This Handbook contains the official FCIC-issued loss adjustment standards for this crop for the 2008 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 that have been highlighted. Three stars (***), identify where information has been removed.

**Significant changes for crop year 2008 (FCIC-25800) issued August 27, 2007:**

1. Removed “Note” throughout handbook.
2. Section 1: Added the following statement: THIS HANDBOOK MUST BE USED IN CONJUNCTION WITH THE LOSS ADJUSTMENT MANUAL (LAM) and updated reference paragraph.
3. Section 2 (A): Added additional wording to the instructions for distribution.
4. Section 2 (B) (3): Added the abbreviation for Catastrophic Risk Protection (CAT), and “Crop Insurance Handbook” (CHI).
5. Section 2 (B) (4): Updated Definitions.
7. Section 3 (B): Inserted standard language.
8. Section 3 (C): Added clarification language to the paragraph.
9. Section 5 (B) (2) and (3): Separated sample language to distinguish bag culture from bottom culture appraisals.
10. Section 5 (B) (3): Added “insurable clams” to the instructions for sampling.
11. Section 5 (B): Changed the reference from age to stage.
12. Section 5 B (3): Corrected square foot calculation in the Example.
13. Section 5 E: Added clarification language to the paragraph.
14. Section 6 B (1) and (2): Changed the reference from age to stage.
15. Section 6 B (2) (a): Added insurable to the instructions for sampling procedure and the requirements for GPS coordinates.
16. Section 6 B (2) (a): Added clarifying language to the instructions for sampling procedure.
17. Section 6 B (2) (b): Change item reference to reflect new Appraisal Worksheet entries.
18. Section 6 B (3): Clarified reference to pipe diameter and modifications to sampling rake.
19. Section 6 B (3) 2 c and d: Change item reference to reflect different appraisal worksheet entries and clarify sampling methods.
20. Section 8 A: Updated paragraph with standard language.
21. Section 8 B 1, 4, 5, 26: Minor editing changes
23. Section 8 B (10): Modified worksheet to reference “Inspection Number”.
25. Section 8 B (13): Added definition and requirements for Global Positioning Coordinates.
26. Section 8 B (21): Added worksheet reference to item 21, “No. of Bags”.
27. Section 8 B (23): Added stage and expanded the definition of the price calculation. Also, corrected the EXAMPLE
28. Reformatted the Clam Appraisal Worksheet for Bag Culture to remove references to Bottom Culture and to remove the repetitious headings from columns 13 through 24. Also, added required field for GPS coordinates.

29. Added New Section 9, “Appraisal Worksheet Entries and Completion Procedures for Bottom and Round Pen Culture”.


31. Section 10 A (3) (c) and (4): Made minor editing changes.

32. Section II: Renumbered portions of the entry and item numbers.

33. Section 10 (B) 7, 11, 16, 17, 18, 21, 22, 26, 28, 34, 36, 38,: Made minor editing changes.

34. Section 10 (B) 5: Added reference to “Special Provisions of Insurance”.

35. Section 10 (B) 6: Added clarifying language.

36. Section 10 (B) Section I 17a: Added clarifying language.

37. Section 10 (B) Section II 24 c and d: Revised paragraphs to more accurately define the completion of the loss example.

38. Section 10 (B) Section II 33: Added clarifying language to the definition.
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1. INTRODUCTION

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 Multiple Peril Crop Insurance (MPCI) 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 reinsured companies will utilize these standards for both loss adjustment and loss 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

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

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:

One legible copy to insured, the original and all remaining copies as instructed by the approved insurance provider (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 that are general (not crop specific) to loss adjustment are identified in the LAM.

(2) Terms, abbreviations, and definitions specific to clam loss adjustment and this handbook, which are not defined in this section, are defined as they appear in the text.

(3) Abbreviations:

- **AIP**: Approved Insurance Provider
- **CAT**: Catastrophic Risk Protection
- **CIH**: Crop Insurance Handbook
- **GPS**: Global Positioning System
- **LAM**: Loss Adjustment Manual
### Definitions:

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount of insurance</td>
<td>For each basic unit, the insured’s inventory value multiplied by the coverage level percentage the insured elects, and multiplied by the insured’s share. However, for catastrophic risk protection policies, amount of insurance is the insured’s inventory value multiplied by the coverage level percentage (for CAT coverage the level is limited to 50%), multiplied by the insured’s share, and multiplied by 55 percent. The insured’s accumulated paid indemnities during the crop year for each basic or optional unit may not exceed the insured’s amount of insurance.</td>
</tr>
<tr>
<td>Basic Unit Value Before Loss</td>
<td>The stage value of all undamaged insurable clams, in the basic unit or, if elected, all optional units combined, immediately prior to the occurrence of any loss as determined by our appraisal. This allows the amount of insurance under the policy to be prorated among the individual units based on the actual value of the clams in the unit at the time of loss. It is also the basis for determining whether or not an indemnity is due. This value is used to ensure that you have not under-reported your clam inventory value.</td>
</tr>
<tr>
<td>Crop Year Deductible</td>
<td>The deductible percentage multiplied by the sum of the inventory values within each basic unit. The crop year deductible will be increased for any increases in the inventory value on the inventory value report. The crop year deductible will be reduced by any previously incurred deductible if the insured timely reports each loss to the AIP’s.</td>
</tr>
<tr>
<td>Global Positioning System (GPS)</td>
<td>A space based radio position, navigation and time transfer system involving satellites and computers to determine the latitude and longitude of a receiver on Earth by computing the time difference for signals from different satellites to reach the receiver.</td>
</tr>
<tr>
<td>Inventory value</td>
<td>The total of the stage values from the inventory value report.</td>
</tr>
<tr>
<td>Inventory Value Report</td>
<td>The insured’s report that declares the stage values of insurable clams in accordance with section 6 of the Crop Provisions.</td>
</tr>
</tbody>
</table>
Nursery environment  Bags, trays, pens, or properly protected bottom culture where nursery stock is grown at high densities for the purpose of producing seed clams suitable for stocking into a grow out environment.

Nursery stock  Clams that are growing in a nursery environment. Minimum size of clams will be 4 mm (retained on a 3½ mm sieve.)

Occurrence Deductible  (a) This deductible allows a smaller deductible than the crop year deductible to be used when:
   (1) Inventory values are less than the reported basic unit value; or
   (2) The insured has elected optional units, if applicable.
(b) The occurrence deductible is the lesser of:
   (1) The deductible percentage multiplied by the unit value before loss multiplied by the under-report factor; or
   (2) The crop year deductible.

Practice  Cultural methods of producing clams such as trays, mesh bags, round pens, lantern nets or bottom planting.

Rake  The hand-operated harvesting device (sometimes called a bull rake) used for clam fishing.

Special Provisions of Insurance  The county actuarial documents, which are part of the policy, which contain statements that clarify or amend the policy terms and conditions and also lists insurable types and practices and relevant dates that may vary by geographical area.

Stage  Clams that have attained the size or stage specified for stage 1, 2, 3, or 4 as defined in the Special Provisions.

Stage Value  The dollar value of the inventory of all insurable clams at each stage based on the survival factors and the prices shown in the actuarial documents for such stages, in each unit on your inventory value report, including any revision that increases the value of your insurable inventory.

Substrate  The sediment in which the clam lives.

Under-Report Factor  The factor that adjusts the insured’s indemnity for under-reporting of inventory values. The factor is always used in determining any indemnities. The under-report factor
is the lesser of: a) 1.000 or; b) the sum of all stage values reported on all the inventory value reports, minus the total of all previous losses, as adjusted by any previous under-reporting factors, divided by the basic unit value before loss.

