

United States  
Department of  
Agriculture



Federal Crop  
Insurance  
Corporation



Product  
Administration &  
Standards Division

# **PROCESSING PUMPKIN LOSS ADJUSTMENT STANDARDS HANDBOOK**

FCIC-20100 (11-2010)

**2011 and Succeeding Crop Years**



UNITED STATES DEPARTMENT OF AGRICULTURE  
WASHINGTON, D.C. 20250

<b>FEDERAL CROP INSURANCE HANDBOOK</b>	<b>NUMBER: 20100</b>			
<b>SUBJECT:</b>  <b>PROCESSING PUMPKIN LOSS ADJUSTMENT STANDARDS HANDBOOK 2011 AND SUCCEEDING CROP YEARS</b>	<b>OPI: Product Administration &amp; Standards Division</b>			
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><b>Approved:</b></td> <td style="width: 50%;"><b>Date:</b></td> </tr> <tr> <td>/s/ <i>Tim B. Witt</i> Deputy Administrator, Product Management</td> <td><i>November 23, 2010</i></td> </tr> </table>	<b>Approved:</b>	<b>Date:</b>	/s/ <i>Tim B. Witt</i> Deputy Administrator, Product Management
<b>Approved:</b>	<b>Date:</b>			
/s/ <i>Tim B. Witt</i> Deputy Administrator, Product Management	<i>November 23, 2010</i>			

**THIS HANDBOOK CONTAINS THE OFFICIAL FCIC-ISSUED LOSS ADJUSTMENT STANDARDS FOR THIS CROP FOR THE 2011 AND SUCCEEDING CROP YEARS. ALL REINSURED COMPANIES WILL UTILIZE THESE STANDARDS FOR BOTH LOSS ADJUSTMENT AND LOSS TRAINING.**

**SUMMARY OF CHANGES/CONTROL CHART**

The following list contains significant changes to this handbook, as determined by us. It may not represent all changes made. All changes made to this handbook are applicable regardless of whether or not listed.

Major Changes: See changes or additions in text, which have been **highlighted**. Three stars (\*\*\*) identify where information has been removed.

Changes for Crop Year 2011 (FCIC 20100) issued **November 2010:**

- A. Throughout handbook: Made editorial and syntax changes so handbook text tracks with current RMA-approved handbook formatting, and updated examples and forms as needed.
- B. Throughout the handbook: Comments that pertained to grammar, punctuation, deleting unneeded words, rewording to make a sentence flow better, corrections of reference numbers, formatting, etc. were incorporated if accepted, but are not listed.
- C. **Subsection 2 B (3)** – Added abbreviation for “Actual Production History” (APH), “Basic Provisions” (BP), “Crop Provisions” (CP), and “Special Provisions” (SP).
- D. **Subsection 8 C** – Inserted new production worksheet and completion instructions.
- E. **Subsection 8 C** – Incorporated revised production worksheet example to reflect the new production worksheet.

# PROCESSING PUMPKIN LOSS ADJUSTMENT STANDARDS HANDBOOK

## SUMMARY OF CHANGES/CONTROL CHART (Continued)

Control Chart For: Processing Pumpkin Loss Adjustment Standards Handbook						
	SC Page(s)	TC Page(s)	Text Pages	Reference Material	Date	Directive Number
Remove	Entire Handbook					
Current Index	1-2	1-2	1-25	27	11-2010	FCIC-20100

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# 1. INTRODUCTION

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**THIS HANDBOOK MUST BE USED IN CONJUNCTION WITH THE LOSS ADJUSTMENT MANUAL (LAM) STANDARDS HANDBOOK, FCIC-25010.**

The FCIC-issued loss adjustment standards for this crop are the official standard requirements for adjusting losses in a uniform and timely manner. The FCIC-issued standards for this crop and crop year are in effect as of the signature date for this crop handbook at [www.rma.usda.gov/handbooks/25000/index.html](http://www.rma.usda.gov/handbooks/25000/index.html). All **Approved Insurance Providers (AIPs)** will utilize these standards for both loss adjustment and loss **adjustment** training for the applicable crop year. These standards, which include crop appraisal methods, claims completion instructions, and form standards, supplement the general (not crop-specific) loss adjustment standards identified in the LAM.

## 2. SPECIAL INSTRUCTIONS

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This handbook remains in effect until superseded by reissuance of **either** the entire handbook **or** selected portions (through slipsheets or bulletins). If slipsheets have been issued for a handbook, the original handbook as amended by slipsheet pages shall constitute the handbook. A bulletin can supersede either the original handbook or subsequent slipsheets.

### A. DISTRIBUTION

- (1) The following is the minimum distribution of forms completed by the adjuster and signed by the insured (or the insured's authorized representative) for the loss adjustment inspection.
- (2) One legible copy to insured. The original and all remaining copies as instructed by the AIP. It is the AIP's responsibility to maintain original insurance documents relative to policyholder servicing as designated in their approved plan of operations.

### B. TERMS, ABBREVIATIONS, AND DEFINITIONS

- (1) Terms, abbreviations, and definitions **general** (not crop specific) to loss adjustment are identified in the LAM.
- (2) Terms, abbreviations, and definitions **specific** to processing pumpkin loss adjustment and this handbook, which are not defined in this section, are defined as they appear in the text.
- (3) Abbreviations:

<b>APH</b>	Actual Production History
<b>BP</b>	Basic Provisions
<b>CAT</b>	Catastrophic Risk Protection
<b>CIH</b>	Crop Insurance Handbook
<b>CP</b>	Crop Provisions
<b>DSSH</b>	Document and Supplemental Standards Handbook, FCIC-24040
<b>SP</b>	Special Provisions

(4) Definition(s):

<b>Base Contract Price</b>	The price stipulated in the processor contract without regard to discounts or incentives that may apply.
<b>Bypassed Acreage</b>	Land on which production is ready for harvest but the processor elects not to accept such production so it is not harvested.
<b>Harvest</b>	The removal of pumpkins from the vine for the purpose of delivery to the processor.
<b>Planted Acreage</b>	In addition to the definition contained in the <b>BP</b> , pumpkins must initially be planted in rows far enough apart to permit mechanical cultivation. Acreage planted in any other manner will not be insurable unless otherwise provided by the <b>SP</b> .
<b>Processor Contract</b>	<p>A written agreement between the producer and a processor, containing at a minimum:</p> <ul style="list-style-type: none"><li>(a) The producer's commitment to plant and grow processing pumpkins, and to deliver the pumpkin production to the processor;</li><li>(b) The processor's commitment to purchase all of the production stated in the processor contract; and</li><li>(c) A base contract price</li></ul> <p>Multiple contracts with the same processor that specify amounts of production will be considered as a single processor contract.</p>
<b>Usable Tons</b>	The quantity of pumpkins for which the producer is compensated or should have been compensated in accordance with the processor contract.

