

**(LOSS LINE – TYPE 21)****Format/Edits**

| Field No. | Field Name                  | Begin Pos | Size | Picture | Field Edits                                                                                                                                                                                                                          |
|-----------|-----------------------------|-----------|------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1         | Record Type                 | 1         | 2    | 9(02)   | Required. Must be 21.                                                                                                                                                                                                                |
| 2         | Approved Insurance Provider | 3         | 2    | X(02)   | Required. Edit with AIP/Company table.                                                                                                                                                                                               |
| 3         | Location State              | 5         | 2    | 9(02)   | Required. Edit with FIPS State table.                                                                                                                                                                                                |
| 4         | Policy Issuing Company      | 7         | 3    | 9(03)   | For Reinsured edit with company table. Must be valid Pic code for reinsurance year.                                                                                                                                                  |
| 5         | Policy Number               | 10        | 7    | 9(07)   | Required. Must be > zeros.                                                                                                                                                                                                           |
| 6         | Crop Year                   | 17        | 4    | 9(04)   | Required. Must be the crop year of the crops reported under the policy. This will equal the Reinsurance Year or Reinsurance Year +/- 1 for applicable crop code.                                                                     |
| 7         | Crop Code                   | 21        | 4    | 9(04)   | Required; Edit with ADM2.                                                                                                                                                                                                            |
| 8         | Insurance Plan Code         | 25        | 2    | 9(02)   | Required; Edit with ADM2.                                                                                                                                                                                                            |
| 9         | Location County             | 27        | 3    | 9(03)   | Required; Edit with FIPS County Table.                                                                                                                                                                                               |
| 10        | Unit Number                 | 30        | 5    | 9(05)   | Required; Must be > zeros. Unit Number must end in "00" for Enterprise and Whole Farm Units & Crop 0231 (i.e. 00100). For PRF, crop 0088, plans 13 and 14, only basic units by unique crop type/crop practice/grid id # are allowed. |
| 11        | Type Code                   | 35        | 3    | 9(03)   | Required; Edit with ADM2.                                                                                                                                                                                                            |
| 12        | Practice Code               | 38        | 3    | 9(03)   | Required; Edit with ADM2.                                                                                                                                                                                                            |
| 13        | Coverage Flag               | 41        | 1    | X(01)   | Required; Must be:<br>C = Catastrophic 'Cat' Coverage<br>A = Additional Coverage<br>For CRC, GRIP and Revenue Assurance must be "A".<br>Plan Codes 13 and 14 must = A.                                                               |
| 14        | Claim Number                | 42        | 8    | 9(08)   | Must match Loss Total Claim Number on the Type 20 record.                                                                                                                                                                            |
| 15        | Sub Type/Variety            | 50        | 3    | 9(03)   | Sub Type/Variety Code if applicable. The subtype/variety code from the ADM is applicable for option lines only for Florida Fruit Trees. If not applicable, zero fill.                                                                |
| 16        | Grid ID                     | 53        | 8    | 9(08)   | Plan Codes 13 and 14 enter Grid ID from Map. Right justify with leading zeros. If not applicable, zero fill.                                                                                                                         |
| 17        | Type 21 Key Reserve         | 61        | 15   | X(15)   | Space Reserved for Additional key data required in the future or for other record types.                                                                                                                                             |
| 18        | Record Number               | 76        | 3    | 9(03)   | Must be > zero and unique within a Crop Policy Claim (Location State/Location County/Crop).                                                                                                                                          |
| 19        | Type 11 Record Number       | 79        | 3    | 9(03)   | Required, the record number of the Type 11 record that established the guarantee, liability and premium for this Type 21 record.                                                                                                     |
| 20        | Adjuster SSN                | 82        | 9    | 9(09)   | Required. Must match a certified loss adjuster SSN or an accepted Type 56 record. If plan = 12, 13, 14 or 73; zero fill.                                                                                                             |

