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HAWAII TROPICAL TREES PILOT LOSS ADJUSTMENT STANDARDS HANDBOOK

2014 and Succeeding Crop Years

**RISK MANAGEMENT AGENCY
KANSAS CITY, MO 64133**

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| TITLE: HAWAII TROPICAL TREES PILOT LOSS ADJUSTMENT STANDARDS HANDBOOK | NUMBER: 25850 |
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REASON FOR ISSUANCE

The Hawaii Tropical Trees Pilot Loss Adjustment Standards Handbook is being issued and effective for the Hawaii Tropical Trees pilot program available beginning with the 2014 crop year.

HAWAII TROPICAL TREES PILOT LOSS ADJUSTMENT STANDARDS HANDBOOK

CONTROL CHART

| Hawaii Tropical Trees Pilot Loss Adjustment Standards Handbook | | | | | | | |
|----------------------------------------------------------------|-----------------|---------------|-----------------|-------------------|--------------------|---------|---------------------|
| | TP Page(s) | TC Page(s) | Text Page(s) | Exhibit Number | Exhibit Page(s) | Date | Directive Number |
| Insert | Entire Handbook | | | | | | |
| Current Index | 1-2 | 1-2 | 1-9 | 1 | 10 | 09-2013 | FCIC-25850 |
| | | | | 2 | 11-13 | 09-2013 | FCIC-25850 |
| | | | | 3 | 14-18 | 09-2013 | FCIC-25850 |
| | | | | 4 | 19-30 | 09-2013 | FCIC-25850 |

FILING INSTRUCTIONS

This handbook replaces the 2011 Hawaii Tropical Trees Pilot Loss Adjustment Standards Handbook, FCIC-25850 (10-2010). This handbook is effective for the 2014 and succeeding crop years and is not retroactive to any 2013 or prior crop year determinations.

**HAWAII TROPICAL TREES LOSS ADJUSTMENT STANDARDS
HANDBOOK
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(RESERVED)

PART 1 GENERAL INFORMATION AND RESPONSIBILITIES

1 General Information

A. Purpose and Objective

The RMA-issued loss adjustment standards for this crop are the official standard requirements for adjusting losses in a uniform and timely manner. The RMA-issued standards for this crop and crop year are in effect as of the signature date for this crop handbook located at www.rma.usda.gov/handbooks/25000/index.html.

This handbook remains in effect until superseded by reissuance of either the entire handbook or selected portions (through amendments or bulletins).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

B. Related Handbooks

The following table identifies handbooks that shall be used in conjunction with this handbook.

| Handbook | Relation/Purpose |
|----------|----------------------------------------------------------------------------------------------------------|
| CIH | Provides overall general underwriting (not crop specific) process. |
| DSSH | Provides the form standards and procedures for use in the sales and service of crop insurance contracts. |
| LAM | Provides overall general loss adjustment (not crop-specific) process. |

- (1) Terms, abbreviations, and definitions general (not crop specific) to loss adjustment are identified in the LAM.
- (2) Terms, abbreviations, and definitions specific to HTT loss adjustment and this handbook are in exhibits 1 and 2, herein.

C. CAT Coverage

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

D. Irrigated Practice

Refer to the CIH and LAM for irrigated practice guidelines.

2 AIP Responsibilities

A. Utilization of Standards

All AIPs shall 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.

B. Form 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:

- (1) One legible copy to the insured; and
- (2) The original and all remaining copies as instructed by the AIP.

C. Record Retention

It is the AIP's responsibility to maintain records (documents) as stated in the SRA and described in the LAM.

D. Form Standards

- (1) The entry items and completion instructions in exhibits 3 and 4 are the minimum requirements for the HTT Appraisal Worksheet and Claim Form (hereafter referred to as "Production Worksheet"). All entry items are "Substantive" (they are required).
- (2) Refer to the DSSH for the Certification Statement [(Substantive) See Exhibit 2]; Privacy Act Statement [(Substantive) See Exhibit 3] and Nondiscrimination Statement [(Substantive) See Exhibit 4].
- (3) Refer to the DSSH for other crop insurance form requirements (such as point size of font, and so forth).
- (4) The current DSSH can be found at www.rma.usda.gov/underwriting.

3-10 (Reserved)

PART 2 POLICY INFORMATION

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

11 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 insured crop will be all of the trees of each HTT crop in the county for which the insured elects insurance coverage, in which the insured has a share and for which a premium rate is provided by the actuarial documents:
 - (a) That are set out in the county listed on the application;
 - (b) That are grown to produce a crop intended to be sold for human consumption;
 - (c) For which the applicant provides evidence of at least 4 consecutive years of experience growing the crop, excluding the year of setout;
 - (d) That are inspected, and acceptable to the insurance provider; and
 - (e) That are HTT crops specifically listed in the CP.
- (2) HTT crops interplanted with other trees or other perennial crops are insurable, unless the insurance provider inspects the acreage and determines it does not meet the requirements contained in the HTT Pilot CP.
- (3) In addition to the exclusions listed in the BP, insurance will not be provided for any trees that are:
 - (a) Dead, unsound, diseased, or unhealthy;
 - (b) Toppled or uprooted; or
 - (c) Grown on acreage designated on the actuarial documents as uninsurable.
- (4) Insurance will not attach on papaya trees
 - (a) That have not been set out at least 12 months prior to December 31 preceding the crop year, unless specified in the special provisions; and
 - (b) That have reached age four before the beginning of the crop year.
- (5) Insurance will not attach to any replanted coffee trees on acreage where the coffee trees were determined to be dead in accordance with HTT CP due to a nematode infestation, unless the trees are either chipped and mulched or removed from the intended replanting site, the soil is treated according to recommend practices, and the site is fallowed for the period of time specified in the SP.

