

(Reverse 70 Detail Record - Type 70)
Format/Edit

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1	RECORD TYPE	1	2	XX	MUST BE '70'
2	REPORTING ORGANIZATION	3	2	XX	
3	LOCATION STATE	5	2	99	
4	COMPANY	7	3	999	
5	POLICY-NUMBER	10	7	9(7)	
6	CROP-YEAR	17	4	9(4)	
7	PAID-AMOUNT	21	10	s9(8)V99	Must be payment type 00 (Paid by Insured)
8	CROP-CODE1	31	4	9(4)	C R O P #1
9	REV70-PLAN-CODE1	35	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
10	REV70-COVERAGE-FLAG1	37	1	X(1)	MUST BE C(CAT) or N (NonCAT)
11	TOTAL-PREMIUM1	38	7	9(7)	
12	CROP-CODE2	45	4	9(4)	C R O P #2
13	REV70-PLAN-CODE2	49	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
14	REV70-COVERAGE-FLAG2	51	1	X(1)	MUST BE C(CAT) or N (NonCAT)
15	TOTAL-PREMIUM2	52	7	9(7)	
16	CROP-CODE3	59	4	9(4)	C R O P #3
17	REV70-PLAN-CODE3	63	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
18	REV70-COVERAGE-FLAG3	65	1	X(1)	MUST BE C(CAT) or N (NonCAT)
19	TOTAL-PREMIUM3	66	7	9(7)	

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Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
20	CROP-CODE4	73	4	9(4)	C R O P #4
21	REV70-PLAN-CODE4	77	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
22	REV70-COVERAGE-FLAG4	79	1	X(1)	MUST BE C(CAT) or N (NonCAT)
23	TOTAL-PREMIUM4	80	7	9(7)	
24	CROP-CODE5	87	4	9(4)	C R O P #5
25	REV70-PLAN-CODE5	91	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
26	REV70-COVERAGE-FLAG5	93	1	X(1)	MUST BE C(CAT) or N (NonCAT)
27	TOTAL-PREMIUM5	94	7	9(7)	
28	CROP-CODE6	101	4	9(4)	C R O P #6
29	REV70-PLAN-CODE6	105	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
30	REV70-COVERAGE-FLAG6	107	1	X(1)	MUST BE C(CAT) or N (NonCAT)
31	TOTAL-PREMIUM6	108	7	9(7)	
32	CROP-CODE7	115	4	9(4)	C R O P #7
33	REV70-PLAN-CODE7	119	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
34	REV70-COVERAGE-FLAG7	121	1	X(1)	MUST BE C(CAT) or N (NonCAT)
35	TOTAL-PREMIUM7	122	7	9(7)	
36	CROP-CODE8	129	4	9(4)	C R O P #8
37	REV70-PLAN-CODE8	133	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)

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38	REV70-COVERAGE-FLAG8	135	1	X(1)	MUST BE C(CAT) or N(NonCAT)
39	TOTAL-PREMIUM8	136	7	9(7)	
40	CROP-CODE9	143	4	9(4)	C R O P #9
41	REV70-PLAN-CODE9	147	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
42	REV70-COVERAGE-FLAG9	149	1	X(1)	MUST BE C(CAT) or N(NonCAT)
43	TOTAL-PREMIUM9	150	7	9(7)	
44	CROP-CODE10	157	4	9(4)	C R O P #10
45	REV70-PLAN-CODE10	161	2	9(2)	MUST BE 12 or 73 (GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (OTHER)
46	REV70-COVERAGE-FLAG10	163	1	X(1)	MUST BE C(CAT) or N(NonCAT)
47	TOTAL-PREMIUM10	164	7	9(7)	
48	CLAIM-NUMBER1	171	8	9(8)	C l a i m #1
49	LOSS-CREDIT-TOTAL-AMOUNT1	179	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
50	TOTAL-INDEMNITY1	187	8	s9(8)	
51	CLAIM-NUMBER2	195	8	9(8)	C l a i m #2
52	LOSS-CREDIT-TOTAL-AMOUNT2	203	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
53	TOTAL-INDEMNITY2	211	8	s9(8)	
54	CLAIM-NUMBER3	219	8	9(8)	C l a i m #3

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55	LOSS-CREDIT-TOTAL-AMOUNT3	227	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
56	TOTAL-INDEMNITY3	235	8	s9(8)	
57	CLAIM-NUMBER4	243	8	9(8)	C l a i m #4
58	LOSS-CREDIT-TOTAL-AMOUNT4	251	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
59	TOTAL-INDEMNITY4	259	8	s9(8)	
60	CLAIM-NUMBER5	267	8	9(8)	C l a i m #5
61	LOSS-CREDIT-TOTAL-AMOUNT5	275	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
62	TOTAL-INDEMNITY5	283	8	s9(8)	
63	CLAIM-NUMBER6	291	8	9(8)	C l a i m #6
64	LOSS-CREDIT-TOTAL-AMOUNT6	299	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
65	TOTAL-INDEMNITY6	307	8	s9(8)	
66	CLAIM-NUMBER7	315	8	9(8)	C l a i m #7
67	LOSS-CREDIT-TOTAL-AMOUNT7	323	8	s9(8)	Must be Loss Total Code M (Credit Memo-this Policy) or P (Credit Memo- Loss applied to another policy)
68	TOTAL-INDEMNITY7	331	8	s9(8)	
69	FILLER	339	212	X(212)	

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70	FCIC Control Time	551	4	9(04)	Internal Use. The time the transaction batch file was received. (From when transmission started) HHMMSSMM Format.
71	FCIC Control Date	555	8	9(08)	Internal Use. The date the transaction batch file was received. (From when transmission started) CCYYMMDD Format.
72	Reinsurance Year	563	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
73	Batch Number	567	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the RO to FCIC/RMA.
74	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>
75	Transaction Rejected Flag	579	1	X(01)	Internal. Will be: 'Y' if the transaction was rejected. 'N' if the transaction was not rejected.
76	Transaction Source Flag	580	1	X(01)	Internal Use. Will be: 'I' if the transaction is from the input file. 'G' if the transaction was generated by DAS. 'D' if the transaction came from a transaction database.
77	Filler	581	20	X(20)	Internal Use.