### **3. INSURANCE CONTRACT INFORMATION**

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The AIP is to determine that the insured has complied with all policy provisions of the insurance contract. **CP**, which are to be considered in this determination include (but are not limited to):

#### **A. INSURABILITY**

The following may not be a complete list of insurability requirements. Refer to the **BP**, **CP**, and **SP** for a complete list.



- (1) The crop insured will be all the processing pumpkins in the county for which a premium rate is provided by the actuarial documents:
  - (a) In which the insured has a share; and
  - (b) That is grown under, and in accordance with, the requirements of a processor contract executed on or before the acreage reporting date and are not excluded from the processor contract at any time during the crop year.
- (2) Unless allowed in the **SP**, processing pumpkins are not insurable if they are:
  - (a) Interplanted with another crop; or
  - (b) Planted into an established grass or legume.
- (3) Any acreage of the insured crop that is damaged before the final planting date, to the extent that the majority of producers in the area would normally not further care for the crop, must be replanted unless the AIP agrees that it is not practical to replant. Refer to the LAM for replanting provision issues.
- (4) Insurance is not provided on any acreage of processing pumpkins that do not meet crop rotation requirements, if applicable, contained in the **SP**.

**B. INSURABLE ACREAGE**

For information regarding insurable acreage for processor contracts, refer to the LAM.

**C. GUIDELINES RELATIVE TO “BYPASSED” PROCESSING PUMPKIN ACREAGE**

Refer to the LAM for guidelines relative to “Bypassed Acreage.”

**D. PRODUCTION IN EXCESS OF AMOUNT UNDER CONTRACT**

For processor contracts that stipulate the amount of production to be delivered, all production from any basic unit in excess of the amount under contract will be included as production to count if such production is applied to any other basic unit for which the contracted amount has NOT been fulfilled.

**E. PROVISIONS AND PROCEDURES NOT APPLICABLE TO CAT COVERAGE**

Refer to the CIH and LAM for other provisions and procedures not applicable to CAT.

## **F. UNIT DIVISION**

Refer to the insurance contract for unit provisions. Unless limited by the **CP** or **SP**, a basic unit, as defined in the **BP**, may be divided into optional units if, for each optional unit, all the conditions stated in the applicable provisions are met.

- (1) For any processor contract that stipulates the number of acres to be planted, the provisions contained in section 34 of the **BP** will apply.
- (2) For processor contracts that stipulate the amount of production to be delivered, refer to the **CP**.
  - (a) There will be no more than one basic unit for all production contracted with each processor; and
  - (b) Provisions in the **BP** that allow optional units by section, section equivalent, or FSA farm serial number and by irrigated and non-irrigated practices are not applicable.

## **4. PROCESSING PUMPKIN APPRAISALS**

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### **A. GENERAL INFORMATION**

Potential production for all types of inspections will be appraised in accordance with procedures specified in this handbook and the LAM.

### **B. SELECTING REPRESENTATIVE SAMPLES FOR APPRAISALS**

- (1) Determine the minimum number of required samples for a field or subfield by the field size, the average stage of growth, age (size) and general capabilities of the plants, and variability of potential production and plant damage within the field or subfield.
- (2) Split the field into subfields when:
  - (a) Variable damage causes the crop potential to appear to be significantly different within the same field; or
  - (b) The insured wishes to destroy a portion of a field.
- (3) Each field or subfield must be appraised separately.
- (4) Take not less than the minimum number (count) of representative samples required in **TABLE A** for each field or subfield.
- (5) For processing pumpkins, each sample equals a ten foot square grid (100 square feet).

## **5. APPRAISAL METHODS**

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### **A. GENERAL INFORMATION**

These instructions provide information on appraisal methods for:

<b>Appraisal Method...</b>	<b>Use...</b>
Mature Processing Pumpkin Appraisal	When pumpkins have reached maturity.

### **B. DEFERMENT OF PROCESSING PUMPKIN APPRAISALS BEFORE MATURITY**

- (1) Defer all appraisals until the earlier of the date the crop reaches maturity or the calendar date for the end of the insurance period unless there is no production potential. If there is no production potential, enter "0" appraised potential in the applicable entry on the Claim Form and complete the claim.
- (2) Complete the preliminary inspection and document the cause of damage, its severity, and whether it is insurable or uninsurable.
- (3) If acreage will be released to go to another use:
  - (a) Look at all fields thoroughly. It is important to note the acreage that is not damaged.
  - (b) Explain to the insured that, at this time, the amount of loss cannot be determined accurately.
  - (c) Do not attempt to estimate damage for the insured.
  - (d) Mark an area (or areas) in the field that can be used as a representative sample(s). The area should be at least ten feet wide and extend the entire length of the field, as specified in the policy.
  - (e) Advise the insured that if the crop is destroyed, the specified samples must be preserved and cared for.
- (4) Refer to the LAM for additional instructions regarding deferred appraisals.

### **C. MATURE PROCESSING PUMPKIN APPRAISAL**

- (1) Pick all harvestable pumpkins and determine the weight of each sample in pounds to tenths.

- (2) Multiply the sample area size dimensions (e.g. 10' x 10') to obtain the square footage area in the sample. Divide 43,560 by the result and then divide that result by 2000 to determine the acreage factor. Record results in hundredths.

**EXAMPLE:**  $43,560 \div 100 \div 2000 = 0.22$ .

- (3) Total the sample weights and divide by the number of samples taken. The result is the average number of pounds per sample.
- (4) Weights are converted to tons, to tenths, per acre by multiplying the average weight per sample by the acreage factor for the area sampled.

## **6. APPRAISAL DEVIATIONS AND MODIFICATIONS**

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### **A. DEVIATIONS**

Deviations in appraisal methods require RMA written authorization (as described in the LAM) prior to implementation.

### **B. MODIFICATIONS**

There are no pre-established appraisal modifications contained in this handbook. Refer to the LAM for additional information.