**Unit Value After Loss**

The value of the remaining insurable clams in each basic or optional unit based on the percentage of the maximum reference price contained in the actuarial materials, immediately following the occurrence of a loss as determined by the AIP’s appraisal, plus any reduction in value due to uninsured causes. This is used to determine the loss of value for each individual unit so that losses can be paid on an individual unit basis, optional or basic, as applicable.

The survival factor is applied at the time of inventory and **not** applied a second time to the same inventory when a loss occurs. Clams that are seeded subsequent to the annual inventory report must be adjusted by the survival factor.

**Unit value before Loss**

The stage value of undamaged insurable clams in the basic or optional unit, as applicable, immediately prior to the loss occurrence. The determined value will include the number and stages that existed on the date of the inventory value report, adjusted for changes, including but not limited to, seeded and harvested; the prices contained in the actuarial materials; and the applicable survival factors. This allows the amount of insurance under the policy to be divided among the individual units in accordance with the value of the clams in the unit at the time of loss for determining whether the insured is entitled to an indemnity for insured losses in the unit, optional or basic, as applicable.

Clams that are seeded subsequent to the annual inventory report must be adjusted by the survival factor before they are added to the beginning inventory during the process of establishing the "Unit value before loss."

### 3. INSURANCE CONTRACT INFORMATION

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

#### A. INSURABILITY

The crop insured will be all the clams in the County that:

1. Meet all the requirements for insurability and for which prices are provided in the actuarial materials;
(2) Are acceptable to the AIP;

(3) Are grown by a person, who in at least three of the five previous crop years:
   
   (a) Grew clams for commercial sale; and
   
   (b) Participated in the management of a clam farming operation by at least exercising
decision-making authority over all operational aspects of the farm.

(4) Are grown in a county for which a premium rate is provided in the actuarial documents;

(5) Are in a growing location acceptable to the AIP;

(6) Use a practice that fixes the insurable clams to the land within the growing location.

Refer to the Special Provisions of Insurance for specific limitations associated with clam age
restrictions.

B. PROVISIONS NOT APPLICABLE TO CAT COVERAGE

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

C. UNIT DIVISION

Refer to the insurance contract for unit provisions.

A basic unit, as defined in the Basic Provisions, may be divided into optional units in
accordance with the crop provision and, if allowed by the Special Provisions of Insurance. In
addition to the definition in the Basic Provisions, the Clam Crop Provisions require additional
requirements for dividing a basic unit into optional units. Refer to the insurance contract for
additional information.

4. PENALTIES FOR MISREPORTING

A. UNDER REPORT FACTOR (PENALTY FOR UNDER INSURING)

If the policyholder fails to report an amount of insurance equal at least to the value of the
inventory at the time of any loss determination, a penalty in proportion to the amount of
under insurance will be applied.

For example: The insured has a 100 percent share and the inventory value reported by the
insured was $100,000. At the time of loss, basic unit value before loss was $125,000.
$100,000 divided by $125,000 = .80 under reporting factor.
B. OVERSTATING INVENTORY VALUE

If the policyholder reports an amount of insurance that exceeds the actual value of the inventory, the insured will pay for coverage on which no indemnity can be collected. The policy will not pay any indemnity amount that exceeds the actual inventory value and premium dollars will be wasted. In addition, the crop year deductible will be overstated and will force the occurrence deductible to be applied for each loss in the case of multiple losses and the insured may not be indemnified.

5. CLAM APPRAISALS

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

Sample selection for clam appraisals will be conducted as follows:

(1) Florida and South Carolina - Due to the frequency of seeding dates and favorable environmental conditions for relatively rapid growth, group seeding dates by calendar quarter and sample clams by calendar quarter.

   (a) For example, ask the grower for December through February seedings and sample from this subgroup. The March through May seedings would form another subgroup, etc.

   (b) Map the seedings. The quarterly seedings may or may not be in one area of the lease.

   (c) Sample 3 percent of the total number of bags in the lease area. Sample proportionally from each of the seeding quarters. If any clams have been seeded during a quarter, sample at least one bag per seeding quarter.
(2) Florida and South Carolina Bag Culture - Sample 3 percent of the bags for each seeding quarter. For bottom culture practices (includes round pens), use the sampling procedure for Bottom Culture, except instructions to sample by type, as outlined in (3) below.

EXAMPLE:

<table>
<thead>
<tr>
<th>No. of Bags (Practice) 023</th>
<th>Seeding Quarter</th>
<th>3 Percent of Quarter/ Practice</th>
<th>No. of Samples/ Quarter/ Practice 023</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Q1</td>
<td>3 % of 20 = 0.60</td>
<td>1</td>
</tr>
<tr>
<td>125</td>
<td>Q2</td>
<td>3 % of 125 = 3.75</td>
<td>4</td>
</tr>
<tr>
<td>0</td>
<td>Q3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>350</td>
<td>Q4</td>
<td>3 % of 350 = 10.50</td>
<td>11</td>
</tr>
</tbody>
</table>

Total Number of Bags 495

(3) Massachusetts and Virginia Bottom Culture, sample by type. Sample a minimum of 1 sample per 100 sq. ft. in the bed. If the producer has 5 beds or less, sample all beds. If a producer has 5 or more beds, sample a minimum of 5 beds and 1 additional bed for every additional 5 beds, (i.e. 10 beds: sample 5 + 1 = 6).

From the schematic provided by the insured, randomly select insurable clams from seeded beds of stage 2, and stage 3 clams to measure. Select the number of seeded plots to sample, by type, based on the proportion of a particular type's area to total area.

EXAMPLE:

A grower has ten 14 x 100 beds of stage 2 clams and thirty 14 x 100 beds of stage 3 clams. Stage 2 clams constitute 14,000 square feet of area (10 x 14 x 100) and stage 3 clams constitute 42,000 square feet of area (30 x 14 x 100). Stage 2 clams comprise 25 percent of the total area (14,000 divided by 56,000) and stage 3 clams comprise 75 percent of the total area.

The grower has a total of 40 beds of stage 2 and 3 clams. Of the ten beds of stage 2 clams, randomly sample the minimum five beds plus one additional bed from the remaining five beds for a total of six. Of the thirty beds of stage 3 insurable clams, randomly sample the minimum five beds plus one additional bed for each five beds in the remaining twenty-five beds for a total of ten. In this example, 16 of the grower's insurable clam beds would be sampled.

C. UNIT VALUE BEFORE LOSS

The clam crop provisions require that the insured submit an inventory value report of all growing locations, stage values and shares by growing location. At the AIP's option, documentation may be required to support any part of the report. For CAT coverage only, the insured must report the previous year’s clam sales on the clam inventory value report. The insured may be required to provide documentation to support such sales.
For loss adjustment, the value of the inventory value report is updated to the day before the loss occurred. Document on a Special Report form the initial number of clams seeded, sold and reseeded. The number of clams sold is deducted from the inventory. Stage and stage values of growing clams are updated.

The survival factor from the actuarial documents or the insured's records (if the insured has three consecutive years) is applied to inventory that is initially seeded and to inventory that has been restocked or added since the initial inventory value report.

If the survival factor has been applied to initially seeded inventory and that inventory updates to a new stage group before the loss occurs, transfer the survival-adjusted inventory to the new stage group.

D. **BASIC UNIT VALUE BEFORE LOSS**

If optional units are applicable, this is the sum of the optional unit values before loss.

E. **UNIT VALUE AFTER LOSS**

The cultivated clam crop provisions define the unit value after loss as the value of the remaining insurable clams in each basic or optional unit based on the percentage of the maximum reference price contained in the actuarial materials, immediately following the occurrence of a loss as determined by our appraisal, plus any reduction in value due to uninsured causes. This is used to determine the loss of value for each individual unit so that losses can be paid on an individual unit basis, optional or basic, as applicable.