| Field No. | Field Name                | Begin Pos | Size | Picture     | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----------|---------------------------|-----------|------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 21        | Rate Class                | 91        | 3    | X(03)       | See Exhibit 11-2 for ADM validation rules. Otherwise; zero fill.                                                                                                                                                                                                                                                                                                                                                                       |
| 22        | Stage Code                | 94        | 2    | X(02)       | Required for certain crops. See Exhibit 21-5 for validation rules. Spaces if not applicable. DC = Any claim inspected by the adjuster and denied, resulting in no indemnity payment. (See Note 4 at end of record) If Crop = 0013 or 0039 and the Stage Removal Option (NS) is selected, this field must be an applicable stage code. For Raisins: Fill with "RR" or "RF" for reconditioning payment and spaces for a production loss. |
| 23        | 100% Replant Payment Flag | 96        | 1    | X(01)       | Validate as follows:<br>Y = Policy holder entitled up to 100% of the Replant Cost. Includes Plan 40 crops with CY, OX or OZ Option Codes. Spaces = Normal Replant reimbursement                                                                                                                                                                                                                                                        |
| 24        | Stage Guarantee per Acre  | 97        | 10   | 9(08)V9(02) | See Indemnity Calculations for validation rules. Zero Fill, except for replants, for Avocados (plan 46), Fl. Fruit Trees and Hawaii Tropical Trees (plan 40), Income Protection (plan 42) and Indexed Income Protection (plan 45). Raisin Reconditioning Payment = dollars and cents per ton for reconditioning.                                                                                                                       |
| 25        | Determined Acres/Tons     | 107       | 8    | 9(06)V9(02) | Required for all crops except Florida Fruit Trees and Hawaii Tropical Trees. For Raisins, enter the number of tons to the nearest hundredth. For Mint, if stage code is W1, acres must be at least the lesser of 20 acres or 20% of the acres in the unit.                                                                                                                                                                             |
| 26        | Gleaned Acreage Code      | 115       | 2    | X(02)       | HG for Harvested Gleaned or UG for Unharvested Gleaned Acreage. Otherwise, must be spaces.                                                                                                                                                                                                                                                                                                                                             |
| 27        | Filler                    | 117       | 2    | X(02)       | Must be spaces.                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 28        | Loss Guarantee            | 119       | 10   | 9(08)V9(02) | Required; See Indemnity Calculations for edits. Zero fill for Raisin Reconditioning Payment.                                                                                                                                                                                                                                                                                                                                           |
| 29        | Unit Liability            | 129       | 10   | 9(10)       | Required: Value must be the same on all lines for the Unit. Will match to the corresponding Unit Liability on the T-11. Zeros = Not Applicable.                                                                                                                                                                                                                                                                                        |
| 30        | Loss Premium              | 139       | 10   | X(10)       | Must be spaces – Not used as this time.                                                                                                                                                                                                                                                                                                                                                                                                |
| 31        | Reserved                  | 149       | 10   | X(10)       | Must be spaces.                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 32        | Reserved                  | 159       | 10   | X(10)       | Must be spaces.                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 33        | Harvested Production      | 169       | 10   | 9(08)V9(02) | Must be ≤ Production to Count. Otherwise zero fill.                                                                                                                                                                                                                                                                                                                                                                                    |

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| Field No. | Field Name                                                               | Begin Pos | Size | Picture      | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-----------|--------------------------------------------------------------------------|-----------|------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 34        | Reserved                                                                 | 179       | 10   | X(10)        | Must be spaces.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 35        | Production to Count                                                      | 189       | 10   | 9(08)V9(02)  | Sum of Net Harvested and Net Appraised Production. Used to calculate Farm Unit Deficiency, may be zero. Adjusted for moisture and quality.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 36        | Production to Count Conversion for Revenue Crops (Bushels, Tons, etc...) | 199       | 10   | 9(08)V9(02)  | <p>Production to count in the basic unit of measure for RA (plan 25), IP (plan 42), IIP (plan 45) and CRC (plan 44) if field 35 (production to count) is greater than zero. Otherwise, zero fill.</p> <p>Not applicable for stages (field 22, pos. 94) R, RF, RR, RS, RT, P2, PF or PT.</p> <p>Additional edits:</p> <p>Ins plan 25 – If harvested price option = Y (rec type 11, RA Fall Harvest Price Option, field 54, pos 309) and county harvest price (ADM 4 suffix 3) is greater than zero then field 35 divided by county harvest price. If county harvest price is zero then field 35 divided by projected price (ADM 4 suffix 3) If harvest price option = N and county harvest price is greater than zero then field 35 divided by county harvest price (ADM 4 suffix 3) if greater than zero. For RA Malting Barley, field 35 divided by field 57 (price election).</p> <p><b>Ins plan 44</b> – field 35 divided by harvest market price (ADM 4, suffix 8).</p> <p><b>Ins plan 42 and 45</b> – field 35 divided by harvest price (ADM 4, suffix 7) divided by insured share (field 38, pos. 219). Additional coverage (rec type 21, Coverage Flag, field 13, pos. 41) 100% harvest price and CAT 55% harvest price.</p> |
| 37        | Farm Unit Deficiency                                                     | 209       | 10   | S9(08)V9(02) | Required; If $\leq$ zero, Indemnity must be $\leq$ zero. Must be a signed field. Zero fill for Raisin Reconditioning Payment and IP. If Plan = 12, 13, 14 or 73, zero fill.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 38        | Insured Share                                                            | 219       | 4    | 9(01)V9(03)  | Required; Must be $>$ zero and $\leq$ 1.000.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 39        | GRP/GRIP Payment Calculation Factor                                      | 223       | 4    | 9(01)V9(03)  | Required for GRP/GRIP plan crops only, all other Plans, zero fill. For GRP/GRIP calculation see exhibit 21-10.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

