are unsure of whether a HEL determination, wetland determination, or NRCS evaluation has been completed, contact your local USDA Service Center.</i>	YES	NO
6. During the crop year entered in Part A or the term of a requested USDA loan, did or will the producer in Part A plant or produce an agricultural commodity (including sugarcane) on land for which an HEL determination has not been made?		
7. Has anyone performed (since December 23, 1985), or will anyone perform any activities to:		
A. Create new drainage systems, conduct land leveling, filling, dredging, land clearing, or excavation that has <b>NOT</b> been evaluated by NRCS? <b>If "YES", indicate the year(s):</b> _____		
B. Improve or modify an existing drainage system that has <b>NOT</b> been evaluated by NRCS? <b>If "YES", indicate the year(s):</b> _____		
C. Maintain an existing drainage system that has <b>NOT</b> been evaluated by NRCS? <b>If "YES", indicate the year(s):</b> _____ <b>Note:</b> Maintenance is the repair, rehabilitation, or replacement of the capacity of existing drainage systems to allow for the continued use of wetlands currently in agricultural production and the continued management of other areas as they were used before December 23, 1985. This allows a person to reconstruct or maintain the capacity of the original system or install a replacement system that is more durable or will realize lower maintenance or costs.		
<b>Note:</b> If "YES" is checked for Item 7A or 7B, then Part C must be completed to authorize NRCS to make an HELC/WC and/or certified wetland determination on the identified land. If "YES" is checked for Item 7C, NRCS does not have to conduct a certified wetland determination.		
8. Check one or both boxes, if applicable; otherwise, continue to Part C or D.		
A. <input type="checkbox"/> Check this box only if the producer in Part A has FCIC reinsured crop insurance and filing this form represents the <u>first time</u> the producer in Part A, including any affiliated person, has been subject to HELC and WC provisions.		
B. <input type="checkbox"/> Check this box if either of the following applies to the producer and crop year entered in Part A: <ul style="list-style-type: none"> <li>• Is a tenant on a farm that is/will not be in compliance with HELC and WC provisions because the landlord refuses to allow compliance, but all other farms not associated with that landlord are in compliance. (AD-1026B, Tenant Exemption Request, must be completed).</li> <li>• Is a landlord of a farm that is/will not be in compliance with HELC and WC provisions because of a violation by the tenant on that farm, but all other farms not associated with that tenant are in compliance. (AD-1026C, Landlord or Landowner Exemption Request, must be completed).</li> </ul>		

**PART C – ADDITIONAL INFORMATION**

9. If "YES" was checked in Item 6 or 7, provide the following information for the land to which the answer applies:

A. Farm and/or tract/field number: \_\_\_\_\_  
If unknown, contact the Farm Service Agency at the nearest USDA Service Center.

B. Activity: \_\_\_\_\_

C. Current land use (specify crops): \_\_\_\_\_

D. County: \_\_\_\_\_

**PART D – CERTIFICATION OF COMPLIANCE**

I have received and read the AD-1026 Appendix and understand and agree to the terms and conditions therein on all land in which I (or the producer in Part A if different) and any affiliated person have or will have an interest. I understand that eligibility for certain USDA program benefits is contingent upon this certification of compliance with HELC and WC provisions and I am responsible for any non-compliance. I understand and agree that this certification of compliance is considered continuous and will remain in effect unless revoked or a violation is determined. I further understand and agree that:

- all applicable payments must be refunded if a determination of ineligibility is made for a violation of HELC or WC provisions.
- NRCS may verify whether a HELC violation or WC has occurred.
- a revised Form AD-1026 must be filed if there are any operation changes or activities that may affect compliance with the HELC and WC provisions. I understand that failure to revise Form AD-1026 for such changes may result in ineligibility for certain USDA program benefits or other consequences.
- affiliated persons are also subject to compliance with HELC and WC provisions and their failure to comply or file Form AD-1026 will result in loss of eligibility for applicable benefits to any individuals or entities with whom they are considered affiliated.