11 Insurability (continued)

- (6) Insurance will not attach to acreage where replacement trees or trees on new acreage have been planted after the date that insurance has attached for the crop year. Insurance may attach on such acreage for the following crop year on January 1. Papaya trees are not insurable during the twelve months after set out, unless otherwise specified in the SP.

12 Unit Division

Refer to the insurance contract for unit provisions. Unless limited by the CP or SP, you may divide basic unit, as defined by the BP, into optional units, if for each optional unit, the insured meets all conditions stated in the applicable CP.

13 Amount of Insurance

- (1) Use the corresponding value by age specified on the actuarial documents for each tree age to establish the amount of insurance for the unit.
- (2) For each age, multiply the number of reported insurable trees per unit by the applicable tree reference price (or the CTV reference price if the CTVE is elected) from the actuarial documents for the county. Total these amounts and multiply the total by the coverage level the insured elects and the insured's share.

14-20 (Reserved)

PART 3 APPRAISALS

Tree counts for all types of inspections will be conducted in accordance with procedures as specified in this handbook and the LAM.

21 Election of the CTVE

- (1) If the insured elected the CTVE, complete two separate Appraisal Worksheets.
 - (a) Complete the first appraisal worksheet for the HTT Pilot CP and use the Tree Reference Prices.
 - (b) Complete the second appraisal worksheet for the CTVE and use the CTV reference prices.
- (2) Apply the same coverage level for the unit for the base pilot policy and the CTVE.
- (3) Complete the CTVE appraisal worksheet after completing the appraisal for the base pilot policy.
- (4) Use the percent of damage recorded in Part II of the base policy Appraisal Worksheet to complete the percent of damage entry in Part II of the CTVE Appraisal Worksheet (Do not complete Part III of the CTVE Appraisal Worksheet).

22 Appraisal Method

| Appraisal Method... | Use... |
|---------------------|---------------------|
| Dead/Destroyed Tree | For all appraisals. |

23 Dead/Destroyed Tree Appraisal Method

Use the appraisal worksheet to record appraisal determinations for this appraisal method.

A. For all crops:

- (1) Count the number of insurable trees in the unit.
- (2) Count the insurable trees that are dead or destroyed due to insurable causes of loss that occurred during the insurance period for the crop year.
- (3) Count the insurable trees that are dead or destroyed due to uninsurable causes of loss that occurred during the insurance period for crop year. Do not include these trees in the tree counts when determining the percent of dead/destroyed trees.

B. A tree is considered dead whenever:

- (1) A banana tree
 - (a) The tree (mother plant) has been uprooted or broken.
 - (b) **NOTE:** The banana “tree” is a group of stalks residing in a single “banana mat.” The banana mat is the entire plant, consisting of one or more pseudostems (upright, trunk-like structures) formed by tightly packed concentric layers of sheaths, an underground rhizome, and a fibrous root system. The oldest, or tallest stalk is the “mother plant,” with the younger or smaller stalks, called “daughter plants” growing up and around the mother plant. If the mother plant is killed, the entire tree is dead, since the daughter plants exist via the root system of the mother plant.
- (2) A papaya tree
 - (a) The tree has been uprooted.
 - (b) All leaves have been stripped from the tree.
 - (c) The tree is broken.
- (3) A coffee tree
 - (a) There is no live wood in all of the verticals, or in the stump.
 - (b) The tree is uprooted.
 - (c) All verticals have been broken to less than one inch above the ground.
 - (d) The University of Hawaii or the Hawaii State Department of Agriculture has diagnosed a nematode infection of 50 percent and the nematode infestation has reduced the tree’s expected production by at least 40 percent over the past two years. The University of Hawaii must verify the 40 percent production reduction is due to a nematode infestation and the insured’s records must document the reduction in production.
 - (e) Nematode infestation is an insurable cause of loss only for coffee trees that are five or more years old.
- (4) Any live tree that the AIP authorizes to be destroyed to contain disease spread. The insured must destroy trees to control the spread of BBTV or PRV according to PPCB procedures and must complete the destruction of the trees prior to the final claim settlement.

24 Deviations and Modifications

- (1) Deviations in appraisal methods require FCIC written authorization (as described in the LAM) prior to implementation.
- (2) There are no pre-established modifications contained in this handbook. Refer to the LAM for additional information.