| Field No. | Field Name                    | Begin Pos | Size | Picture | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----------|-------------------------------|-----------|------|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 40        | Indemnity                     | 227       | 10   | S9(10)  | Required; See Exhibit <b>21-10</b> for calculation. The total of all Type 21 Indemnity fields for a given claim number must equal the sum of the Total fields for the corresponding Type 20 record(s). The sum of all Type 21 Indemnity fields for a Unit cannot exceed the sum of all Type 11 Liability fields for the same unit by more than the lesser of 0.1% or \$10. Total indemnity for the units cannot be negative. If the plan code = 25 and the basic unit option code = WU, then the indemnity can be negative by crop, but not by whole farm.<br>This must be a <i>signed field</i> .<br>If the Multi Cropping Flag = 'SW' this field must = zeros. |
| 41        | Sugar Factor                  | 237       | 3    | V9(03)  | Must be > zero for Sugar Beets if Harvested Production > zero. Otherwise; zero fill                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 42        | Audit Correction              | 240       | 1    | 9(01)   | Must be:<br>0 = Not Applicable<br>1 = Corrected                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 43        | Preliminary Indemnity         | 241       | 10   | S9(10)  | Required. This must be a signed field See Exhibit 21-10 for calculation instructions. Zero fill if the Stage Code = "R, RF, RR, RS or RT".                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 44        | Multi Cropping Exception Flag | 251       | 1    | X(01)   | Values are X or spaces. See Note 2 at end of record.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 45        | Simplified Claim Flag         | 252       | 1    | X(01)   | Must be:<br>F = Emergency Claim as authorized by (MGR-08-012 and MGR-08-016) only<br>S = Simplified Claim<br>R = Self-Certified Replant Claim<br>Blank = Not Applicable<br>See Exhibit 21-6.                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 46        | Farm Serial Number            | 253       | 7    | X(07)   | Required for Peanuts and Burley Tobacco, Buy-up coverage (Coverage Flag = A) policies only. For Burley Tobacco, each FSN must have a unique unit number. For Peanuts, each optional unit number must have a unique FSN, but Basic units may include more than one FSN. Optional for other crops, otherwise spaces.                                                                                                                                                                                                                                                                                                                                               |

| Field No. | Field Name                  | Begin Pos | Size | Picture     | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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| 47        | Guarantee Reduction Factor  | 260       | 3    | V9(03)      | <p>Must match to the corresponding T-11 record.</p> <p>Required if Guarantee Reduction Flag on the 11 record is not Blank. Enter applicable Late or Prevented Planting Guarantee Reduction Factor.</p> <p>For Dollar Citrus (0215), Fixed Dollar Strawberries (0110), Fixed Dollar and Cherries (0057) enter applicable Guarantee Reduction factor. Must match to the factor on the corresponding T-11</p> <p>For crop 0013 in State 36, Stage 1 factor = .5<br/>For crop 0013 in State 36, Stage 2 factor = .8<br/>For Mint types with winter coverage option, enter applicable guarantee reduction factor. Otherwise; zero fill. See Exhibit 11-1 or Exhibit 11-5.</p>                                       |
| 48        | Dollar Amount of Insurance  | 263       | 10   | 9(08)V9(02) | <p>For GRP (12), GRIP (73), Revenue Assurance (25), Pecans (41), IP (42 and 45), Avocados (46) Pasture, Rangeland, and Forage Rainfall Index (13), Pasture, Rangeland, and Forage Vegetation Index (14), and Dollar Crops (50), the selected dollar amount of protection per acre goes in this field and includes coverage level and/or price election factor (see exhibit 11-4 for details). For plan code (51), this field must contain the exact \$ amount from ADM-1-D . For Dollar Citrus (0215) in California (06), Cherries, and Strawberries must be Dollar Amount from ADM-1-D or Dollar Amount from ADM-1-D * Guarantee Reduction Factor from field 36 (on the 11 record). Otherwise; zero fill.</p> |
| 49        | Liability Adjustment Factor | 273       | 7    | 9(01)V9(06) | <p>Must be ≤ 1.000000. If &lt; 1.000000, indicates that the liability submitted on the Type 11 record was understated. Factor will be the same value for all records of a unit by payment type.<br/>See Exhibit 18 in the LAM for calculation.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