**Producer's Certification:**

*I hereby certify that the information on this form is true and correct to the best of my knowledge.*

10A. Producer's Signature (By)	10B. Title/Relationship (If Signing in Representative Capacity)	10C. Date (MM-DD-YYYY)
<b>FOR FSA USE ONLY</b> (for referral to NRCS) Sign and date if NRCS determination is needed.	11A. Signature of FSA Representative	11B. Date (MM-DD-YYYY)

**IMPORTANT:** If you are unsure about the applicability of HELC and WC provisions to your land, contact your local USDA Service Center for details concerning the location of any highly erodible land or wetland and any restrictions applying to your land according to NRCS determinations before planting an agricultural commodity or performing any drainage or manipulation. Failure to certify and properly revise your compliance certification when applicable may: (1) affect your eligibility for USDA program benefits, including whether you qualify for reinstatement of benefits through the Good Faith process; and (2) result in other consequences.

**NOTE:** 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 12, the Food Security Act of 1985 (Pub. L. 99-198), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to certify compliance with HELC and WC provisions and to determine producer eligibility to participate in and receive benefits under programs administered by USDA agencies. 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) and USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of producer ineligibility to participate in and receive benefits under programs administered by USDA agencies.

This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title II, Subtitle G, Funding and Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM AD-1026 TO YOUR COUNTY FARM SERVICE AGENCY (FSA) OFFICE.**

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited basis will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider and employer.

**APPENDIX TO FORM AD-1026  
HIGHLY ERODIBLE LAND CONSERVATION (HELIC) AND  
WETLAND CONSERVATION (WC) CERTIFICATION**

## 1. Overview

The following conditions of eligibility are required for a producer to receive any U.S. Department of Agriculture (USDA) loans or other program benefits that are subject to the highly erodible land conservation (HELIC) and wetland conservation (WC) provisions. Unless an exemption has been granted by USDA, the producer agrees to all of the following on all farms in which the producer, and any affiliated person to the producer (as specified in 7 CFR Part 12), has an interest:

- **NOT** to plant or produce an agricultural commodity on highly erodible land or fields unless being farmed in accordance with a conservation plan or system approved by the Natural Resources Conservation Service.
- **NOT** to plant or produce an agricultural commodity on a wetland that was converted after December 23, 1985.
- **NOT** to have converted a wetland after November 28, 1990, for the purpose, or to have the effect, of making the production of an agricultural commodity possible on such converted wetland.
- **NOT** to convert a wetland by draining, dredging, filling, leveling, removing woody vegetation, or any other activity that results in impairing or reducing the flow and circulation of water in a way that would allow the planting of an agricultural commodity.
- **NOT** to use proceeds from any Farm Service Agency farm loan, insured or guaranteed, or any USDA financial assistance program, in such a way that might result in negative impacts to a wetland, except for those projects evaluated and approved by Natural Resources Conservation Service.

## 2. Statutory and Regulatory Authority

The Food Security Act of 1985, as amended, requires producers participating in most programs administered by the Farm Service Agency (FSA), Natural Resources Conservation Service (NRCS), and the Risk Management Agency (RMA) to comply with HELIC and WC provisions on all land owned or farmed that is considered highly erodible or a wetland unless USDA determines an exemption applies. Producers participating in these programs, and any individual or entity considered to be an affiliated person of a participating producer, are subject to these provisions. The regulations covering these provisions are set forth at 7 CFR Part 12; all such provisions, whether or not explicitly stated herein, shall apply.

## 3. Explanation of Terms

Agricultural commodity is **any** crop planted and produced by annual tilling of the soil, including tilling by one-trip planters, or sugarcane.

Highly erodible land is any land that has an erodibility index of 8 or more.

Highly erodible fields are fields where either:

- 33.33 percent or more of the total field acreage is identified as soil map units that are highly erodible; or
- 50 or more acres in such field are identified as soil map units that are highly erodible.

Perennial crop is any crop that is planted once and produces crops over multiple years. Go to [www.nrcs.usda.gov/compliance](http://www.nrcs.usda.gov/compliance) for a list of perennial and annual crops.

Wetland is an area that:

- has a predominance of hydric soils (wet soils);
- is inundated or saturated by surface or groundwater (hydrology) at a frequency and duration sufficient to support a prevalence of hydrophytic (water tolerant) vegetation typically adapted for life in saturated soil conditions; and
- under normal circumstances supports a prevalence of such vegetation, except that this term does not include lands in Alaska identified as having a high potential for agricultural development and a predominance of permafrost soils.