## **7. APPRAISAL WORKSHEET ENTRIES AND COMPLETION PROCEDURES**

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### **A. APPRAISAL WORKSHEET FORM STANDARDS**

- (1) The entry items in section 7C are the minimum requirements for the Processing Pumpkin Appraisal Worksheet. All entry items are “Substantive,” (i.e., they are required).
- (2) Appraisal worksheet completion instructions. The completion instructions for the required entry items on the appraisal worksheet in the following sections are “Substantive,” (i.e., they are required.)
- (3) The Privacy Act and Non-Discrimination statements are required statements that must be printed on the form or provided to the insured as a separate document. These statements are not shown on the example form in this section. The current Non-Discrimination Statement and Privacy Act Statement can be found on the RMA website at <http://www.rma.usda.gov/regs/required.html> or successor website.
- (4) Refer to the DSSH for other crop insurance form requirements (e.g., font point size, etc.).

## **B. GENERAL INFORMATION FOR WORKSHEET ENTRIES AND COMPLETION INSTRUCTIONS**

- (1) Include the AIP's name in the appraisal worksheet title if not preprinted on the AIP's worksheet, when a worksheet entry is not provided.
- (2) Include the claim number on the appraisal worksheet (when required by the AIP), when a worksheet entry is not provided.
- (3) Separate appraisal worksheets **must be completed** for each unit appraised (**applicable to preliminary and final claims**). Refer to section 5, **herein**, for sampling requirements.
- (4) Use separate lines to record uninsured cause of loss appraisals.
- (5) For every inspection, complete items 1 through 4 and items 22 through 26. Complete Part I and II as instructed below.
- (6) Standard appraisal worksheet items are numbered consecutively in section 8C below. Example appraisal worksheets are provided to illustrate how to complete all entries, except the last three items on the appraisal worksheet.

## **C. WORKSHEET ENTRIES AND COMPLETION INFORMATION**

Verify or make the following entries:

<b><u>Item No.</u></b>	<b><u>Information Required</u></b>
------------------------	------------------------------------

**Company Name:** Name of AIP, if not preprinted on the worksheet. (Company Name).

**Claim No.:** Claim number as assigned by the AIP.

1. **Insured's Name:** Name of the insured that identifies EXACTLY the person (legal entity) to whom the policy is issued.

2. **Policy No.:** Insured's assigned policy number.

3. **Crop Year:** Four-digit crop year, as defined in the policy, for which the claim **is** filed.

\*\*\*4. **Unit No.:** Unit number from the Summary of Coverage after it is verified to be correct.

5. **Cause of Damage:** Name of insured cause(s) of loss for this crop as listed in the LAM. If it is evident that no indemnity is due, enter "NONE." If an insured cause of loss is coded as "Other," explain in the "Remarks" (item 16).

6. **Land Location:** Identify land location (e.g., legal description, FSA Farm serial number, FSA CLU/tract number, etc.).

7. **Field ID:** Field identification symbol.

8. **Plot Acres:** Number of determined acres, to tenths, in field or sub-field being appraised.
9. **Type Code:** Three-digit type code number, entered exactly as specified on the actuarial documents, for the type grown by the insured. If “No Type Specified,” enter appropriate three-digit type code number from the actuarial documents (e.g., 997). Enter the type code name, as shown on the SP, in the “Remarks” (item 16).
10. **Cropping Practice:** Three-digit code number, entered exactly as specified on the actuarial documents for the cropping practice (or practice) carried out by the insured. If “No Cropping Practice Specified” or “No Practice Specified” is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). Enter the cropping practice name, as shown on the SP, in the “Remarks” (item 16).
11. **Sample Weight in Pounds:** Weight of each sample in pounds to tenths. Use separate lines to record production damaged by insured and uninsured causes. Use the same field identification, if appropriate, and for the line containing the uninsured cause of loss appraisal also enter the letter “P.” Explain the reason for any uninsured cause of loss appraisals in the Remarks.
12. **Total All Samples:** Sum of all sample weights recorded in item 10.
13. **No. of Samples:** Number of samples taken in item 10.
14. **Avg. No. of Pounds Per Sample:** Divide “Total From All Samples” (item 11) by “Number of Samples” (item 12) to calculate the “Average No. of Pounds Per Sample,” rounded to tenths.
15. **Factor:** If the standard 10’ x 10’ sample size is used, enter 0.22. If the standard 10’ x 10’ sample size is not used, refer to section 5C(2) for instructions to calculate the appropriate acreage factor.
16. **Appraisal Per Acre:** Tons per acre for the field or subfield, to the nearest tenth. “Average No. of Pounds Per Sample” (item 13) X “Factor” (item 14). Transfer the per acre appraisals to the Production Worksheet, Part I, column 31 for insured cause of loss appraisals, and to column 37 for uninsured cause of loss appraisals.
17. **Remarks:** Remarks pertinent to the appraisal, sampling, or conditions in general (e.g. – very hot dry, type of pumpkins, explain the reason for any uninsured causes of loss appraisals, etc.). If more space is needed use a Special Report.

**The following required entries are not illustrated on the appraisal worksheet example below.**

- 18. Insured's Signature and Date:** Insured's (or insured's authorized representative) signature and date. BEFORE obtaining insured's signature, REVIEW ALL ENTRIES on the Appraisal Worksheet WITH THE INSURED (or insured's authorized representative), particularly explaining codes, etc., which may not be readily understood.
- 19. Adjuster's Signature, Code No., and Date:** Signature of adjuster, code number, and date signed after the insured (or insured's authorized representative) has signed. If the appraisal is performed prior to signature date, document the date of the appraisal in the Remarks section of the Appraisal Worksheet (if available); otherwise, document the appraisal date in the "Narrative" of the Production Worksheet.
- 20. Page:** Page numbers (Example: Page 1 of 1, Page 1 of 2, Page 2 of 2, etc.).