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| 50               | Contract Price | 280 | 8    | 9(04)V9(04) | <p>For Contract Price crops enter 100% of the contract price. Crops are:</p> <table border="1"> <thead> <tr> <th>Crop</th> <th>State</th> <th>Cty</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>Alfalfa Seed</td> <td>All</td> <td>All</td> <td>All</td> </tr> <tr> <td>Silage Sorghum</td> <td>All</td> <td>All</td> <td>All</td> </tr> </tbody> </table> <p><u>For Alfalfa and Silage Sorghum only:</u> use if contract price applies. If no contract use established price and zero fill this field).</p> <table border="1"> <tbody> <tr> <td>Processing Beans</td> <td>Idaho</td> <td>041</td> <td>301</td> </tr> <tr> <td>Processing Beans</td> <td>Idaho</td> <td>027</td> <td>303</td> </tr> <tr> <td>Processing Beans</td> <td>Oregon</td> <td>045</td> <td>303</td> </tr> <tr> <td>Dry Beans</td> <td>All</td> <td>All</td> <td>062</td> </tr> <tr> <td>Green Peas</td> <td>All</td> <td>All</td> <td>All</td> </tr> <tr> <td>Dry Peas</td> <td>All</td> <td>All</td> <td>098</td> </tr> <tr> <td>Mustard</td> <td>All</td> <td>All</td> <td>All</td> </tr> </tbody> </table> <p>Zero fill if not applicable.</p> | Crop | State | Cty | Type | Alfalfa Seed | All | All | All | Silage Sorghum | All | All | All | Processing Beans | Idaho | 041 | 301 | Processing Beans | Idaho | 027 | 303 | Processing Beans | Oregon | 045 | 303 | Dry Beans | All | All | 062 | Green Peas | All | All | All | Dry Peas | All | All | 098 | Mustard | All | All | All |
|------------------|----------------|-----|------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------|-----|------|--------------|-----|-----|-----|----------------|-----|-----|-----|------------------|-------|-----|-----|------------------|-------|-----|-----|------------------|--------|-----|-----|-----------|-----|-----|-----|------------|-----|-----|-----|----------|-----|-----|-----|---------|-----|-----|-----|
| Crop             | State          | Cty | Type |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Alfalfa Seed     | All            | All | All  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Silage Sorghum   | All            | All | All  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Processing Beans | Idaho          | 041 | 301  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Processing Beans | Idaho          | 027 | 303  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Processing Beans | Oregon         | 045 | 303  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Dry Beans        | All            | All | 062  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Green Peas       | All            | All | All  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Dry Peas         | All            | All | 098  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |
| Mustard          | All            | All | All  |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |       |     |      |              |     |     |     |                |     |     |     |                  |       |     |     |                  |       |     |     |                  |        |     |     |           |     |     |     |            |     |     |     |          |     |     |     |         |     |     |     |

|    |                          |     |   |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|----|--------------------------|-----|---|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 51 | Guarantee Reduction Flag | 288 | 1 | X(01) | <p>Must match the corresponding T-11 record.</p> <p>L = Late Planting<br/>                     Required for Onions (0013) in State 36 (NY) if there is a late planting reduction and a stage percent reduction.</p> <p>M = Maximum Late Planted Reduction<br/>                     P = Prevented Planting<br/>                     E = Company verified eligible PP acres from another unit and/or crop or qualifying crop payment acres do not constitute 20 acres or 20 percent of the unit (as allowed by section 17 (h) of the Common Crop Insurance Policy Basic Provisions).</p> <p>F = First Year thinning for Pecans<br/>                     C = Percent Stand Limitation for Cherries (See Exhibit 11-5)<br/>                     D = Amount of Insurance reduction for Fixed Dollar Citrus (0215) in California and Fixed Dollar Strawberries (0110) in State 06, 12 or 22.<br/>                     Also for Cherries (0057) for reduction other than percent stand limitation.</p> |
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Space = No Reduction

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| 52 | Multiple Cropping Flag | 289 | 2 | X(02) | <p><b>USE ONLY ON FIRST CROP LOSS LINES</b><br/>                     (See Ex. 11-1 for flow chart)<br/>                     Required for all crops.<br/>                     (See Ex. 21-10 Loss Calc Pages)<br/>                     Values are:<br/>                     DC = 100% indemnity or PP Payment with Double Cropping history<br/>                     FC = 100% Indemnity (second crop planted and no other code applies)<br/>                     IR = 65% Reduction in Indemnity Payment on first crop<br/>                     NS = 100% indemnity (no second crop for PP or no insured second crop for planted acreage)<br/>                     USE FOR PERENNIALS, unless perennials destroyed and 2<sup>nd</sup> crop planted<br/>                     RI = Restore Indemnity or PP Payment (no loss on second crop or no second planted crop for PP)<br/>                     RP = 65% Reduction to Prevented Planting Payment on first crop.<br/>                     WI = Waives insurance on second crop<br/> <b>USE ONLY ON SECOND CROP LOSS LINES</b><br/>                     SC = 100% Indemnity on second crop acres<br/>                     SW = Waived indemnity on second crop acreage</p> |
|----|------------------------|-----|---|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

