

Producer Code _____



Federal Det Collection
Improvement Act Certification

Change of address from 2012 crop?

Yes _____ No _____

Are you or any co-applicant
delinquent on any federal
non-tax debt?

Yes _____ No _____

2013 Crop Farm Verification Form

Producer / Farm Name _____

Mailing Address _____

City, State, Zip _____

SS # or EIN # _____

*as listed at
Co. FSA*

Home Phone _____ Mobile Phone _____

Fax # _____ Email Address _____

Lein(s) 2013 crop _____

GIN to be used 2013 _____

Warehouse to be used 2013 _____

PLEASE SPECIFY TOTAL NUMBER OF BALES FORWARD CONTRACTED FOR 2013 _____

PLEASE CHECK HERE IF YOU WOULD LIKE A DEFER CONTRACT MAILED TO YOU FOR THE 2013 CROP.
THIS CONTRACT MUST BE SIGNED EACH YEAR IN ORDER TO HOLD PAYMENTS UNTIL JAN 1.

BY SIGNING BELOW, I ACKNOWLEDGE THAT THE INFORMATION CONTAINED ON THIS FARM VERIFICATION FORM IS COMPLETE AND ACCURATE

SIGNATURE: _____ DATE: _____