COMPANY NAME: ANY COMPANY

CLAIM NO: XXXXXXXX

<b>APPRAISAL WORKSHEET PROCESSING PUMPKIN Mature Stage</b> (For Illustration Purposes Only)	1. INURED'S NAME I.M. INSURED	2. POLICY NO XXXXXXX	3. CROP YEAR YYYY
	4. UNIT NO 0001-0001-BU	5. CAUSE(S) OF DAMAGE FREEZE	6. LAND LOCATION FSN 10

FIELD ID 7.	PLOT ACRES 8.	TYPE CODE 9.	CROPPING PRACTICE 10.	SAMPLE WEIGHT IN POUNDS 11.						TOTAL FROM ALL SAMPLES 12.	NO. OF SAMPLES 13.	AVG. NO. OF POUNDS PER SAMPLE 14.	FACTOR 15.	PRODUCTION IN TONS 16.
										÷	=	X	=	
1A	20.0	102	002	64.3	60.9	59.0	62.4	60.8	307.4	5	61.5	0.22	13.5	
1D	20.0	102	002	60.4	52.8	58.6	57.2	59.6	288.6	5	57.7	0.22	12.7	
									÷	=	X	=		
									÷	=	X	=		
									÷	=	X	=		
									÷	=	X	=		
									÷	=	X	=		

17. REMARKS

Type Code No. – Processing  
Cropping Practice – Irrigated

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.).



## **8. CLAIM FORM ENTRIES AND COMPLETION PROCEDURES**

### **A. CLAIM FORM STANDARDS**

- (1) The entry items in section 8C are the minimum Claim Form (hereafter referred to as “Production Worksheet”) requirements. All of these entry items are considered “Substantive,” (i.e., they are required.)
- (2) Production Worksheet completion instructions. The completion instructions for the required entry items on the Production Worksheet in the following sections are “Substantive,” (i.e., they are required.)
- (3) The Privacy Act and Non-Discrimination statements are required statements that must be printed on the form or provided **to the insured** as a separate document. These statements are not shown in the example form in this section. The **current** Non-Discrimination Statement and **Privacy Act Statement** can be found **on the RMA website at <http://www.rma.usda.gov/regs/required.html> or successor website.**
- (4) The certification statement required by the current DSSH must be included on the form directly above the insured’s signature block and immediately followed by the statement below.

“I understand the certified information on this Production Worksheet will be used to determine my loss, if any, to the above unit. The AIP may audit and approve this information and supporting documentation. The Federal Crop Insurance Corporation, an agency of the United States, subsidizes and reinsures this crop insurance.”

- (5) Refer to the DSSH for other crop insurance form requirements (e.g., point size of font, etc.)

### **B. GENERAL INFORMATION FOR **WORKSHEET** ENTRIES AND COMPLETION INSTRUCTIONS**

- (1) The Production Worksheet is a progressive form containing all notices of damage for all preliminary and final inspections, **including “No Indemnity Due” claims,** on a unit.
- (2) If a Production Worksheet has been prepared on a prior inspection, verify each entry and enter additional information as needed. If a change or correction is necessary, strike out all entries on the line and re-enter correct entries on a new line. The adjuster and insured should initial any line deletions.
- (3) Refer to the LAM for instructions regarding the following:
  - (a) Acreage report errors.
  - (b) Delayed notices and delayed claims.
  - (c) Corrected claims or fire losses (double coverage) and cases involving uninsured causes of loss, unusual situations, controversial claims, concealment, or misrepresentation.

- (d) Claims involving a Certification Form (when all the acreage on the unit has been appraised to be put to another use or other reasons described in the LAM).
  - (e) “No Indemnity Due” claims (which must be verified by an APPRAISAL or NOTIFICATION from the insured that the production exceeded the guarantee).
  - (f) Certification Forms for release of acreage for other use will not be used since claims cannot be completed until an appraisal of mature production is done using representative samples.
  - (g) A late planting period is not applicable to processing pumpkins unless allowed by the **SP**.
- (4) The prevented planting provisions contained in the **BP** are not applicable to processing pumpkins.
  - (5) The adjuster is responsible for determining if any of the insured’s requirements under the notice and claim provisions of the policy have not been met. If any have not, the adjuster should contact the AIP.
  - (6) Instructions labeled “**PRELIMINARY**” apply to preliminary inspections only. Instructions labeled “**FINAL**” apply to final inspections only. Instructions not labeled apply to ALL inspections.
  - (7) If the AIP determines the claim is to be DENIED, refer to paragraph 67K of the LAM for Production Worksheet completion instructions.

**C. FORM ENTRIES AND COMPLETION INFORMATION**

Verify or make the following entries:

**Item**

**No.      Information Required**

- 1.      **Crop/Code #:** “Processing Pumpkins” **(0147)**.
- \*\*\*2.      **Unit #:** Unit number from the Summary of Coverage after it is verified to be correct.
- 3.      **Location Description:** Land location that identifies the legal description, if available, and the location of the unit (e.g., section, township, and range; FSA Farm Numbers; FSA Common Land Units (CLU) and tract numbers; GPS identifications; or Grid identifications) as applicable for the crop.
- 4.      **Date(s) of Damage:** First three letters of the month(s) during which the determined insured damage occurred for the inspection and cause(s) of loss listed in item 5 below. If no entry in item 5 below, MAKE NO ENTRY. For progressive damage, enter in chronological order the month that identifies when the majority of the insured damage occurred. Include the SPECIFIC DATE where applicable as in the case of hail damage (e.g., Aug 11). Enter additional dates of damage in the extra spaces, as needed. If more space is needed, document

the additional dates of damage in the “Narrative” (or on a Special Report). Refer to the illustration in item 6 below.

If there is no insurable cause of loss and a no indemnity due claim will be completed, MAKE NO ENTRY.

5. **Cause(s) of Damage:** Name of the determined insured cause(s) of damage for this crop as listed in the LAM for the date of damage listed in item 4 above for this inspection. If an insured cause(s) of damage is coded as “Other,” explain in the “Narrative.” Enter additional causes of damage in the extra spaces, as needed. If more space is needed, document the additional determined insured causes of damage in the “Narrative” (or on a Special Report). Refer to the illustration in item 6 below.

If it is evident that no indemnity is due, enter “NO INDEMNITY DUE” across the columns in Item 5 (refer to the LAM for more information on no indemnity due claims).

6. **Insured Cause %:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Whole percent of damage for the insured cause of damage listed in item 5 above for this inspection. Enter additional “Insured Cause %” in the extra spaces, as needed. If additional space is needed, enter the additional determined “Insured Cause %” in the “Narrative” (or on a Special Report). The total of all “Insured Cause %” including those entered in the “Narrative” must equal 100%.

If there is no insurable cause of loss, and a no indemnity due claim will be completed, MAKE NO ENTRY.