#### 4. NRCS and FSA Determinations

When making HELC and WC compliance determinations:

- NRCS makes technical determinations; these include :
  - For HELC compliance:
    - whether land is considered highly erodible ;
    - establishing conservation plans or systems; and
    - whether highly erodible fields are being farmed in accordance with a conservation plan or system approved by NRCS.
  - For WC compliance:
    - whether land is a wetland and if certain technical exemptions apply , such as prior converted;
    - whether a wetland conversion has occurred.
- FSA's responsibilities include:
  - making eligibility determinations, such as who is ineligible based upon NRCS technical determinations of non-compliance.
  - acting on requests for application of certain eligibility exemptions, such as the good faith relief exemption.
  - maintaining the official USDA records of highly erodible land and wetland determinations. The determinations are recorded both within the geographic information system and the automated farm and tract records maintained by FSA; however, it is important to know that determinations may not include all of a producer's land. If a producer is uncertain of the highly erodible land and wetland determinations applicable to any of the producer's land, the producer should contact the appropriate USDA Service Center for assistance.

#### 5. HELC and WC Non-Compliance - FSA and NRCS Programs

Producers who are not in compliance with HELC and WC provisions are not eligible to receive benefits for most programs administered by FSA and NRCS. If a producer received program benefits and is later found to be non-compliant, the producer may be required to refund all benefits received and/or may be assessed a penalty.

In particular, unless exemptions apply, a producer participating in FSA and NRCS programs must: not plant or produce an agricultural commodity on a highly erodible field unless such production is in compliance with a conservation plan or system approved by NRCS; not have planted or produced an agricultural commodity on a wetland converted after December 23, 1985; and, after November 28, 1990, must not have converted a wetland for the purpose, or to have the effect, of making the production of an agricultural commodity possible on such converted wetland.

A producer who violates HELC or WC provisions is ineligible for applicable FSA and NRCS benefits for the year(s) in violation. A planting violation, whether on highly erodible land or a converted wetland, results in ineligibility for benefits for the year(s) when the planting occurred. A wetland conversion violation results in ineligibility beginning with the year in which the conversion occurred and continuing for subsequent years, unless the converted wetland is restored or mitigated before January 1<sup>st</sup> of the subsequent year.

#### 6. HELC and WC Non-Compliance - Risk Management Agency - Crop Insurance Policies Reinsured by the Federal Crop Insurance Corporation

Producers obtaining federally reinsured crop insurance will not be eligible for any premium subsidy paid by the Federal Crop Insurance Corporation (FCIC) for any policy or plan of insurance if the producer:

- has not filed a completed Form AD-1026 with FSA certifying compliance with HELC and WC provisions; or
- is not in compliance with HELC and WC provisions.

Unless an exemption applies, a producer must:

- not plant or produce an agricultural commodity on a highly erodible field, unless such production is in compliance with a conservation plan approved by NRCS;
- not plant or produce an agricultural commodity on a wetland converted after February 7, 2014; and
- not have converted a wetland for the purpose, or to have the effect, of making the production of an agricultural commodity possible on such converted wetland after February 7, 2014.

A producer is ineligible for any premium subsidy paid by FCIC on all policies and plans of insurance for the reinsurance year (July 1 – June 30) following the reinsurance year of a final determination of a violation of HELC or WC provisions, including all administrative appeals, unless specific exemptions apply. Further, a producer will be ineligible for any premium subsidy paid by FCIC on all policies and plans of insurance for a reinsurance year if they do not have a completed Form AD-1026 on file with FSA certifying compliance on or before the June 1 prior to the beginning of the subsequent reinsurance year (July 1), unless otherwise exempted. RMA will contact FSA to determine compliance with HELC and WC provisions and the filing of Form AD-1026 prior to the beginning of a reinsurance year, which begins on July 1. If the producer is not in compliance and is not exempt, the producer will be ineligible for premium subsidy for all crops with a sales closing date between the following July 1 through the next June 30.