SPACES ARE NOT ALLOWED IN THIS FIELD UNLESS THE STAGE CODE = 'R', 'RS', 'RT' (REPLANT) OR 'RR' or "RF" (RAISIN RECONDITIONING)

|    |               |     |   |       |                                                                                                                                                                                                                                                                                                   |
|----|---------------|-----|---|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 53 | Skip Row Code | 291 | 5 | 9(05) | <p>REFER TO THE LAM FOR MORE DETAILED EXPLANATION OF CODES.<br/>                     Cotton: Enter the appropriate skip-row code for the planting pattern and row width from the table for skip-row cotton, if applicable. See note on last page on the Type 15 record. Otherwise; zero fill.</p> |
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| 54        | Yield           | 296       | 10   | 9(08)V9(02) | <p>Insurance Plans 12, 13, 14, 40, 50, 51, and 73: zero fill.</p> <p>Insurance plans 41 and 46: yield must be in whole dollars and match Type 11 record for approved yield.</p> <p>Insurance Plan 30: yield must be greater than zero and match FCI-35 for rate class or FCI-2 agreement.</p> <p>Insurance plan 55: (Yield from FCI-35 * Coverage Level Factor) - minimum payment: yield must be &gt; 0 and ≤ ADM yield * coverage level factor.</p> <p>Insurance plans 25, 42, 44, 45, 84, and 90: Yield must match Type 11 record for approved.</p> |
| 55        | Number of Trees | 306       | 10   | 9(10)       | <p>See Exhibit 11-12 for yield requirements.</p> <p>This field is required for the determined number of Florida Fruit Trees by crop code and the number of insurable Pecan trees. The number of insured Hawaii Tropical Fruit Trees (plan 90) and Hawaii Tropical Trees (plan 40) by crop code and age. Otherwise, zero fill.</p>                                                                                                                                                                                                                     |



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| Field No. | Field Name     | Begin Pos | Size | Picture     | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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| 56        | Coverage Level | 316       | 5    | 9(01)V9(04) | <p><i>Must match coverage level on the 11 record.</i></p> <p>For Cat Policies, the coverage level must be 0.5000 for all crops except GRP Crops, in which case it must be 0.6500.</p> <p>Florida Citrus - Valid Coverage Levels are { 0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500, 0.8000, 0.8500}</p> <p>Avocados (Ins Plan 46) - Valid Coverage Levels are { 0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500}</p> <p>Ins Plan 12, 13, 14 &amp; 73 - Valid Coverage Levels are { 0.7000, 0.7500, 0.8000, 0.8500, 0.9000}</p> <p>IP (Ins. Plan 45) &amp; IAPH (Ins Plan 96) - Valid Coverage Levels are { 0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500}</p> <p>For Revenue Assurance - All T21 records for RA must have the same coverage level within the unit organization selected.</p> <p>IP (42), CRC (44) and All Other Crops - Valid Coverage Levels are { 0.5000, 0.5500, 0.6000, 0.6500, 0.7000, 0.7500, 0.8000, 0.8500}</p> <p>There is no valid Coverage Level below 0.5000.</p> <p>For Crop 0085 (Sweet Potatoes) the only valid coverage levels are CAT, 50%, 55%, 60%, 65%, 70% and 75%.</p> |

**(LOSS LINE – TYPE 21)**

**Format/Edits**

| Field No. | Field Name | Begin Pos | Size | Picture | Field Edits |
|-----------|------------|-----------|------|---------|-------------|
|-----------|------------|-----------|------|---------|-------------|