Example entries for items 4-6 and the “Narrative,” reflecting entries for multiple dates of damage, the corresponding insured causes of damage and insured cause percents:

4. Date(s) of Damage	SEP	SEP 15	OCT
5. Cause(s) of Damage	EX PRECIP	HAIL	FREEZE
6. Insured Cause %	10	15	55
Narrative: Additional date of damage – OCT 15; Cause of Damage – Freeze; Insured cause percent - 20%.			

7. **Company/Agency:** Name of company and agency servicing the contract.
8. **Name of Insured:** Name of the insured that identifies EXACTLY the person (legal entity) to whom the policy is issued.
9. **Claim #:** Claim number as assigned by the AIP.
10. **Policy #:** Insured’s assigned policy number.
11. **Crop Year:** Four-digit crop year, as defined in the policy, for which the claim is filed.

12. **Additional Units:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Unit number(s) for ALL non-loss units for the crop at the time of final inspection. A non-loss unit is any unit for which a Production Worksheet has not been completed. Additional non-loss units may be entered on a single Production Worksheet.

If more spaces are needed for non-loss units, enter the unit numbers, identified as “Non-Loss Units,” in the “Narrative” or on an attached Special Report.

13. **Est. Prod. Per Acre:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Estimated yield per acre, in tons, to tenths, of all non-loss units for the crop at the time of final inspection.

14. **Date(s) Notice of Loss:**

**PRELIMINARY:**

- a. Date the first or second notice of damage or loss was given for the unit in item 2, in the 1st or 2nd space, as applicable. Enter the complete date (MM/DD/YYYY) for each notice.
- b. A notice of damage or loss for a third preliminary inspection (if needed) requires an additional set of Production Worksheets. Enter the date of notice for a third preliminary inspection in the 1st space of item 14 on the second set of Production Worksheets.
- c. Reserve the “Final” space on the first page of the first set of Production Worksheets for the date of notice for the final inspection.
- d. If the inspection is initiated by the AIP, enter “Company Insp.” instead of the date.
- e. If the notice does not require an inspection, document as directed in the “Narrative” instructions.

**FINAL:** Transfer the last date (in the 1st or 2nd space from the first or second set of Production Worksheets) to the FINAL space on the first page of the first set of Production Worksheets) if a final inspection should be made as a result of the notice. Always enter the complete date of notice (MM/DD/YYYY) for the “FINAL” inspection in the final space on the first set of production worksheets. For a delayed notice of loss or delayed claim, refer to the LAM.

15. **Companion Policy(s):**

- a. If no other person has a share in the unit (insured has 100 percent share), MAKE NO ENTRY.
- b. In all cases where the insured has LESS than a 100 percent share of a loss-affected unit, ask the insured if the OTHER person sharing in the unit has a multiple-peril crop insurance contract (i.e., not crop-hail, fire, etc.). If the other person does not, enter “NONE.”
  - (1) If the other person has a multiple-peril crop insurance contract and it can be determined that the SAME AIP services it, enter the contract number. Handle these companion policies according to AIP instructions.
  - (2) If the OTHER person has a multiple-peril crop insurance contract and a DIFFERENT AIP or agent services it, enter the name of the AIP or agent (and contract number) if known.
  - (3) If unable to verify the existence of a companion contract, enter “Unknown” and contact the AIP for further instructions.
- c. Refer to the LAM for further information regarding companion contracts.

**SECTION I – DETERMINED ACREAGE APPRAISED, PRODUCTION AND ADJUSTMENTS**

Make separate line entries for varying:

- (1) Rate classes, types, class, sub-class, intended use, irrigated practice, cropping practice, or organic practices, as applicable;
- (2) APH yields;
- (3) Appraisals;
- (4) Stages or intended use(s) of acreage;
- (5) Shares (e.g., 50 percent and 75 percent shares on the same unit); or
- (6) Appraisals for damage due to hail or fire if Hail and Fire Exclusion is in effect.

**Verify or make the following entries:**

**Item**  
**No.**

**Information Required**

- \*\*\*16. **Field ID:** The field or subfield identification symbol from a sketch map or an aerial photo. Refer to the “Narrative” instructions.

**17. Multi-Crop Code:**

**PRELIMINARY AND FINAL:** The applicable two-digit code for first crop and second crop. REFER TO THE LAM FOR INSTRUCTIONS REGARDING ENTRY OF FIRST CROP AND SECOND CROP CODES.

\*\*\*18. **Reported Acres:** In the event of over-reported acres, handle in accordance with the individual AIP's instructions. In the event of under-reported acres, enter the reported acres to tenths for the field or sub field. If there are no under-reported acres MAKE NO ENTRY.

\*\*\*19. **Determined Acres:** Refer to the LAM for definition of acceptable determined acres used herein. Enter the determined acres to tenths for the field or subfield for which consent is given for other use and/or:

- a. Put to other use without consent;
- b. Abandoned;
- c. Damaged by uninsured causes;
- d. For which the insured failed to provide acceptable records of production.

Refer to the LAM for procedures regarding when estimated acres are allowed and documentation requirements.

**PRELIMINARY AND FINAL:** Determined acres to tenths. Acreage breakdowns WITHIN a unit or field may be estimated (refer to the LAM) if a determination is impractical.

**ACCOUNT FOR ALL PLANTED ACREAGE IN THE UNIT.**

20. **Interest or Share:** Insured's interest in the crop to three decimal places as determined at the time of inspection. If shares vary on the same UNIT, use separate line entries.

21. **Risk:** Three-digit code for the correct "Rate" specified on the actuarial document **maps**. If a "Rate" or "High Risk Area" is not specified on the actuarial document **maps**, make no entry. Verify with the Summary of Coverage and if the "Rate" is found to be incorrect, revise according to AIP's instructions. Refer to the LAM.

Unrated land is uninsurable without a written agreement.

22. **Type:** Three-digit code number, entered exactly as specified on the actuarial documents for the type grown by the insured. If "No Type Specified" is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If a type is not specified on the actuarial documents, MAKE NO ENTRY.

23. **Class:** Three-digit code number, entered exactly as specified on the actuarial documents for the class grown by the insured. If "No Class Specified" is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If a class is not specified on the actuarial documents, MAKE NO ENTRY.