**7. Affiliated Persons**

Any affiliated person of a producer requesting benefits subject to HELC and WC provisions must also be in compliance with those provisions. Ineligibility of a producer will also apply to affiliated persons of that producer. If an affiliated person has a farming interest (as owner, operator, or other producer on any farm), the affiliated person must also file Form AD-1026 certifying compliance with HELC and WC provisions in order for the producer requesting benefits to be eligible.

**Use this table to determine affiliated persons who must be in compliance with HELC and WC provisions and file Form AD-1026. If you are unsure about an affiliated person determination, please contact FSA at your local USDA Service Center for assistance.**

<b>IF</b> the producer requesting benefits is a (an) . . .	<b>THEN</b> affiliated persons with farming interests who must be in compliance with HELC and WC provisions and file Form AD-1026 are. . .
individual	spouses or minor children with separate farming interests, or who receive benefits under their individual ID number.
<b>NOTE:</b> For a minor, parents or guardians shall be listed as affiliated persons .	estates, trusts, partnerships, and joint ventures in which the individual filing, or the individual's spouse or minor children have an interest.
	corporations in which the individual filing or the individual's spouse or minor children have more than 20% interest.
general partnership limited partnership limited liability company joint venture estate irrevocable or revocable trust Indian tribal venture or group	first level members of the entity.
corporation with stockholders	first level shareholders with more than 20% interest in the corporation.  <b>Note:</b> First level shareholders of a corporation with 20% interest or less in the corporation are not considered affiliated persons of the corporation.

**IMPORTANT NOTICE:**  
Signature on Form AD-1026 gives representatives of USDA authorization to enter upon and inspect all farms in which the producer in Part A of Form AD-1026 has an interest for the purpose of confirming HELC and WC compliance.

**NOTE:** *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 12, the Food Security Act of 1985 (Pub. L. 99-198), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to certify compliance with HELC and WC provisions and to determine producer eligibility to participate in and receive benefits under programs administered by USDA agencies. 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) and USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of producer ineligibility to participate in and receive benefits under programs administered by USDA agencies.*

*This information collection is exempted from the Paperwork Reduction Act as specified in the Agricultural Act of 2014 (Pub. L. 113-79, Title II, Subtitle G, Funding and Administration). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THE COMPLETED FORM AD-1026 TO YOUR COUNTY FARM SERVICE AGENCY (FSA) OFFICE.***

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the basis of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited basis will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider and employer.

<b>CCC-9021</b> (01-07-21)	<b>U.S. DEPARTMENT OF AGRICULTURE</b> Commodity Credit Corporation	1. County	3. Program Year
<b>FARM OPERATING PLAN FOR AN INDIVIDUAL</b>		2. State	
For "actively engaged in farming" and other payment eligibility and limitation determinations.			

*This form is to be completed by, or on behalf of, an individual who is seeking benefits from the Farm Service Agency (FSA) as an individual (and not as part of an entity) under one or more programs that are subject to the regulations at 7 CFR Part 1400. This form collects farming and other information about the individual who receives program benefits directly using the social security number identified in Part A. Payment eligibility for the individual is based upon the contribution level of certain inputs to a farming operation such as land, capital, equipment, labor, and management by the individual identified in Part A. The information on this form will be used by FSA to determine payment eligibility and limitation of payments by direct attribution.*

**PART A – BASIC INFORMATION**

1. Individual's Name and Address (Include Zip Code)	2. Social Security Number (If the social security number or taxpayer ID number is on file, only the last 4 digits are required)
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**PART B - ADDITIONAL INFORMATION**

1. Is this individual a U.S. citizen? <input type="checkbox"/> YES. Go to Item 4A <input type="checkbox"/> NO. Go to Item 2	2. Is this individual an alien lawfully admitted into the U.S.? <input type="checkbox"/> YES, must present a Resident Alien Card (I-551). <input type="checkbox"/> NO	3. FOR COUNTY FSA USE ONLY (Was a Resident Alien Card, I-551 shown?) <input type="checkbox"/> YES <input type="checkbox"/> NO
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4A. Is this individual under 18 years of age as of June 1 of the program year that is specified in Item 3? <input type="checkbox"/> NO. Go to Part C <input type="checkbox"/> YES, continue with Item 4B	4B. Enter Date of Birth (MM-DD-YYYY)
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5. Enter the name, address, and social security number of parent or guardian:

A. Parent's or Guardian's Name	B. Parent's or Guardian's Address	C. Social Security Number of Parent or Guardian <i>(If the social security number or taxpayer ID number is on file, only the last 4 digits are required)</i>

D. Does this individual maintain a separate household from parent or guardian?     YES     NO

6. List the direct and indirect interests in all farming operations of this individual's parents or guardians:

A. Parent's or Guardian's Name	B. Name of Farming Interest	C. Tax ID Number of Farming Interest <i>(If the social security number or taxpayer ID number is on file, only the last 4 digits are required)</i>	D. County and State Where Farming Interest is Located

**MINORS**

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, audiotope, 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](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](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.

Date Stamp
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**INSTRUCTIONS FOR PARTS C THROUGH H.** Only include information for the individual identified in Part A.

**PART C - LAND**

1. **Land:** Enter the following information for ALL land farmed by the individual identified in Part A and not as part of an entity. *If land is cash leased from an individual or entity with an interest in the crop or crop proceeds, include the rental rate in \$/acre Column F; otherwise enter "cash."*

A. Farm No.	B. Location (County and State)	C. Check As Applicable			D. Name of Individual or Entity Whom Land is Leased to and/or From (Includes names of landowners and landlords)	E. Acres Owned or Leased	F. Rental Rate \$ per Acre or % of Crop Share	G. Check here if same land interest was held last year
		Owned	Leased To	Leased From				
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	

For additional space for land, complete CCC-902 Continuation and attach to this form. Check here  if attached.

**PART D – CAPITAL SOURCES and USES**

1. Indicate the source of all farming capital for the individual identified in Part A for the farms listed in Part C. (Check all that apply.)

- Non-borrowed capital     
  Private loans/credit     
  FSA program payments  
 Commercial loans/credit     
  Other: \_\_\_\_\_

2. Will contributions of capital, farming equipment or land be acquired as a result of a loan or credit arrangement?  
 YES go to Item 3       NO go to Part E

3. Will such loan or credit be acquired from, guaranteed by, co-signed by, or secured by another individual or entity that has an interest in the farming operation identified in Part A? (Such interest may be as a landowner or another tenant.)  
 YES. Complete Items 3A through 3E       NO. Go to Part E.

A. Type of Contribution	B. Name of Loan or Credit Source	C. Guarantor's Name	D. Credit Source or Guarantor's Affiliation or Interest in the Farming Operation	E. Percent of Total Capital
				%
				%

**PART E - EQUIPMENT (All percentages are based on annual rental values.)**

1. **Owned Equipment:** Enter the percent of ALL equipment owned by the individual identified in Part A that will be used on the farms listed in Part C? If the individual specified in Part A does not own any of the equipment used in the farming operation, enter 0%. \_\_\_\_\_%

2. **Leased Equipment:** Enter the following information for ALL leased equipment to be used by the individual identified in Part A on the farms listed in Part C. If leased equipment is not used in this farming operation, enter 0%.

A. Percent of Total Equipment Used by the Individual	B. Name of Party/Entity Equipment is Leased From	C. Type of Equipment Leased	D. Does the Party/Entity the equipment is leased from have an interest in this farming operation?
%			<input type="checkbox"/> YES <input type="checkbox"/> NO
%			<input type="checkbox"/> YES <input type="checkbox"/> NO
%			<input type="checkbox"/> YES <input type="checkbox"/> NO

3. **Lease agreements:** If Item 2D is "YES," copies of lease agreement and documentation may be required for compliance purposes. GO TO Part F.

**PART F - CUSTOM SERVICES**

1. Will custom services be utilized by the individual identified in Part A on the farms listed in Part C?

- NO. Go to Part G       YES, complete Items 1A through 1D of this Part.