|    |                       |     |   |             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|----|-----------------------|-----|---|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 57 | Price Election Amount | 321 | 8 | 9(04)V9(04) | <p>Required; Must be 1.0000 for Plan codes 12, 13, 14, 41, 46, 50, 51 and 73.<br/>                     Certified Seed Potatoes -<br/>                     Option CL = 1.00<br/>                     Option CH = 3.00<br/>                     Ins. Plan 25 –<br/>                     Malt Barley Option A ≤ the Price from ADM-P<br/>                     Malt Barley Option B ≤ 2.00.<br/>                     Ins. Plan 90 -<br/>                     Malt Barley Option A ≤ the Price from ADM-P<br/>                     Malt Barley Option B ≤ 2.00.<br/>                     Ins. Plan 42 -<br/>                     Pre Sales Price used to calculate the Loss Guarantee<br/>                     Malt Barley Option A ≤ the Price from ADM-P<br/>                     Malt Barley Option B ≤ 2.00.</p> <p>All other Plans/Crops edit using ADM4.<br/>                     (ADM Price or Contract Price) * Price Election Factor = Price Election Amount.<br/>                     The “CAT” price election is 55%.<br/>                     Alfalfa Seed (0107) - If Contract Price (field 50) = zeros, then use ADM Price.<br/>                     Suffix:<br/>                     1 = Catastrophic &amp; Established High Price are applicable (MPCI)<br/>                     2 = Catastrophic, Established High &amp; Market Price are applicable (MPCI)<br/>                     3 = Projected Harvest and County Harvest Price (RA) are applicable<br/>                     4 = N/A<br/>                     5 = N/A<br/>                     6 = N/A<br/>                     7 = IP, Pre Sales Price or Harvest<br/>                     8 = CRC Base Price is applicable.<br/>                     9 = Contract Price is applicable (MPCI)<br/>                     A = N/A<br/>                     If CE Option is selected, price must be 100% of the price for the MPCI crop policy.</p> |
|----|-----------------------|-----|---|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| Field No. | Field Name                        | Begin Pos | Size | Picture | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-----------|-----------------------------------|-----------|------|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 58        | Written Agreement Number          | 329       | 8    | X(08)   | <p>If Plan = 25, this field must equal spaces.<br/>                     For RMA issued Written Agreements enter the identification number for the approved written agreement for the AIP, state, county and crop.<br/>                     The first 3 digits identify the issuing RO and must be valid for the location state.<br/>                     Enter spaces if <u>No</u> Written Agreement exists.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 59        | Written Agreement Type            | 337       | 2    | X(02)   | <p>Valid Written Agreement types are: GP, HR, NB, OC, OP, PE, RE, SC, SG, SM, SP, TC, TD, TL, TP, UA, UC, XC and 33.<br/>                     Enter spaces if <u>NO</u> Written Agreement is in effect. Enter '33' if the insurance rate is provided on a FCI-33 (rules page, map or supplement).<br/>                     If Plan = 25, this field must equal spaces.<br/>                     All entries, except a "33" require a valid Written Agreement Number in field 58.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 60        | Written Agreement Processing Flag | 339       | 2    | X(02)   | <p>If Plan = 25, this field must equal spaces.<br/>                     All single values must be left justified.<br/>                     Must be:<br/>                     H = Use only for High Risk land with a Written Agreement that changes the High Risk rate, factor or yield. Use the Written Agreement type of "HR".<br/>                     P = FCI-2 Dollar Amount of Insurance exception for Macadamia Trees.<br/>                     R = FCI-2 Agreement with a Reference County.<br/>                     W = FCI-2 Agreement with no Reference County<br/>                     3 = FCI-33 (rules page, map or supplemental) Rates<br/>                     RC = Certified organic acreage with a location or reference county<br/>                     RT = Transitional acreage with a location or reference county<br/>                     NC = Certified organic acreage with no reference county<br/>                     NT = Transitional acreage with no reference county<br/>                     Otherwise, spaces.</p> |
| 61        | Valid for Escrow Flag             | 341       | 1    | X(01)   | <p>See Exhibit 11-8 for edit details.<br/>                     Internal Use. Will be "Y" if the record passes edits necessary for escrow processing (numeric checks). Will be "N" if the record is not acceptable for escrow.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

**(LOSS LINE – TYPE 21)**

**Format/Edits**

| Field No. | Field Name            | Begin Pos | Size | Picture     | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-----------|-----------------------|-----------|------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 62        | Price Election Factor | 342       | 5    | 9(01)V9(04) | <p><i>Must match price election factor on the 11 record (field 43). Required for all crops. Plan code 25, 41, 44, 46 and 51 must = 1.0000.</i></p> <p><i>If insurance plan = 12 or 73 and coverage flag (field 13) equals 'A', then this field must equal 0.6000 thru 1.0000.</i></p> <p><i>If insurance plan = 12 and if coverage flag (field 13) equals C, this field must = 0.4500.</i></p> <p><i>If coverage flag (field 13) equals 'C', this field must = 0.5500.</i></p> <p><i>If insurance plan = 13 or 14, this is the productivity factor selected by the insured and coverage flag (field 13) must equal A, and this field must equal 0.6000 thru 1.5000.</i></p> <p><i>If coverage flag (field 13) equals 'A' and coverage level (field 56) equals:</i></p> <ol style="list-style-type: none"> <li>1.) 0.5000 this field must = 1.0000</li> <li>2.) 0.5500 this field must be ≥ 0.9100</li> <li>3.) 0.6000 this field must be ≥ 0.8400</li> <li>4.) 0.6500 this field must be ≥ 0.7700</li> <li>5.) 0.7000 this field must be ≥ 0.7200</li> <li>6.) 0.7500 this field must be ≥ 0.6700</li> <li>7.) 0.8000 this field must be ≥ 0.6300</li> <li>8.) 0.8500 this field must be ≥ 0.5900</li> </ol> |
| 63        | Filler                | 347       | 2    | X(02)       | Must be spaces.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 64        | CEO Coverage Level    | 349       | 5    | 9(01)V9(04) | Enter CEO coverage level; must be greater than Coverage Level (field 56). Used to determine premium. Otherwise; zero fill.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 65        | CEO Indemnity Factor  | 354       | 6    | 9(01)V9(05) | (CEO Coverage Level/MPCI Coverage Level) (field 64/field 56) used in indemnity calculation. Otherwise, zero fill.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