24. **Sub-Class:** Three-digit code number, entered exactly as specified on the actuarial documents for the sub-class grown by the insured. If “No Sub-Class Specified,” is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If a sub-class is not specified on the actuarial documents, MAKE NO ENTRY.
25. **Intended Use:** Three-digit code number, entered exactly as specified on the actuarial documents for the intended use of the crop grown by the insured. If “No Intended Use Specified” is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If an intended use is not specified on the actuarial documents, MAKE NO ENTRY.
26. **Irr. Practice:** Three-digit code number, entered exactly as specified on the actuarial documents for the irrigated practice carried out by the insured. If “No Irrigated Practice Specified” is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If an irrigated practice is not specified on the actuarial documents, MAKE NO ENTRY.
27. **Cropping Practice:** Three-digit code number, entered exactly as specified on the actuarial documents for the cropping practice (or practice) carried out by the insured. If “No Cropping Practice Specified” or “No Practice Specified” is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If a cropping practice (or practice) is not specified on the actuarial documents, MAKE NO ENTRY.
28. **Organic Practice:** Three-digit code number, entered exactly as specified on the actuarial documents for the organic practice carried out by the insured. If “No Organic Practice Specified” is shown in the actuarial documents, enter the appropriate three-digit code number from the actuarial documents (e.g., 997). If an organic practice is not specified on the actuarial documents, MAKE NO ENTRY.

29. **Stage:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Stage abbreviation as shown below.

<u>STAGE</u>	<u>EXPLANATION</u>
“P” .....	Acres abandoned without consent, put to other use without consent, damaged solely by uninsured causes, or for which the insured failed to provide acceptable records of production, which are acceptable to the AIP.
“H” .....	Harvested.
“UH” .....	Unharvested or put to other use with consent.
“UB” .....	Acres bypassed, solely due to insured causes.
“PB” .....	Acres bypassed, solely due to uninsured causes.

**GLEANED ACREAGE:** Refer to the LAM for information on gleaning.

30. **Use of Acreage:** Use the following “Intended Use” abbreviations.

<u>USE</u>	<u>EXPLANATION</u>
“To Corn,” etc.....	Other use made of the acreage
“WOC” .....	Other use without consent
“SU” .....	Solely uninsured
“ABA” .....	Abandoned without consent
“H” .....	Harvested
“UH” .....	Unharvested
“Bypassed” .....	Bypassed by the processor

Verify any preliminary “Intended Use” entry. If the final use of the acreage was not as indicated, strike out the original line and initial it. Enter all data on a new line showing the correct “Final Use.”

**GLEANED ACREAGE:** Refer to the LAM for information on gleaning.

31. **Appraised Potential:** Enter the tons per acre, to tenths, from the appraisal worksheet for the field or subfield. Refer to section 5, “Appraisals Methods” for additional instructions.

If there is no potential on UH acreage, enter “0.” Refer to paragraph 85 in the LAM for procedures for documenting zero yield appraisals.

32a.-33. MAKE NO ENTRY.

34. **Production Pre QA:**

**PRELIMINARY, REPLANT, AND FINAL:** Result of multiplying column 31 times column 19 and round the result to tenths. If no entry in column 31, MAKE NO ENTRY.

35. **Quality Factor:** MAKE NO ENTRY

36. **Production Post QA:** Transfer entry from column 34.

37. **Uninsured Causes:**

**PRELIMINARY AND FINAL:** Result of per acre appraisal for uninsured causes (taken from appraisal worksheet or other documentation) multiplied by column 19, rounded in tons, to tenths. Refer to the LAM for information on how to determine uninsured cause appraisals. If no uninsured causes, MAKE NO ENTRY.

a. Hail and Fire exclusion NOT in effect.

- (1) Enter the result of multiplying column 19 entry by NOT LESS than the insured’s production guarantee per acre in tons, to tenths, for the line, (calculated by multiplying the elected coverage level percentage times the approved APH yield per acre shown on the APH form) for any “P” stage acreage.



- (2) On preliminary inspections, advise the insured to keep the harvested production from any acreage damaged SOLELY by uninsured causes separate from other production.
  - (3) For acreage that is damaged PARTLY by uninsured causes, enter the result of multiplying the APPRAISED UNINSURED loss of production per acre in tons, to tenths, by column 19 entry for any such acreage.
- b. Refer to the LAM when a Hail and Fire Exclusion is in effect and damage is from hail or fire.
  - c. Enter the result of adding uninsured cause appraisals to hail and fire exclusion appraisals.
  - d. For fire losses, if the insured also has other fire insurance (double coverage), refer to the LAM.

**38. Total to Count:**

**PRELIMINARY AND FINAL:** Result of adding item 36 and item 37.

**39. Total:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Total determined acres (column 19), to tenths.

**40. Quality:** Check "None."

**41. Mycotoxins exceed FDA, State, or other health organization maximum limits? MAKE NO ENTRY.**

**42. Totals:** Total of entries in columns 34, 36, 37 and 38. If a column has no entries, MAKE NO ENTRY.

#### **NARRATIVE:**

If more space is needed, document on a Special Report, and enter "See Special Report." Attach the Special Report to the Production Worksheet.

- a. If no acreage is released on the unit, enter "No acreage released," adjuster's initials, and date.
- b. If notice of damage was given and "No Inspection" is necessary, enter the unit number(s), "No Inspection," date, and adjuster's initials. The insured's signature is not required.
- c. Explain any uninsured causes, unusual, or controversial cases.
- d. If there is an appraisal in Section I, column 37 for uninsured causes due to hail/fire exclusion, show the original hail/fire liability per acre and the hail/fire indemnity per acre.

- e. Document the actual appraisal date if an appraisal was performed prior to the adjuster's signature date on the appraisal worksheet, and the date of the appraisal is not recorded on the appraisal worksheet.
- f. State that there is "No other fire insurance" when fire damages or destroys the insured crop and it is determined that the insured has no other fire insurance. Refer to the LAM.
- g. Explain any errors found on the Summary of Coverage.
- h. Explain any commingled production. Refer to the LAM.
- i. Explain any entry for "Production Not to Count" in Section II, column 62 and/or any production not included in Section II, column 56 or columns 49-52 entries (e.g., harvested production from uninsured acreage that can be identified separately from the insured acreage in the unit).
- j. Explain a "NO" checked in item 44, "Damage Similar to Other Farms in the Area?"
- k. Attach a sketch map or aerial photo to identify the total unit:
  - (1) If consent is or has been given to put part of the unit to another use;
  - (2) If uninsured causes are present; or
  - (3) For unusual or controversial cases.