6. **APPRAISAL METHODS**

A. **GENERAL INFORMATION**

These instructions provide information on the method for appraising the unit value after loss for bottom culture and bagged culture practices. Establish the standing stock of live clams according to the practice.

B. **BOTTOM CULTURE**

(1) Determine the distribution of stage 2 and stage 3 clams in the plots at the field site.

(a) Have the grower provide the GPS coordinates for each site and a schematic diagram of the site, including the length and width of each growing area and the date the clams were seeded; or

(b) Interview the grower on-site, and identify the growing areas with stage 2 and stage 3 clams. Generate a diagram from this interview.

(2) Determine the overall area in square feet that has been seeded to each stage group.
(a) Based on the schematic diagram provided by the grower or that was generated from the interview, calculate the surface area of growing areas that have been seeded with each of the insurable stage groups or types of clams.

1. If the growing areas are all similar, count the number of growing areas that have been seeded, and measure the surface area of one growing area. Calculate the total surface area seeded; or

2. If each growing area is different, measure the surface area that has been seeded in each, and calculate the total area.

(b) Enter the total surface area in square feet in item 28 of the Clam Appraisal Worksheet for Bottom and Round Pen Culture.

(3) Measure the density of clams in each of the plots.

(a) At each of the seeded plots, randomly select and mark three points within the bed for measuring the density. Do not sample at the edges of the bed.

(b) With permission of the grower either lift the netting to permit access or cut an "X" through the anti-predator netting at a spot of sufficient size to sample the bed. Two methods to sample the bed are:

1. PVC Pipe
   a. Insert the core into the sediment to a depth of six inches at the marked site and extract a sample of the substrate and clams.
   b. Convert the pipe diameter to square feet by the following formula and enter the factor, rounded to the nearest thousandth, in item 20 of the appraisal worksheet. Show the calculation of the factor in the remarks section, and note the size of the PVC pipe used.
   c. \[144 \div (3.14 \times r^2)\] where \(r\) = pipe radius

   Example: 12-inch diameter pipe \(\{144 \div (3.14 \times 6^2) = 1.274\}\)

   If PVC pipe is used for stage 2 or stage 3 clams the minimum diameter pipe must be 12 inches. A one (1) square foot sampler may be constructed and used without the conversion factor.

2. Rake Widths Across the Bed
   a. For a particular clam bed, rake across the width of the bed.
   b. Rake across the bed in three different locations.
If this sampling procedure is used, enter the total number of square feet in the three sample areas in item 21 and enter 1.00 in item 22 of the Clam Appraisal Worksheet for Bottom and Round Pen Culture.

When using the rake method for sampling stage 2 and stage 3 clams, the rake basket must be lined with mesh having holes not larger than 9 mm.

(c) Sort the sample through a one-quarter inch mesh sieve, and count all of the live clams. Live clams are relatively heavy, and their hinges are closed.

(d) After counting, return live clams to the substrate.

(e) Close the cut in the netting--dental floss in a tapestry needle can be used to stitch the netting back together.

**C. BAGGED CULTURE**

(1) Determine the distribution of bags by seeding quarter. Mark their locations on the map of the lease area.

(2) Count the total number of bags in each seeding quarter and enter in item 21 of the appraisal worksheet. Enter 1.00 in item 20 of the appraisal worksheet.

(3) Randomly select bags to sample within each seeding quarter. See section 5B for sampling requirements.

(4) The number of live clams per bag may be assessed by:

(a) Counting all live clams in the bag; or

(b) **Volumetric Sampling**

   1. Sort the live clams from the dead clams. Live clams are relatively heavy and their hinges are closed.

   2. Determine the total number of live clams in a graduated cylinder's measured volume by counting the number of live clams in a small subsample whose volume already has been measured.

   3. \[ \text{No. of Live Clams in Subsample} \times \text{Total Vol. of Live Clams} \]

   Subsample Volume (ml) = Total Number of Live Clams

---

**No. of Live Clams in Subsample**

**Total Vol. of Live Clams**

**Subsample Volume (ml)**

**Total Number of Live Clams**
4 Appropriate volumes for the size of clams counted are:

Growout Bag ................................................................. 100 - 4000 ml.

7. APPRAISAL DEVIATIONS AND MODIFICATIONS

A. DEVIATIONS

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

B. MODIFICATIONS

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

8. APPRAISAL WORKSHEET ENTRIES AND COMPLETION PROCEDURES FOR BAG CULTURE

A. GENERAL INFORMATION

(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 of the appraisal worksheet (when required by the AIP), when a worksheet entry is not provided.

(3) Cultivated Clam appraisals are to be made when:

(a) Directed by the AIP;

(b) When a notice of damage has been received.

See the LAM for additional reasons for appraisals.

(4) Make separate appraisals for each practice and basic unit, if applicable. Refer to section 5 for sampling requirements.

Document all uninsured causes of loss in the REMARKS section.

(5) Standard appraisal worksheet items are numbered consecutively in paragraph B. An example appraisal worksheet is also provided to illustrate how to complete entries.
### B. WORKSHEET ENTRIES AND COMPLETION INFORMATION

Verify or make the following entries:

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Information Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company:</td>
<td>Name of <strong>AIP</strong>, if not preprinted on the worksheet. (Company Name).</td>
</tr>
<tr>
<td>1.</td>
<td><strong>Insured's Name:</strong> Name of the insured that identifies EXACTLY the person (legal entity) to whom the policy is issued.</td>
</tr>
<tr>
<td>2.</td>
<td><strong>Policy Number:</strong> Insured's assigned policy number.</td>
</tr>
<tr>
<td>3.</td>
<td><strong>Unit Number:</strong> Five-digit unit number from the Summary of Coverage after it is verified to be correct (e.g., 00100).</td>
</tr>
<tr>
<td>4.</td>
<td><strong>Claim Number:</strong> Claim number as assigned by the <strong>AIP</strong>.</td>
</tr>
<tr>
<td>5.</td>
<td><strong>Crop Year:</strong> Four-digit crop year, as defined in the policy, for which the claim is filed.</td>
</tr>
<tr>
<td>6.</td>
<td><strong>Cause of Loss:</strong> Name of insured cause of loss for <strong>this crop</strong> as listed in the LAM. If it is evident that no indemnity is due, enter &quot;NONE.&quot; If an insured cause of loss is coded as &quot;Other,&quot; explain in the &quot;Remarks.&quot; Refer to the Basic Provisions, Crop Provisions, and Special Provisions of Insurance for this crop for information pertaining to insured and uninsured causes of loss.</td>
</tr>
<tr>
<td>7.</td>
<td><strong>CAT Policy:</strong> Check the appropriate box for “Yes” if the insured selected CAT coverage or “No” if the insured selected buy up coverage.</td>
</tr>
<tr>
<td>8.</td>
<td><strong>Optional Units:</strong> Check the appropriate box for “Yes” if the insured selected optional unit coverage or “No” if the insured selected basic unit coverage.</td>
</tr>
<tr>
<td>9.</td>
<td><strong>Date of Damage:</strong> First three letters of the month during which MOST of the insured damage (including progressive damage) occurred for each inspection. Include the SPECIFIC DATE where applicable as in the case of a tidal wave (e.g., AUG 11).</td>
</tr>
<tr>
<td>10.</td>
<td><strong>Inspection Number:</strong> Number of the inspection (e.g., 1, 2).</td>
</tr>
<tr>
<td>11.</td>
<td><strong>Lease Parcel ID:</strong> Identification of the lease parcel.</td>
</tr>
<tr>
<td>12.</td>
<td><strong>Lease Area Size:</strong> Size of the leased area in acres, to hundredths.</td>
</tr>
</tbody>
</table>
| 13.      | **Global Positioning Coordinates (GPS):** Enter the coordinates of the lease site. Each coordinate will be provided in the format: DDDMMddd where; DDD = degrees (right justified and left zero filled where appropriate) MM = minutes (right justified and left zero filled where appropriate) ddd = decimal minutes, rounded where necessary to 3 positions.
14. **Practice:** Three-digit code number entered exactly as specified on the actuarial documents, for the practice carried out by the insured. If “No Practice Specified,” enter appropriate 3-digit code number from the actuarial documents.