A. Type of Services	B. Farm Number(s)	C. Number of Acres	D. Name of Provider

**PART G – LABOR**

For the farms listed in Part C, enter the information for contributions of active personal labor which will be provided by the individual identified in Part A, hired laborers; or by others:

Type	Amount
1. <b>Active personal labor.</b> Enter the percentage or hours to be provided by the individual identified in Part A. If the individual identified in Part A performs 1,000 or more hours of labor for this farming operation, enter "1,000" hours.	%
	hrs
2. <b>Hired labor.</b> Enter the percentage or hours of labor that will be hired.	%
	hrs
A. Will any of the hired labor originate from the same source as leased equipment shown in Part E? <input type="checkbox"/> NO <input type="checkbox"/> YES <i>If "YES", acceptable documentation to prove such relationship may be required for compliance purposes.</i>	
B. Will any of the hired labor be included in the custom farming services shown in Part F? <input type="checkbox"/> NO <input type="checkbox"/> YES <i>If "YES", acceptable documentation to prove such relationship may be required for compliance purposes.</i>	
3. <b>Other labor.</b> Enter the percentage of labor to be donated by family members or others. <i>(No payment will be owed).</i>	%

**PART H – MANAGEMENT (The total percentage shown in Items 1 through 3 must equal 100%)**

For the farms listed in Part C, enter the percentage or hours of the individual's total management responsibility and the type of managerial duties required which will be provided by the individual identified in Part A, by hired persons or entities, or by others who are not hired.

1. <b>Active personal management:</b> A. Enter the percent of active personal management to be provided by the individual identified in Part A: _____ % B. List the type of managerial duties/activities to be personally performed by the individual identified in Part A:
2. <b>Hired management:</b> A. Enter the percent of hired management: _____ % B. Describe any paid management services provided by someone other than the individual identified in Part A:
3. <b>Other management:</b> A. Enter the percent of other management: _____ % B. Describe any non-compensated management duties/activities provided by someone other than the individual identified in Part A:

**PART I – CERTIFICATION**

*I certify that all the information entered on this document and any supporting documentation is true and correct. I understand furnishing incorrect information will result in forfeiture of payments and may result in the assessment of a penalty. I will timely provide written notification to the Farm Service Agency committees for the county and State listed on this form of any changes in this farming operation. By signing this form, I acknowledge that:*

- *all supporting documentation has been submitted as required.*
- *I have read and understand all definitions and requirements on Page 4.*
- *all information contained on this form will be considered in effect continuously unless changes or revisions are submitted.*
- *it is my responsibility to timely notify FSA in writing of any changes in the farming, ranching or forestry operation, or financial status that may affect these representations.*
- *evidence such as tax records, certified public accountant's certification, or other documentation may be required to validate these representations and that I will take all necessary actions to provide such materials to FSA if requested.*

1. Signature (By)	2. Title/Relationship of the Individual Signing in Representative Capacity	3. Date (MM-DD-YYYY)
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**DEFINITIONS**

The following definitions apply to Form CCC-902I.