Indicate on the sketch map or aerial photo, the disposition of acreage destroyed or put to other use with or without consent.
- l. Explain any difference between date of inspection and signature dates. For an ABSENTEE insured, enter the date of the inspection AND the date of mailing the Production Worksheet for signature.
- m. When any other adjuster or supervisor accompanied the adjuster on the inspection, enter the code number of the other adjuster or supervisor and the date of inspection.
- n. Explain the reason for a "No Indemnity Due" claim. "No Indemnity Due" claims are to be distributed in accordance with the AIP's instructions.
- o. Explain any delayed notices or delayed claims as instructed in the LAM.
- \*\*\*p. Document any authorized estimated acres, as instructed in the LAM, shown in Section I, column 19.
- q. Document the method and calculation used to determine acres for the unit. Refer to the LAM.
- r. Specify the type of insects or disease when the insured cause of damage or loss is listed as insects or disease. Explain why control measures did not work or if unavailable.

- s. Document the name and address of the charitable organization when gleaned acreage is applicable. Refer to the LAM for more information on gleaning.
- t. Document any other pertinent information, including any data to support any factors used to calculate the production. If on an attachment, enter “See attachment.”

## SECTION II – **DETERMINED** HARVESTED PRODUCTION

### GENERAL INFORMATION:

- (1) Account for ALL HARVESTED PRODUCTION (for ALL ENTITIES sharing in the crop) except production appraised BEFORE harvest and shown in Section I because the quantity cannot be determined later (e.g., released for other uses, etc.).
- (2) For production commercially stored, sold, etc., enter the name and address of the processor as applicable in columns 49 through 52.
- (3) If additional lines are necessary, the data may be entered on a continuation sheet. USE SEPARATE LINES FOR:
  - (a) Separate processor facilities.
  - (b) Varying shares; e.g., 50 percent and 75 percent shares on same unit.
  - (c) Varying types (if applicable), practices, guarantees, etc.
- (4) There will generally be no harvested production entries in columns 47 through 66 for preliminary inspections.
- (5) If there is harvested production from more than one insured practice (or type) and a separate approved APH yield has been established for each, the harvested production also must be entered on separate lines in column 47 through 66 by type or practice. If production has been commingled, refer to the LAM.

### Verify or make the following entries:

<u>Item No.</u>	<u>Information Required</u>
-----------------	-----------------------------

43.	<b>Date Harvest Completed: (Used to determine if there is a delayed notice or a delayed claim. Refer to the LAM.)</b>
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**PRELIMINARY: MAKE NO ENTRY.**

**FINAL:**

- a. The earlier of the date the ENTIRE acreage on the unit was (1) harvested, (2) totally destroyed, (3) put to other use, (4) a combination of harvested, destroyed, or put to other use, or (5) calendar date for the end of the insurance period.

- b. If at the time of final inspection (if prior to the end of the insurance period), there is any unharvested insured acreage remaining on the unit that the insured does not intend to harvest, enter **“Incomplete.”**
- c. If at the time of final inspection (if prior to the end of the insurance period), **none** of the insured acreage on the unit has been harvested, and the insured does not intend to harvest such acreage, enter **“No Harvest.”**
- d. If the case involves a Certification Form, enter the date from the Certification Form when the entire unit is put to another use, etc. Refer to the LAM.

**44. Damage Similar to Other Farms in the Area?:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Check “Yes” or “No.” Check “Yes” if the amount and cause of damage due to insurable causes is similar to the experience of other farms in the area. If “No” is checked, explain in the “Narrative.”

**45. Assignment of Indemnity?:** Check “Yes” only if an assignment of a indemnity is in effect for the crop year; otherwise, check “No.” Refer to the LAM.

**46. Transfer of Right to Indemnity?:** Check “Yes” only if a transfer of right to indemnity is in effect for the unit for the crop year; otherwise, check “No.” Refer to the LAM.

**47a. Share:** RECORD ONLY VARYING SHARES on SAME unit to three decimal places.

**47b. Field ID:**

- a. If only one practice and/or type of harvested production is listed in Section I, MAKE NO ENTRY.
- b. If more than one practice or type of harvested production is listed in Section I, and a separate approved APH yield exists, indicate for each practice/type the corresponding Field ID (from Section I, column **16**).

\*\*\*

**48. Multi-Crop Code:** The applicable two-digit code for first crop and second crop. REFER TO THE LAM FOR INSTRUCTIONS REGARDING ENTRY OF FIRST CROP AND SECOND CROP CODES.

**49-55. Length or Diameter, Width, Depth, Deductions, Net Cubic Feet, Conversion Factor, and Gross Prod.:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Enter the name and address of the buyer, packinghouse, or processor for processing pumpkins sold, as applicable.

- 56. Bu., Ton, Lbs., Cwt.:** Circle “Ton” in column heading. Production in **TONS**, to tenths.
- Enter the usable tons of processing pumpkins shown on the processor settlement sheet, if available.
  - If a processor settlement sheet showing the usable tons of pumpkins is not available, enter the result obtained by dividing the total dollar amount paid, payable, or which should have been paid under the terms of the processor contract for the quantity of pumpkins to be delivered to the processor by the base contract price per ton. Show the calculations in the “Narrative” of the Production Worksheet.
  - Include all harvested processing pumpkin production from any other insurable units that has been used to fulfill the processor contract for this unit.

**57.-60.** MAKE NO ENTRY.

**61. Adjusted Production:** Enter in tons to tenths from column **56**.

**62. Production Not to Count:** Enter the net production NOT to count, in tons to tenths, WHEN ACCEPTABLE RECORDS IDENTIFYING SUCH PRODUCTION ARE AVAILABLE, from harvested acreage which has been assessed an appraisal of not less than the guarantee per acre, or from other sources (e.g. other units or uninsured acreage).

THIS ENTRY MUST NEVER EXCEED PRODUCTION SHOWN ON THE SAME LINE.  
EXPLAIN ANY “PRODUCTION NOT TO COUNT” IN THE NARRATIVE.

**63. Production Pre-QA:** Result of subtracting column 62 from column 61 in tons to tenths.

**64a.-65.** MAKE NO ENTRY.

**66. Production to Count:** Enter result from column **63** in tons to tenths.

**67. Total of column 63.** If no entry in column 63, MAKE NO ENTRY.

**68. Section II Total:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Total of column **66**, to tenths.

**69. Section I Total:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Enter figure from Section I, column **38** total.