15. **Seeding Date:** Quarter the clams were seeded. Seeding quarters are designated as follows:

- 1st Quarter: December - February
- 2nd Quarter: March - May
- 3rd Quarter: June - August
- 4th Quarter: September - November

16. **Type – Stage:** Three-digit code number entered exactly as specified on the actuarial documents, for the type grown by the insured. If “No Type Specified,” enter appropriate 3-digit code number from the actuarial documents.

17. **Number of Live Clams per Sample:** Number of live clams in the sample area.

18. **Total:** Total of the entries in item 17.

19. **Number of Samples:** Total number of samples taken.

20. **Average:** Item 18 divided by item 19. Round to the nearest whole number.

21. **No. of Bags:** Total number of bags for the type appraised.

22. **Total Number of Clams:** Item 20 times item 21. Round to the nearest whole number.

23. **Price:** Price per clam (for the appropriate type – stage calculated by multiplying the maximum dollar amount per clam from the actuarial documents times the price factor for the applicable stage. For CAT coverage, multiply the reference price factor by the reference CAT price decimal.

   **EXAMPLE:** Maximum dollar amount per clam = $0.14
   Price factor for applicable stage (stage 2) = 0.50
   Price per clam ($0.14 x 0.50) = $0.07
   For CAT coverage ($0.07 x 0.55) = $0.039.

24. **Value:** Item 22 times item 23. Round to the nearest whole number.

25. **Unit Value After Loss:** Sum of item 24 entries.

26. **Remarks:** Information pertinent to the appraisal, sampling, conditions, etc. Include any appropriate calculations.

27. **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 appraisal in the Remarks section of the Appraisal Worksheet (if available); otherwise, document the appraisal date in the Narrative of the Production Worksheet.

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

29. **Page:** Page numbers - (Example: Page 1 of 1, Page 1 of 2, Page 2 of 2, etc.).
<table>
<thead>
<tr>
<th>Practice</th>
<th>Seeding Date</th>
<th>Type - Stage</th>
<th>Number of Live Clams per Sample</th>
<th>Total</th>
<th>Number of Samples</th>
<th>Average</th>
<th>No. of Bags</th>
<th>Total Number of Clams</th>
<th>Price</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>15</td>
<td>16</td>
<td>17</td>
<td>18</td>
<td>19</td>
<td>20</td>
<td>21</td>
<td>22</td>
<td>23</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>023</td>
<td>2ND QUARTER</td>
<td>084</td>
<td>17</td>
<td>10</td>
<td>13</td>
<td>5</td>
<td>12</td>
<td>13</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>800.00</td>
</tr>
</tbody>
</table>

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.).
9. APPRAISAL WORKSHEET ENTRIES AND COMPLETION PROCEDURES FOR BOTTOM AND ROUND PEN CULTURE

A. GENERAL INFORMATION

(1) Include the AIP’s name in the appraisal worksheet title if not preprinted on the AIP’s worksheet or 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) Cultivated Clam appraisals are to be made when:

(a) Directed by the AIP;

(b) When a notice of damage has been received.

See the LAM for additional reasons for appraisals.

(4) Make separate appraisals for each practice and basic unit, if applicable. Refer to section 5 for sampling requirements.

Document all uninsured causes of loss in the REMARKS section.

(5) Standard appraisal worksheet items are numbered consecutively in paragraph B. An example appraisal worksheet is also provided to illustrate how to complete entries.

B. WORKSHEET ENTRIES AND COMPLETION INFORMATION

Verify or make the following entries:

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Information Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company:</td>
<td>Name of AIP, if not preprinted on the worksheet. (Company Name).</td>
</tr>
<tr>
<td>1.</td>
<td>Insured’s Name: Name of insured that identifies EXACTLY the person (legal entity) to whom the policy is issued.</td>
</tr>
<tr>
<td>2.</td>
<td>Policy Number: Insured’s assigned policy number.</td>
</tr>
<tr>
<td>3.</td>
<td>Unit Number: Five-digit unit number from the Summary of Coverage after it is verified to be correct (e.g., 00100).</td>
</tr>
<tr>
<td>4.</td>
<td>Claim Number: Claim number as assigned by the AIP.</td>
</tr>
<tr>
<td>5.</td>
<td>Crop Year: Four-digit crop year, as defined in the policy, for which the claim is filed.</td>
</tr>
</tbody>
</table>
6. **Cause of Loss:** Name of insured cause 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 "Narrative." Refer to the Basic Provisions, Crop Provisions, and Special Provisions of Insurance for this crop for information pertaining to insured and uninsured causes of loss.

7. **CAT Policy?:** Check the appropriate box for “Yes” if the insured selected CAT coverage or “No” if the insured selected buy up coverage.

8. **Optional Units?:** Check the appropriate box for “Yes” if the insured selected optional unit coverage or “No” if the insured selected basic unit coverage.

9. **Date of Damage:** First three letters of the month during which MOST of the insured damage (including progressive damage) occurred for each inspection. Include the SPECIFIC DATE where applicable as in the case of a tidal wave (e.g., AUG 11).

10. **Inspection Number:** Number of the inspection (e.g., 1).

11. **Lease Parcel ID:** Identification of the lease parcel.

12. **Lease Site ID:** Identification of the lease site if different than item 11.

13. **Global Positioning Coordinates (GPS):** Enter the coordinates of the lease site. Each coordinate will be provided in the format: DDDMMddd where; DDD = degrees (right justified and left zero filled where appropriate) MM = minutes (right justified and left zero filled where appropriate) ddd = decimal minutes, rounded where necessary to 3 positions.

14. **Practice:** Three-digit code number entered exactly as specified on the actuarial documents, for the practice carried out by the insured. If “No Practice Specified,” enter appropriate 3-digit code number from the actuarial documents.

15. **Type - Stage:** Three-digit code number entered exactly as specified on the actuarial documents, for the type grown by the insured. If “No Type Specified,” enter appropriate 3-digit code number from the actuarial documents. **Each type – stage will require a different appraisal worksheet.**

16. **Bed ID:** Three-digit number assigned by the adjuster on the first loss to identify the individual bed that was sampled.

17. **Seeding Date:** The Date (MM/DD/YYYY) the clams were seeded in the medium.

18. **Bed Dimensions:** The measurements of the bed being sampled.

19. **Number of Live Clams per Sample:** The Number of live clams in the sample area.

20. **Total:** Total of the entries from item 19.
21. **Number of Samples:** The Total number of samples taken. If three rake widths across the bed is the method of sampling, enter the total square feet of the sample area in this item.

22. **Sq. Ft. Factor:** If using a sampling device that does not measure one square foot in diameter, enter the factor, expressed to the nearest thousandth, necessary to convert the diameter to one square foot. Otherwise, enter 1.000.

23. **Average # of clams per Sq. Ft.:** Result of item 20 divided by item 21 multiplied by item 22. Rounded to the nearest whole number.

24. **Total:** Sum of entries for column 23.

25. **Total of all samples:** Total from item 24.