| Field No. | Field Name                   | Begin Pos | Size | Picture     | Field Edits                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----------|------------------------------|-----------|------|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 66        | Price Indicator              | 360       | 1    | X(01)       | This field must equal 'A', 'E' or 'H'.<br>'A' = Additional Price: If the additional price has not been released, DAS will validate to the established price.<br>'E' = Established Price<br>'H' = Harvest Price causes indemnity to exceed SCP Limit. For plans 25, 42, 44. Plan codes 30, 55, 70, 84, & 90 can be 'A' or 'E'.<br>Plan Code 90, Hawaii Tropical Fruit (crops 0255, 0256 & 0257), indicator must equal 'E'. All other Plan codes must = 'E'. |
| 67        | Loss Adjuster Signature Date | 361       | 8    | 9(08)       | Required, unless Simplified Claim Flag (field 45) = 'S' or 'R'. Date that Loss Adjuster settled claim. MMDDCCYY format.<br>If Plan = 12, 13, 14, or 73, zero fill.                                                                                                                                                                                                                                                                                         |
| 68        | Notice of Loss Date          | 369       | 8    | 9(08)       | Required. Date that insured provided first notice of loss. MMDDCCYY format. Cannot exceed submission date.<br>If Plan = 12, 13, 14 or 73, zero fill.<br>See Note 5 at end of record.                                                                                                                                                                                                                                                                       |
| 69        | Primary Date of Damage       | 377       | 8    | 9(08)       | Required. Day is optional-The format is (MM00CCYY). Unless the cause of loss = "13, 14, 21, 41, 42, 51, 63, 64, 91, 92, 95, 97 or 98" enter MMDDCCYY. If plan = "12, 13, 14 or 73" must be month of final payment. The Primary <b>OR</b> Secondary Date must be before Notice of Loss date.                                                                                                                                                                |
| 70        | Primary Cause                | 385       | 2    | 9(02)       | Must have a valid cause of loss<br>(See Exhibit 21-2) Plan 12, 13, 14 or 73 = 55.                                                                                                                                                                                                                                                                                                                                                                          |
| 71        | Primary Percent              | 387       | 3    | 9(01)V9(02) | Must be 0.50 – 1.00 if Primary Cause > "0".<br>Must be "0" if plan = "12, 13, 14 or 73".                                                                                                                                                                                                                                                                                                                                                                   |
| 72        | Secondary Date of Damage     | 390       | 8    | 9(08)       | Day is optional. The format is (MM00CCYY), unless the cause of loss = "13, 14, 21, 41, 42, 51, 63, 64, 91, 92, 95, 97 or 98" enter MMDDCCYY. The Primary <b>OR</b> Secondary Date must be before Notice of Loss date.<br>If Plan = 12, 13, 14 or 73, zero fill.                                                                                                                                                                                            |
| 73        | Secondary Cause              | 398       | 2    | 9(02)       | Must have a valid cause of loss<br>(See Exhibit 21-2) If Plan = 12, 13, 14, or 73, zero fill.                                                                                                                                                                                                                                                                                                                                                              |
| 74        | Insured's Signature Date     | 400       | 8    | 9(08)       | Required: Format is MMDDCCYY<br>Cannot exceed submission date. Cannot be less than Notice of Loss Date (field 68).                                                                                                                                                                                                                                                                                                                                         |