**70. Unit Total:**

**PRELIMINARY:** MAKE NO ENTRY.

**FINAL:** Total of **item 68** and **item 69**, to tenths.

**71. Allocated Prod:** Refer to paragraphs 126 C (1-3) and 127 of the LAM for instructions for determining allocated production. Enter the total production in tons to tenths, allocated to this unit that is included in Section I or II of the Production Worksheet. Document how allocated production was determined and record supporting calculations in the “Narrative” or on a Special Report.

**72. Total APH Prod:** Result, rounded in tons to tenths, of subtracting the total of column 37 (item 42 “Totals”) and item 71 (Allocated Prod.) from item 70 (Unit Total). If no entries in item 37 and item 71, transfer the entry in item 70. MAKE NO ENTRY when separate APH yields are maintained by type, practice, etc., within the unit.

**The following required entries are not illustrated on the Production Worksheet examples below.**

**73. Insured’s Signature and Date:** Insured’s (or insured’s authorized representative) signature and date. BEFORE obtaining the signature, REVIEW ALL ENTRIES on the Production Worksheet WITH THE INSURED (or the insured’s authorized representative), particularly explaining codes, etc., that may not be readily understood.

Final indemnity inspections should be signed on bottom line.

**74. Adjuster’s Signature, Code #, and Date:** Signature of adjuster, code number, and date signed **after** the insured (or insured’s authorized representative) has signed. For an absentee insured, enter adjuster’s code number ONLY. The signature and date will be entered AFTER the absentee has signed and returned the Production Worksheet.

Final indemnity inspections should be signed on the bottom line.

**75. Page:**

**PRELIMINARY:** Page numbers – “1,” “2,” etc., at the time of inspection.

**FINAL:** Page numbers – (Example: Page 1 of 1, Page 1 of 2, Page 2 of 2, etc.).

### PRODUCTION WORKSHEET

1. Crop/Code # Processing Pumpkin 0147		2. Unit # 0001-0001-BU		3. Location Description SEC-3 TWP-24N RNG-2W FSA FSN 10			7. Company ANY COMPANY Agency ANY AGENCY			8. Name of Insured I.M. INSURED												
4. Date(s) of Damage OCT		5. Cause(s) of Damage FREEZE		6. Insured Cause % 100%		12. Additional Units 0001-0002-BU		13. Est. Prod. Per Acre 38		9. Claim # XXXXXXXXXX			11. Crop Year YYYY									
10. Policy # XXXXXXXXXX		14. Date(s) Notice of Loss MM/DD/YYYY		1st		2nd		Final MM/DD/YYYY		15. Companion Policy(s) NONE												
<b>SECTION I – DETERMINED ACREAGE APPRAISED, PRODUCTION AND ADJUSTMENTS</b>																						
<b>A. ACTUARIAL</b>													<b>B. POTENTIAL YIELD</b>									
16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	28.	29.	30.	31.	32a 32b	33.	34.	35.	36.	37.	38.
Field ID	Multi-Crop Code	Reported Acres	Determined Acres	Interest or Share	Risk	Type	Class	Sub-Class	Intended Use	Int Practice	Cropping Practice	Organic Practice	Stage	Use of Acreage	Appraised Potential	Moisture % Factor	Shell %, Factor, or Value	Production Pre QA	Quality Factor	Production Post QA	Uninsured Causes	Total to Count
1A	SC		20.0	1.000		102					002		UH	TO CORN	13.5	-----		270.0		270.0		270.0
1B	NS		8.0	1.000		102					002		P	WOC		-----					134.4	134.4
1C	NS		19.0	1.000		102					002		H	H		-----						
1D	NS		20.0	1.000		102					002		UH	UH	12.7	-----		254.0		254.0		254.0
39. TOTAL			67.0	40. Quality: TW <input type="checkbox"/> KD <input type="checkbox"/> Aflatoxin <input type="checkbox"/> Vomitoxin <input type="checkbox"/> Fumonisin <input type="checkbox"/> Garlicky <input type="checkbox"/> Dark Roast <input type="checkbox"/> Sclerotinia <input type="checkbox"/> Ergoty <input type="checkbox"/> CoFo <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/>												42. TOTALS		524.0		524.0	134.4	658.4
41. Mycotoxins exceed FDA, State or other health organization maximum limits? Yes <input type="checkbox"/>																						
NARRATIVE (If more space is needed attach a Special Report): Refer to attached aerial photos for field ID's. Field 1B disked without consent. Other documentation provided. 16.8 tons x 8.0 acres = 134.4 total to count from uninsured causes. Acreage determined by wheel measurements.																						
<b>SECTION II – DETERMINED HARVESTED PRODUCTION</b>																						
43. Date Harvest Completed MM/DD/YYYY				44. Damage similar to other farms in the area? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				45. Assignment of Indemnity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				46. Transfer of Right to Indemnity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>										
<b>A. MEASUREMENTS</b>						<b>B. GROSS PRODUCTION</b>						<b>C. ADJUSTMENTS TO HARVESTED PRODUCTION</b>										
47a 47b	48.	49.	50.	51.	52.	53.	54.	55.	56.	57.	58a 58b	59a 59b	60a 60b	61.	62.	63.	64a 64b	65.	66.			
Share Field ID	Multi-Crop Code	Length or Diameter	Width	Depth	Deduction	Net Cubic Feet	Conversion Factor	Gross Prod.	Bu (Ton) Lbs. Cwt.	Shell/Sugar Factor	FM% Factor	Moisture % Factor	Test WT Factor	Adjusted Production	Prod. Not to Count	Production Pre-QA	Value Mkt. Price	Quality Factor	Production to Count			
						ABC Processing Company Any Town, Any State			326.8					326.8		326.8			326.8			
						XYZ Processing Company Other Town, Other State			192.1					192.1		192.1			192.1			
67. TOTAL																	518.9	68. Section II Total		518.9		
																	69. Section I Total		658.4			
																	70. Unit Total		1,177.3			
																	71. Allocated Prod.					
																	72. Total APH Prod.		1,042.9			

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.).





## 9. REFERENCE MATERIAL

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**TABLE A – MINIMUM REPRESENTATIVE SAMPLE REQUIREMENTS**

ACRES IN FIELD OR SUBFIELD	MINIMUM NUMBER SAMPLES
0.1 - 10.0	3
One additional sample is required for each additional 40.0 acres (or fraction thereof) in the field or subfield.	