26. **Number of Beds Sampled:** Total number of beds sampled.

27. **Average # of clams per Sq. Ft.:** Result of item 25 divided by item 26. Round to the nearest whole number.

28. **Total Area:** Total square feet of seeded area for the appraisal.

29. **Total Number of Clams:** Result of multiplying Item 27 times Item 28.

30. **Price:** Price per clam for the appropriate type – stage calculated by multiplying the maximum dollar amount per clam times the price factor for the applicable stage.

**EXAMPLE:**
- Maximum dollar amount per clam = $0.14
- Price factor for applicable stage (stage 2) = 0.50
- Price per clam ($0.14 x 0.50) = $0.07
- For CAT coverage ($0.07x 0.55) = $0.039.

31. **Type – Stage Value Loss:** Result of multiplying item 29 by item 30. Round to the nearest whole number.

32. **Unit Value After Loss:** Entry from item 29, which is the total of all after loss stage values in the unit.

33. **Remarks:** Enter information pertinent to the appraisal, sampling, conditions, etc. Include any appropriate calculations.

34. **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 appraisal in the Remarks section of the Appraisal Worksheet (if available); otherwise, document the appraisal date in the Narrative of the Production Worksheet.

35. **Insured’s Signature and Date:** Insured’s (or insured’s authorized representative’s) signature and date. BEFORE obtaining insured’s signature, REVIEW ALL ENTRIES on the Appraisal Worksheet WITH THE INSURED, particularly explaining codes, etc., which may not be readily understood.
### CLAM APPRAISAL WORKSHEET

**For Bottom and Round Pen Culture**

<table>
<thead>
<tr>
<th>Company</th>
<th>Insured’s Name</th>
<th>Policy Number</th>
<th>Unit Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPANY NAME</td>
<td>I. M. INSURED</td>
<td>XXXXXXX</td>
<td>00101</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Claim Number</th>
<th>Crop Year</th>
<th>Cause of Loss</th>
<th>CAT Policy?</th>
<th>Optional Units?</th>
</tr>
</thead>
<tbody>
<tr>
<td>XXXXX</td>
<td>YYYY</td>
<td>FREEZE</td>
<td>YES</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Damage</th>
<th>Inspection Number</th>
<th>Lease Parcel ID</th>
<th>Lease Site ID</th>
<th>GPS Coordinates</th>
</tr>
</thead>
<tbody>
<tr>
<td>JAN 10</td>
<td>1</td>
<td>LEASE PARCEL 17</td>
<td>BR549</td>
<td>lat: 03740109, long: 12223825</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Bed ID</th>
<th>Seeding Date</th>
<th>Bed Dimensions</th>
<th>Number of Live Clams per Sample</th>
<th>Total</th>
<th>Number of Samples</th>
<th>Sq. Ft. Factor</th>
<th>Average # of Clams per sq. ft</th>
</tr>
</thead>
<tbody>
<tr>
<td>123</td>
<td>10/10/07</td>
<td>14 X 100</td>
<td>3 5 18 10 44 7 21 8 19</td>
<td>313</td>
<td>14</td>
<td>1.000</td>
<td>22</td>
</tr>
<tr>
<td>124</td>
<td>10/11/07</td>
<td>14 X 100</td>
<td>18 22 47 57 20 8 5 8 66</td>
<td>530</td>
<td>14</td>
<td>1.000</td>
<td>38</td>
</tr>
<tr>
<td>125</td>
<td>10/12/07</td>
<td>14 X 100</td>
<td>98 88 78 42 17 88 56 75 32</td>
<td>782</td>
<td>14</td>
<td>1.000</td>
<td>56</td>
</tr>
<tr>
<td>126</td>
<td>10/13/07</td>
<td>14 X 100</td>
<td>33 43 34 55 66 12 17 29 77</td>
<td>611</td>
<td>14</td>
<td>1.000</td>
<td>44</td>
</tr>
<tr>
<td>127</td>
<td>10/14/07</td>
<td>14 X 100</td>
<td>67 93 41 88 45 78 22 23 26</td>
<td>714</td>
<td>14</td>
<td>1.000</td>
<td>51</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total of all Samples</th>
<th>Number of Beds Sampled</th>
<th>Average # of Clams per sq ft per Bed</th>
<th>Total sq ft of Seeded Area</th>
<th>Total Number of Clams</th>
<th>Price</th>
<th>Type – Stage Value</th>
<th>Unit Value After Loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>211</td>
<td>5</td>
<td>42</td>
<td>7,000</td>
<td>294,000</td>
<td>.09</td>
<td>$26,460</td>
<td>$26,460</td>
</tr>
</tbody>
</table>

**Remarks**

This form example does not illustrate all required entry items (e.g., signatures, dates, etc.)
10. CLAIM FORM ENTRIES AND COMPLETION PROCEDURES

A. GENERAL INFORMATION

(1) The claim form (hereafter referred to as the “Production Worksheet”) is a form specific to Cultivated Clam loss adjustment. A separate set of production worksheets are needed for each loss inspection; each production worksheet can accommodate up to six optional units.

(2) If a change or correction is necessary, strike out entry and re-enter correct entries above previous entry. The adjuster and insured should initial any changes.

(3) Refer to the LAM for instructions regarding the following:
   
   (a) Delayed notices and delayed claims.
   
   (b) Corrected claims and cases involving concealment, misrepresentation, or litigation.
   
   (c) “No Indemnity Claims” which must be verified by a Cultivated Clam APPRAISAL or NOTIFICATION from the insured that the Unit Value After Loss equals Unit Value Before Loss.

(4) 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.

(5) All Cultivated Clam inspections initiated through a notice of loss are considered final inspections.

(6) Specific loss calculations are discussed in the instructions for the completion of the Cultivated Clam Production Worksheet. For each loss occurrence, the claim is settled on a basic unit basis. When optional units apply, the loss on each optional unit is calculated separately, and then combined to derive the basic unit indemnity. The amount of insurance paid and occurrence deductible withheld for each optional unit will modify the basic unit effective amount of insurance and the effective crop year deductible available for the next optional unit.

(7) Once unit numbers are assigned for an optional unit, the number must remain specific for that particular optional unit for the entire crop year. If a loss is reported for part of a basic unit, the entire basic unit must be appraised (all optional units must be separately appraised, even if only one optional unit has been damaged).
# B. FORM ENTRIES AND COMPLETION INFORMATION

Verify or make the following entries:

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Information Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td><strong>Crop and Code No:</strong> &quot;Cultivated Clam&quot; (0116).</td>
</tr>
<tr>
<td>2.</td>
<td><strong>Basic Unit:</strong> Five-digit basic unit number from the Summary of Coverage, after it is verified to be correct, (e.g., 00100).</td>
</tr>
<tr>
<td>3.</td>
<td><strong>Legal Description:</strong> Enter the lease parcel number and <strong>Global Positioning Coordinates (GPS)</strong> that identifies the location of the unit.</td>
</tr>
<tr>
<td>4.</td>
<td><strong>Date of Damage:</strong> First three letters of the month during which MOST of the insured damage (including progressive damage) occurred for each inspection. Include the SPECIFIC DATE where applicable as in the case of a tidal wave (e.g., AUG 11).</td>
</tr>
<tr>
<td>5.</td>
<td><strong>Cause of Damage:</strong> Name of insured cause(s) of loss for <strong>this crop</strong> as listed in the LAM. If it is evident that no indemnity is due, enter &quot;NONE.&quot; If an insured cause of loss is coded as &quot;Other,&quot; explain in the &quot;Narrative.&quot; Refer to the Basic, Crop Provisions, and Special Provisions for this crop for information pertaining to insured and uninsured causes of loss.</td>
</tr>
<tr>
<td>6.</td>
<td><strong>Primary Cause %:</strong> Percent of damage for the cause of damage listed in item 5 above that is determined to be the primary cause of damage. The primary cause of damage must exceed 50 percent (e.g., 51%). Enter an “X” in the major secondary cause of damage.</td>
</tr>
<tr>
<td>7.</td>
<td><strong>Company/Agency:</strong> Name of AIP and the name of the agency servicing the contract.</td>
</tr>
<tr>
<td>8.</td>
<td><strong>Name of Insured:</strong> Name of the insured that identifies EXACTLY the person (legal entity) to whom the policy is issued.</td>
</tr>
<tr>
<td>9.</td>
<td><strong>Claim Number:</strong> The claim number as assigned by the AIP’s.</td>
</tr>
<tr>
<td>10.</td>
<td><strong>Policy Number:</strong> Insured’s assigned policy number.</td>
</tr>
<tr>
<td>11.</td>
<td><strong>Crop Year:</strong> <strong>Four-digit crop year</strong>, as defined in the policy, for which the claim is filed.</td>
</tr>
<tr>
<td>12.</td>
<td><strong>Optional Units:</strong> For buy-up coverage, if optional units have been elected by the insured, enter ALL optional unit numbers contained in the basic unit. If optional units have NOT been elected, enter NONE. Optional units are not applicable to CAT policies.</td>
</tr>
<tr>
<td>13.</td>
<td><strong>Date Notice of Loss:</strong> Enter the date the notice of damage was given for the basic unit in item 2. Always enter the complete Date of Notice (month, day, and year).</td>
</tr>
<tr>
<td>14.</td>
<td><strong>Assignment of Indemnity:</strong> Check “Yes” <strong>only</strong> if an assignment of indemnity is in effect for the crop year; otherwise, check &quot;No&quot;. Refer to the LAM.</td>
</tr>
</tbody>
</table>
15. **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.

16. **Companion Policies:**

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 contract and it can be determined that the **SAME AIP's** services it, enter the contract number. Handle these companion policies according to **AIP's instructions**.

   (2) If the OTHER person has a multiple-peril contract and a **DIFFERENT AIP's** or agent services it, enter the name of the **AIP's** and/or agent (and contract number) if known.

   (3) If unable to verify the existence of a companion contract, enter "Unknown" and contact the **AIP's** for further instructions.

   (4) **Refer to** the LAM for further information regarding companion contracts.
### SECTION I – IMMEDIATELY PRIOR TO THIS LOSS

Verify or make the following entries:

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Information Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>17a.</td>
<td><strong>Basic Unit Amount of Insurance:</strong> This is the current basic unit amount of insurance WITHOUT SHARE. It is the reported Total Inventory Value (from the Clam Inventory Value Report plus any Revised Inventory Value Report values), times the coverage level percentage expressed as a decimal, in whole dollars. Complete this entry on only the first page of each inspection when multiple-page basic unit production worksheet forms are required. Do not copy the computed amount of insurance from the Clam Inventory Report for this entry. If optional units are applicable, this value is the sum of the optional units' Total Inventory Values times the coverage level percentage.</td>
</tr>
<tr>
<td>17b.</td>
<td><strong>Basic Unit Previous Indemnities:</strong> Previous preliminary indemnities (item 32) calculated during previous loss occurrences for the basic unit.</td>
</tr>
<tr>
<td></td>
<td>a. If the Inspection Number equals 1, enter “0.”</td>
</tr>
<tr>
<td></td>
<td>b. Enter the sum of all Preliminary Indemnities (item 32) calculated during previous loss occurrences. This figure cannot exceed the amount entered in item 17a.</td>
</tr>
<tr>
<td></td>
<td>c. Complete this entry on only the first page of each inspection when multiple-page basic unit production worksheet forms are required.</td>
</tr>
<tr>
<td>17c.</td>
<td><strong>Effective Amount of Insurance:</strong> Basic Unit Amount of Insurance (item 17a) minus Basic Unit Previous Indemnities (item 17b). For multiple page production worksheets to account for a basic unit with more than six optional units, enter the amount from the previous page’s column G. Unit No.’s Effective Amount of Insurance Remaining (item 36). An upward-revised Clam Inventory Value Report is used where additional insurance coverage is purchased for the remainder of the crop year to add coverage for added clam inventory and/or to cover restocked clams after a loss. There is a 30-day waiting period for restock or added coverage to become effective. Coverage is not retroactive.</td>
</tr>
<tr>
<td>18a.</td>
<td><strong>Basic Unit Crop Year Deductible:</strong> The current basic unit reported Total Inventory Value (from the Clam Inventory Value Report) plus any revisions times (1.00 minus the coverage level percent expressed as a decimal), in whole dollars. Complete this entry on only the first page of each inspection when multiple-page basic unit claim forms are required.</td>
</tr>
<tr>
<td>18b.</td>
<td><strong>Basic Unit Previous Occurrence Deductible(s):</strong> The applied Basic Unit Occurrence Deductible from previous loss occurrences for the basic unit.</td>
</tr>
<tr>
<td></td>
<td>a. If the Inspection Number equals 1, enter “0.”</td>
</tr>
</tbody>
</table>
b. Enter the sum of all occurrence deductibles applied (29g) from previous loss occurrences. This figure cannot exceed the amount entered in item 18a.

c. Complete this entry on only the first page of each inspection when multiple-page basic unit claim forms are required.

18c. **Effective Crop Year Deductible (CYD):** Basic Unit Crop Year Deductible (item 18a) minus Basic Unit Previous Occurrence Deductible (item 18b). For multiple page production worksheets due to a basic unit with more than six optional units, enter the amount from the previous page’s column G. Unit No., Crop Year Deductible Remaining (item 31).

**SECTION II - THIS LOSS**

There are six "A. Unit No." through "F. Unit No." columns provided on each production worksheet. If optional units are applicable, use one column for each optional unit and enter its unit number, e.g., 00101, etc., and use additional pages if the basic unit has more than six optional units. If optional units are NOT applicable, use the left hand column, "A. Unit No." to calculate the loss. Complete "G. Summary" on the last page of the production worksheets, to document the basic unit loss. For “CAT” policies with two practices, use one column for each practice completing the requested information through item 28. Add the entries in column A and B to obtain basic unit totals and enter the resulting sums on the appropriate line of column G. Complete column G in the normal manner to document the basic unit loss. (The occurrence deductible must be calculated from the sum of both practices.)

19. **Inspection Number:** If the inspection is due to a notice of damage, enter the number of the inspection, (e.g., 1), otherwise leave blank.

20. **Reported Basic Unit Value:** Sum the Basic Unit Amount of Insurance (item 17a) plus the Basic Unit Crop Year Deductible (item 18a). Sum the Clam Inventory Value Report and any Revised Clam Inventory Value Reports in effect for the basic unit on the date the damage occurs.

21. **Sum of Prev. Losses:** The sum of all previous basic unit losses (17b + 18b).

22. **Basic Unit Value Before Loss:** Sum all Unit Values Before Loss (item 25) in the Basic Unit. For CAT and for policies without optional units, the Unit Value Before Loss and the Basic Unit Value Before Loss are the same.

23. **Under Reporting Factor:** The lesser of a) 1.000, or b) ((the Reported Basic Unit Value (item 20) minus Sum of the Previous Losses (item 21)) divided by the Basic Unit Value (item 22)), rounded to three decimal places (e.g., .775).

24. **Damage Similar to Other Lease Parcels in the area:** Check "Yes" or "No." Check "Yes" if amount and cause of damage due to insurable causes is similar to the experience of other clam lease parcels in the area. If "No" is checked, explain in the narrative.