1. **ACTIVELY ENGAGED IN FARMING** – means providing both: 1) significant contributions of capital, equipment, or land, or combination thereof to the farming operation; and 2) significant contributions of active personal labor or active personal management, or a combination thereof, to the farming operation as described. Further, for a person or legal entity to be considered actively engaged in farming for program payment purposes, the contributions of the person or legal entity must be at-risk and commensurate with the person's or legal entity's claimed share of the profit and loss of the farming operation. Failure to meet these requirements will result in the determination of ineligibility for payments under programs specified in 7 CFR Part 1400.
2. **INTEREST IN A FARMING OPERATION** – a person or legal entity is considered to have an interest in this farming operation if the person or legal entity owns or rents land to this farming operation; or has an interest in the crop or crop proceeds from this farming operation; or is a member of a joint operation that either owns or rents land to this farming operation, or has an interest in the crop or crop proceeds from this farming operation.
3. **JOINT OPERATION** - is a general partnership, joint venture, or similar organization.
4. **PERSON** – is a natural person (an individual) and does not include a legal entity.
5. **ACTIVE PERSONAL LABOR** – a person is considered to be providing active personal labor with respect to a farming operation if that person is directly and personally providing physical activities necessary to conduct the farming operation, including land preparation, planting, cultivating, harvesting, and marketing of agricultural commodities. Other qualifying physical activities include establishing and maintaining conserving covers and those physical activities necessary for livestock production for the farming operation.
6. **ACTIVE PERSONAL MANAGEMENT** – a person is considered to be providing active personal management with respect to a farming operation if that person is directly and personally providing the general supervision and direction of activities and labor involved in the farming operation; or providing services (whether performed on-site or off-site) reasonably related and necessary to the farming operation. The management activities must be critical to the profitability of the farming operation and performed under one or more of the following categories: 1) Capital which includes arranging financing and managing capital; acquiring equipment; acquiring land and negotiating leases; managing insurance and participating in USDA programs; 2) Labor which includes hiring and managing of hired labor; 3) Agronomics and marketing which includes selecting crops and making planting decisions; acquiring and purchasing of crop inputs; managing crops and making harvesting decisions; pricing and marketing of crop production.
7. **CAPITAL** – with respect to a farming operation is the funding provided by a person or legal entity to the farming operation in order for such operation to conduct farming activities. To be considered a significant contribution for a person or legal entity, the capital must have been derived from a fund or account separate and distinct from that of any other person or entity with an interest in the farming operation. A significant contribution of capital does not include the value of any labor or management which is contributed to the farming operation. A capital contribution may be a direct non-borrowed (out-of-pocket) input of a specified sum or an amount borrowed by the person or entity. Capital does not include advance program payments.
8. **CONTRIBUTION** – with respect to a farming operation is the provision of land, capital or equipment assets, and providing active personal labor, or active personal management to the farming operation in exchange for, or the expectation of, deriving benefits based solely on the success of the farming operation. Contributions must be “significant”.
9. **CUSTOM SERVICES** – with respect to a farming operation is the hiring of a contractor or vendor that is in the business of providing such specialized services to perform services for the farming operation in exchange for the payment of a fee for such services performed.
10. **ENTITY** - is a corporation, joint stock company, limited liability company, association, limited partnership, limited liability partnership, irrevocable trust, revocable trust, estate, charitable organization, or other similar organization including any such organization participating in the farming operation as a partner in a general partnership, participant in a joint venture, a grantor of a revocable trust, or as a participant in a similar organization.
11. **EQUIPMENT** – with respect to a farming operation is the machinery and implements needed to conduct activities of the farming operation including machinery and implements used for land preparation, planting, cultivating, harvesting or marketing crops. Equipment also includes machinery and implements needed to establish and maintain conserving covers.
12. **FAMILY MEMBER** – a person is considered to be a family member of another person in the farming operation if that person is related to the other person as a lineal ancestor, lineal descendant, sibling, 1st cousin, niece, nephew, spouse, or otherwise by marriage. This relationship includes great grandparent, grandparent, parent, child (including legally adopted children and stepchildren), grandchild, great grandchild, sibling, 1st cousin, niece, nephew, aunt, uncle or spouse of family member in the farming operation.
13. **FARMING OPERATION** - is a business enterprise engaged in the production of agricultural products which is operated by a person or legal entity which is eligible to receive payments, directly or indirectly.
14. **LAND** – with a respect to a contribution to a farming operation is farmland consisting of cropland, pastureland, wetland, or rangeland which meets the specific requirements of the applicable program for which payments or benefits are sought.
15. **SUPPORTING DOCUMENTATION** – is any information that supports the relevant representations made such as, but not limited to: articles of incorporation; corporate meeting minutes; stock certificates; organizational papers; trust agreement; last will or testament or a deceased individual; affidavit of heirship approved by Office of General Counsel; partnership agreement; property lease agreement; purchase agreement; land deed; lending security agreement; and financial statement.
16. All other terms utilized in this form shall be defined pursuant to 7 CFR Part 1400.

**NOTE:** *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 1400, the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Agricultural Act of 2014 (Pub. L. 113-79), and the Agriculture Improvement Act of 2018 (Pub. L. 115-334). The information will be used to identify the farm operating plan data needed to determine an individual's 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.*

**Paperwork Reduction Act (PRA) Statement:** *This information collection is exempted from the Paperwork Reduction Act as specified in 7 U.S.C. 9091(c)(2)(B).*

**Public Burden Statement:** *For CFAP 2.0 and QLA only, public reporting burden for this collection is estimated to average 30 minutes per response, including reviewing instructions, gathering and maintaining the data needed, completing (providing the information), and reviewing the collection of information. You are not required to respond to the collection, or USDA may not conduct or sponsor a collection of information unless it displays a valid OMB control number. 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.*