**(LOSS LINE – TYPE 21)****Format/Edits**

| Field No. | Field Name                          | Begin Pos | Size | Picture     | Field Edits                                                                                                                                                                                                                                                                                                                                                                         |
|-----------|-------------------------------------|-----------|------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 75        | Second Crop Waived Indemnity        | 408       | 10   | S9(10)      | If the Multi Cropping Flag = 'SW' this field must = the calculated indemnity for the crop/plan (See exhibit 21-10 for calculation)                                                                                                                                                                                                                                                  |
| 76        | Large Claim Flag                    | 418       | 1    | X(01)       | If the record is part of a potential claim on the eligible crop insurance contract, which is likely to exceed \$500,000, this field must be:<br>N= AIP notified RMA of excessive Indemnity and RMA did not participate in loss determinations<br>R = RMA participated in loss determinations, else spaces                                                                           |
| 77        | Settlement Flag                     | 419       | 1    | X(01)       | Values are:<br>A = Settlement by arbitration<br>M = Settlement by mediation<br>O = Other settlement process<br>Spaces = Not applicable                                                                                                                                                                                                                                              |
| 78        | Misreported Information Factor      | 420       | 7    | 9(01)V9(06) | See the LAM, page 34 for Calculation Formula. Factor will be same value for all records of a unit by payment type. 1.000000 fill if not applicable.                                                                                                                                                                                                                                 |
| 79        | Last Notice of Loss Date            | 427       | 8    | 9(08)       | Format (MMDDCCYY)<br>Cannot exceed submission date.<br>If plan 12, 13, 14, or 73, zero fill.                                                                                                                                                                                                                                                                                        |
| 80        | Common Option Codes                 | 435       | 20   | X(20)       | Applicable Option Codes from the Corresponding T-11 record.<br>Must be left justified.<br>Spaces = Not applicable.                                                                                                                                                                                                                                                                  |
| 81        | Written Agreement Multi Year Flag   | 455       | 1    | X(01)       | Internal Use. Must be a space.<br>Will be populated with Y, N or a space if there is no Written agreement.<br>Y - This is the initial year of the multi year written agreement and the WA approval date is used to calculate fund cutoff.<br>N – This is not the initial year of the multi year written agreement and the sales closing date will be used to calculate fund cutoff. |
| 82        | Unit Liability Flag                 | 456       | 1    | X(01)       | Values are:<br>O = Original Unit Liability (field 97 on the T-11)<br>R = Revised Unit Liability<br>Indicates which Unit Liability from the corresponding T-11 Unit is being used to calculate the LAF & MIF.<br>Spaces = Not Applicable                                                                                                                                             |
| 83        | Filler                              | 457       | 86   | X(86)       | Must be spaces.                                                                                                                                                                                                                                                                                                                                                                     |
| 84        | Ineligible Tracking Validation Flag | 543       | 8    | X(08)       | Internal Use. Reserved.                                                                                                                                                                                                                                                                                                                                                             |

| Field No. | Field Name                  | Begin Pos | Size | Picture | Field Edits                                                                                                                |
|-----------|-----------------------------|-----------|------|---------|----------------------------------------------------------------------------------------------------------------------------|
| 85        | FCIC Control Time           | 551       | 4    | 9(04)   | Internal Use. The time the transaction batch file was received. (From when transmission started) HHMM Format.              |
| 86        | FCIC Control Date           | 555       | 8    | 9(08)   | Internal Use. The date the transaction batch file was received. (From when transmission started) MMDDCCYY Format.          |
| 87        | Reinsurance Year            | 563       | 4    | 9(04)   | Internal Use. The Reinsurance Year. CCYY format.                                                                           |
| 88        | Batch Number                | 567       | 4    | 9(04)   | Internal Use. The sequential number identifying the file that was submitted by the RO to FCIC/RMA.                         |
| 89        | Transaction Sequence Number | 571       | 8    | 9(08)   | Internal Use. The sequential number assigned to each transaction number processed by DAS <u>after it has been sorted</u> . |
| 90        | Transaction Rejected Flag   | 579       | 1    | X(01)   | Internal Use. Reserved.                                                                                                    |
| 91        | Transaction Source Flag     | 580       | 1    | X(01)   | Internal Use. Reserved.                                                                                                    |
| 92        | Filler                      | 581       | 20   | X(20)   | Internal Use.                                                                                                              |

**Note 1:**

The Type 21 record must contain the record number of the corresponding Type 11 record. The Type 11 record must match the Type 21 on:  
Fields 2 thru 13 and field 28.

Requires an accepted 11 record.

**Note 2:**

If any of the T-21 records within a unit has a Multi Cropping Code of 'IR' and there are other T-21 lines with any of the following codes (DC, FC, WI, SC, NS, RI) then sum the Indemnities of the lines with any of the codes in parenthesis, and if the sum of these lines is less than or equal to 0, then apply .35 to all of the lines in the unit except any line with a Multi Cropping Code of 'SW' or any line with a Guarantee Reduction Flag of 'P' or 'E' and require that the Multi Cropping Exception Flag have an 'X' on these same lines. The lines with DC, FC, WI, SC, NS, RI would normally be calculated at 100% Indemnity unless this exceptions exists.

**Note 3:**

n/a

**Note 4:**

For a Denied Claim Record being submitted to RMA the following fields must be populated:  
1 Record Type, 2 AIP, 3 Location State, 5 Policy Number, 6 Crop Year, 7 Crop Code, 8 Ins. Plan, 9 Location County, 10 Unit Number, 11 Type Code, 12 Practice, 13 Coverage Flag, 14 Claim Number, 18 Record Number, 20 Adjuster SSN, 22 Stage Code (DC), 25 Determined Acres, 55 Number of Trees, 67 Loss Adjuster Signature Date, 68 First Notice of Loss Date.

**Note 5:**

The Type 21 date entries in fields 68 and 79 Notice of Loss dates are required only for the cause(s) of loss reported on the record. One of the Dates of Damage must be on or before the Notice of Loss date – field 68.