24. **Columns A. Through G.:** In the spaces provided, enter:
a. For a BASIC UNIT WITHOUT OPTIONAL UNITS, the five-digit unit number (e.g., 00100).

b. For a basic “CAT” unit when two practices are applicable, enter the five-digit unit number and the appropriate PRACTICE code in columns 24A and 24B.

c. For a BASIC UNIT WITH OPTIONAL UNITS, the five-digit unit number (e.g., 00101) in column 24A. Complete column B through F for each additional optional unit, continuing on to additional worksheet pages, columns A through F, as necessary. Due to the nature of the occurrence deductible and its effect on the indemnity calculation, the order of optional units listed in columns A through F must be entered and calculated from the lowest optional unit number to the highest (e.g., 00101 followed by 00102, etc), until all optional units are calculated.

d. Complete columns A through F for items 25 through 28, for each practice. Sum the entries in columns A through F to obtain basic unit totals, and enter the resulting sums on the appropriate line of column G. Complete the column G calculation in the normal manner. (The occurrence deductible MUST be calculated from the sum of all types.)

25. **Unit Value Before Loss**: Enter the appraised BEFORE LOSS inventory whole-dollar value for this notice of loss. (Refer to section 2B(3), Definitions).

26a. **Unit Value After Loss – Value remaining-ins. cause**: Enter the appraised AFTER LOSS inventory whole-dollar value for this notice of loss. Transfer the amount in item 25 of the Bag Culture appraisal worksheet or item 32 of the Bottom and Round Pen appraisal worksheet.

26b. **Unit Value After Loss – Value assessed-unins. cause**: Uninsured cause of loss appraisals NOT INCLUDED in the appraisal worksheet, in whole dollars. Document on a Special Report or the Remarks Section of the Appraisal Worksheet.

26c. **Unit Value After Loss – Unit value after loss (TOTAL)**: Sum of item 26a and item 26b, in whole dollars.

27. **Unadjusted Loss**: (item 25) Unit Value Before Loss, as defined in the policy, minus item 26c, Unit Value After Loss (TOTAL) in whole dollars.

28. **Adj. Loss (for Under reporting)**: Item 27, Unadjusted Loss, times item 23, Under Reporting Factor in whole dollars

29. **Occurrence Deductible**:

a. For a basic unit or the first optional unit, enter in whole dollars, the LESSER OF:

   (1) The calculated Occurrence Deductible (Unit Value Before the Loss (item 25) times (100 minus Coverage Level percent) times the Under Reporting Factor (item 23) for the unit); or

   (2) The Effective Crop Year Deductible (item 18c); or
(3) The Adjusted Loss (item 28).

b. For additional optional units with losses, enter in whole dollars, the LESSER OF:

(1) The calculated Occurrence Deductible (Unit Value Before the Loss (item 25) times (100 minus Coverage Level percent) times the Under Reporting Factor (item 23) for the unit); or

(2) The CYD Remaining (item 31 of the previous optional unit); or

(3) The Adjusted Loss (item 28).

30. **Unadjusted Indemnity:** Adjusted Loss (item 28) minus Occurrence Deductible (item 29).

31. **CYD Remaining:**

a. For a basic unit or first optional unit within a basic unit, subtract the calculated Occurrence Deductible (item 29) from the Effective Crop Year Deductible (item 18c) and record in whole dollars.

b. For additional optional units, subtract the calculated Occurrence Deductible (item 29) from the CYD Remaining (item 31 of the previous optional unit), and record in whole dollars.

c. The CYD Remaining must be equal to or greater than zero.

32. **Preliminary Indemnity:**

a. For the first basic unit or the first optional unit within a basic unit, enter the LESSER OF the Unadjusted Indemnity (item 30) or the Effective Amount of Insurance (item 17 c), in whole dollars.

b. For additional optional units within the basic unit, enter the LESSER OF the Unadjusted Indemnity (item 30) or the Effective Amount of Insurance Remaining (item 36 of the previous optional unit) in whole dollars.

33. **Share:** Insured’s interest in the crop to three decimal places, determined at the time of inspection, but will not exceed the insured’s share at the earlier of the time of loss or the beginning of harvest (e.g. 1.000).

34. **Indemnity:** The result of the Preliminary Indemnity (item 32), times Share (item 33), rounded to whole dollars.

35. **Effective Amount of Insurance Remaining:**

a. For a basic unit or the first optional unit within a basic unit, enter the result of the Effective Amount of Insurance (item 17c) for the basic unit minus the Preliminary Indemnity (item 32) for this unit, in whole dollars.
b. For additional optional units within a basic unit, enter the Effective Amount of Insurance Remaining (item 35 of the previous optional unit) minus the Preliminary Indemnity (item 32) for this optional unit, in whole dollars.

36. **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. Explain any uninsured causes, unusual, or controversial cases.
   
   b. Explain any errors found on the Inventory Value Report.
   
   c. Explain a "No" checked in item 24.
   
   d. Explain any difference between inspection and signature dates. For an ABSENTEE insured, enter the date of the inspection AND the date of mailing the Production Worksheet for signature.
   
   e. When any other adjuster or supervisor or consultant accompanied the adjuster on the inspection, enter the code number of any adjuster, or supervisor, and the name of any consultant present during the inspection and the date of inspection.
   
   f. Explain any delayed notices or delayed claims as instructed in the LAM.
   
   g. Document any other pertinent information. If on an attachment, enter "See attachment”.
   
   h. Document the insured’s coverage level.

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

38. **Adjuster’s Signature, Code Number, and Date:** Signature of adjuster, code number, and date signed after the insured (or 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.

39. **Witness’ Signature and Date:** Signature of witness and date signed after the insured (or insured’s authorized representative) and adjuster has signed. For an absentee insured or if signatures are not observed, leave blank.

40. **Other Signature(s) and Date(s):** Signature(s) of others if present when the loss adjustment was conducted, e.g., consultants, etc., and the date signed.

41. **Page:** Page 1 of 1, Page 1 or 2, Page 2 of 2, etc.
## C. PRODUCTION WORKSHEET CALCULATION REFERENCE

For each loss occurrence

The following items are completed ONLY on page 1 of the production worksheet for each basic unit.

<table>
<thead>
<tr>
<th>17a Basic Unit Amount of Insurance Report</th>
<th>17b Basic Unit Previous Indemnities Sum of 32, prev. losses</th>
<th>17c Effective Amount of Insurance 17a - 17b</th>
</tr>
</thead>
<tbody>
<tr>
<td>18a Basic Unit Crop Year Deductible Report</td>
<td>18b Basic Unit Previous Occurrence Deductibles Sum of 29, prev. losses</td>
<td>18c Effective Crop Year Deductible 18a - 18b</td>
</tr>
<tr>
<td>20 Reported Basic Unit Value 17a + 18a</td>
<td>21 Sum Prev. Losses (Adj. Losses) 17b + 18b</td>
<td>22 Basic Unit Value Sum of 25</td>
</tr>
<tr>
<td></td>
<td>23 Under reporting factor (URF) (20 – 21) ÷ 22</td>
<td></td>
</tr>
</tbody>
</table>
The following items are completed for each unit whether it is a basic or optional unit.

<table>
<thead>
<tr>
<th>Item</th>
<th>Optional Unit 00100</th>
<th>Optional Unit 00102...etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 Unit Value Before Loss</td>
<td>Adjuster det.</td>
<td>Adjuster det.</td>
</tr>
<tr>
<td>26 Unit Value After Loss</td>
<td>26a. Value remaining-ins. cause Adjuster det.</td>
<td>Adjuster det.</td>
</tr>
<tr>
<td></td>
<td>26c. (TOTAL)</td>
<td>26a + 26b</td>
</tr>
<tr>
<td>26  Unit Value After Loss</td>
<td>26a. Value remaining-ins. cause Adjuster det.</td>
<td>Adjuster det.</td>
</tr>
<tr>
<td></td>
<td>26c. (TOTAL)</td>
<td>26a + 26b</td>
</tr>
<tr>
<td>27 Unadjusted Loss</td>
<td>25 - 26c</td>
<td>25 - 26c</td>
</tr>
<tr>
<td>28 Adj. Loss (for Under reporting; 27 X 23)</td>
<td>27 X 23</td>
<td>27 X 23</td>
</tr>
<tr>
<td>29 Occurrence Ded. OD (Unit Value Before Loss) (URF) (100 - level %)</td>
<td>&lt;(28, calc. 29 or 18c)</td>
<td>&lt;(28, calc. 29 or 31)</td>
</tr>
<tr>
<td>30 Unadjusted Indemnity</td>
<td>28 - 29A</td>
<td>28 - 29</td>
</tr>
<tr>
<td>31 CYD Remaining</td>
<td>18c - 29A</td>
<td>31A - 29B =&gt; etc.</td>
</tr>
<tr>
<td>32 Preliminary Indemnity</td>
<td>&lt;(30 or 17c)</td>
<td>&lt;(30 or 36A) =&gt; etc.</td>
</tr>
<tr>
<td>33 Percent Share</td>
<td>Report</td>
<td>Report</td>
</tr>
<tr>
<td>34 Indemnity</td>
<td>32 X 33</td>
<td>32 X 33</td>
</tr>
<tr>
<td>35 Effective Amount of Insurance Remaining</td>
<td>17c - 32A</td>
<td>36A - 32B =&gt; etc.</td>
</tr>
</tbody>
</table>
### CLAM PRODUCTION WORKSHEET/CLAIM FORM

**For Illustration Purposes Only**

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultivated Clam</td>
<td>Parcel 17</td>
<td>GPS Coordinates, lat: 03740109, long: 12223825</td>
<td>JAN 10</td>
<td>FREEZE</td>
<td>100</td>
<td>Any Insurance Company</td>
<td>Any City, Any State</td>
<td>XXXXXXXX</td>
<td>XXXXXXXX</td>
<td>YYYY</td>
<td>00101</td>
<td>00101 00102</td>
<td>Yes</td>
<td>No X</td>
<td>Yes No X</td>
</tr>
</tbody>
</table>

#### SECTION I - IMMEDIATELY PRIOR TO THIS LOSS

<table>
<thead>
<tr>
<th>17a. Basic Unit Amount of Insurance</th>
<th>17b. Basic Unit Previous Indemnity(ies) (Sum of 32, previous losses)</th>
<th>17c. Effective Amount of Insurance (17a - 17b or 36 from page 1 &gt; 6 units)</th>
</tr>
</thead>
<tbody>
<tr>
<td>75,000</td>
<td>0</td>
<td>75,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>18a. Basic Unit Crop Year Deductible (Inventory Value X (1.00 - Cov. Level))</th>
<th>18b. Basic Unit Previous Occurrence Deductible(s) (Sum of 29, previous losses)</th>
<th>18c. Effective Crop Year Deductible (CYD) (18a - 18b or 31 from page 1 if &gt; 6 units)</th>
</tr>
</thead>
<tbody>
<tr>
<td>25,000</td>
<td>0</td>
<td>25,000</td>
</tr>
</tbody>
</table>

#### SECTION II - THIS LOSS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>10,000</td>
<td>0</td>
<td>95,000</td>
<td>1,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>24. Damage similar to other lease parcels in the area?</th>
<th>25. Unit value before loss</th>
<th>26. Unit value after loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes X</td>
<td>80,000</td>
<td>26a. Value remaining-ins. cause</td>
</tr>
<tr>
<td></td>
<td>15,000</td>
<td>26b. Value assessed-unins. cause</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26c. Unit value after loss (Total) (26a + 26b)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26d. Value assessed-unins. cause</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26e. Unit value after loss (Total) (26a + 26b)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>53,540</td>
<td>53,540</td>
<td>20,000</td>
<td>33,540</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[Remaining Units - (31 - 29)]</td>
<td>[Remaining Units &lt; (30 or 31)]</td>
<td>1.000</td>
<td>33,540</td>
</tr>
<tr>
<td>5,000</td>
<td>33,540</td>
<td></td>
<td>3,750</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>35. Effective Amount of Insurance Remaining [Opt. Unit A - (17c - 32)]</th>
<th>36. Narrative (If more space is needed, attach a Special Report)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Remaining Units - (35 - 32)]</td>
<td>Insured selected 75% coverage level. This production worksheet example incorporates the appraisal worksheet information.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>37. Narrative (If more space is needed, attach a Special Report)</th>
</tr>
</thead>
</table>

This form example does not illustrate all required entry items (e.g., certification statements, signatures, etc.).
| 1. Crop and Code No. | Cultivated Clam
| 2. Basic Unit | 00100
| 3. Legal Description | Parcel 17
| 7. Company | Any Insurance Company
| 8. Name of Insured | Any City, Any State
| 9. Claim Number | XXXXXXX
| 10. Policy Number | XXXXXXX
| 11. Crop Year | YYYY
| 12. Optional Units | 00101 00102
| 13. Date Notice of Loss | MM/DD/YYYY
| 14. Assign. of Indemnity | Yes No X
| 15. Transfer of Right to Indemnity | Yes No X
| 16. Companion Policy(ies) | 

### SECTION I - IMMEDIATELY PRIOR TO THIS LOSS

| 17a. Basic Unit Amount of Insurance | 75,000
| 17b. Basic Unit Previous Indemnity(ies) | (Sum of 32, previous losses) 37,290
| 17c. Effective Amount of Insurance | (17a - 17b or 36 from page 1 if > 6 units) 37,710
| 18a. Basic Unit Crop Year Deductible | (Inventory Value X (1.00 - Cov. Level)) 25,000
| 18b. Basic Unit Previous Occurrence Deductible(s) | (Sum of 29, previous losses) 23,370
| 18c. Effective Crop Year Deductible (CYD) | (18a - 18b or 31 from page 1 if > 6 units) 1,630

### SECTION II - THIS LOSS

| 20. Reported Basic Unit Value | 100,000
| 22. Basic Unit Value Before Loss | (Sum of Item 25 entries) 39,460
| 23. Under Reporting Factor (URF) | (1.000 or ((20 - 21) ÷ 22)) 1.000

| 24. Damage similar to other lease parcels in the area? | Yes No X
| 25. Unit value before loss | 25,460 14,000
| 26. Unit value after loss | 0 8,500
| 26b. Value assessed-unins. cause | 0 0
| 26c. Unit value after loss (Total) | 25,460 8,500
| 27. Unadjusted Loss | 25 - 26c 5,500
| 28. Adj. Loss (for Under reporting; item 27 x item 23) | 0 5,500
| 29. Occurrence Ded. (OD) Unit Value Before Loss x URF x (100 – level 75 %) | 0 1,375
| 30. Unadjusted Indemnity | 28 - 29 4,125
| 31. CYD Remaining [Opt. Unit A - (18c - 29)] | 1,630 255
| 32. Preliminary Indemnity [Opt. Unit A <= (30 or 17c)] [Remaining Units <= (30 or 33)] | 0 4,125
| 33. Percent Share | 1.000
| 34. Indemnity | 0 4,125
| 35. Effective Amount of Insurance Remaining | Opt. Unit A - (17c - 32) Remaining Units - CYD 37,710 33,585

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