25 General Information for Worksheet Entries and Completion Procedures

- (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) Check the applicable box by the appraisal worksheet title to indicate BP or CTVE appraisal worksheet.
- (4) Use a separate appraisal worksheet for each inspected unit and by practice or type, if the SP specifies separate practices or types. Use a continuation sheet if the number of trees counted exceeds the space on the appraisal worksheet.
- (5) If the insured elected the CTVE, complete Part II of the appraisal worksheet. Transfer information from Part I of the BP appraisal worksheet. Do not complete Part III of the CTVE appraisal worksheet. Attach the CTVE appraisal worksheet to the BP appraisal worksheet.
- (6) Use the CTV reference prices to complete Part II of the CTVE appraisal worksheet.
- (7) Complete the HTT Appraisal Worksheet and continuation sheet in the following order:
 - (1) PART I – INSURED'S INFORMATION
 - (2) PART III – APPRAISAL AND TREE COUNT
 - (3) PART II – PERCENT DEAD
- (8) Enter all percent entries as three-place decimals (e.g., enter 79.4% as .794; enter 100% as 1.000).

26-30 (Reserved)

PART 4 PRODUCTION WORKSHEET

31 General Information for Worksheet Entries and Completion Procedures

- (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).
- (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) Instructions labeled “**PRELIMINARY**” apply to preliminary inspections only. Instructions labeled “**FINAL**” apply to final inspections only. Instructions not labeled apply to ALL inspections.

For this program, multiple final claims may be submitted. A “PRELIMINARY” is only applicable up to the time losses exceed the coverage level percent dollar deductible. Payable claims will always be labeled: “FINAL.”
- (6) If the final remaining value of the entire unit is less than 20 percent of the original unit value at the time insurance attached (value of dead or destroyed trees exceeds 80 percent of the insurable value for the unit), the entire unit will be considered a 100 percent loss.
- (7) Multiple claims may be processed for the unit. For each claim for the unit, the dollar loss will be additive (carried forward) to the final claim for the unit.
- (8) The total of all indemnities for the unit must not exceed the lesser of the amount of insurance for the unit or the unit value.

- (9) To assure that all claims can be properly accounted for, date(s) of final notice, the cause of loss, and the indemnity paid for each previous claim for the unit during the crop year must be recorded in the narrative of the Production Worksheet or in a Special Report.
- (10) If the insured has elected the Comprehensive Tree Value Endorsement, the adjuster will complete two separate Production Worksheets: the first for the Base Policy that uses the Tree Reference Prices and the second for the Comprehensive Tree Value Endorsement that uses the applicable CTV Reference Prices. The actuarial documents provide all prices. The same coverage level for the unit applies to the BP and the endorsement. Complete the BP claim prior to the CTV Endorsement claim. If no indemnity is due on the BP, do not complete the CTV Endorsement Production Worksheet.
- (11) Standard production worksheet items are numbered consecutively in exhibit 4. An example production worksheet is also provided to illustrate how to complete item entries.

Acronyms and Abbreviations

The following table provides the acronyms and abbreviations used in this handbook.

| Approved Acronym/Abbreviation | Term |
|----------------------------------|-------------------------------------------------------------|
| AIP | Approved Insurance Provider |
| BBTV | Banana Bunchy Top Virus |
| BP | Basic Provisions |
| CAT | Catastrophic Risk Protection |
| CIH | Crop Insurance Handbook, FCIC-18010 |
| CLU | Common Land Unit |
| CP | Crop Provisions |
| CTV | Comprehensive Tree Value |
| CTVE | Comprehensive Tree Value Endorsement |
| DSSH | Document and Supplemental Standards Handbook, FCIC-24040 |
| FCIC | Federal Crop Insurance Corporation |
| LAM | Loss Adjustment Manual, FCIC-25010 |
| OLO | Occurrence Loss Option |
| PPCB | Plant Pest Control Branch, Hawaii Department of Agriculture |
| PRSV | Papaya Ringspot Virus |
| RMA | Risk Management Agency |
| SP | Special Provisions |

Definitions

Age means Year of Growth. Age will be determined on December 31st according to the following table:

| Year | Months After Set Out |
|------|----------------------------|
| 1 | ≤ 12 |
| 2 | 13-24 |
| 3 | 25-36 |
| 4 | 37+ |

Amount of Insurance is, for each crop, the dollar amount for the unit calculated by multiplying the number of insurable trees reported by age times the tree reference price by age, totaling these values, multiplying the result times the coverage level selected by the insured, and then multiplying this result times the insured's share.

Broken means a trunk that is snapped into two or more sections.

Banana Daughter Plant is the younger or smaller stalk residing in a single banana mat that is not insurable.

Banana Mother Plant is the oldest or tallest stalk considered as the banana tree.

CTV Amount of Insurance is the dollar amount (by unit) calculated by multiplying the number of insurable trees of each crop reported by tree age times the CTV reference price for the age of the trees, totaling these values, multiplying the result times the coverage level selected by the insured, and then multiplying this result times the insured's share.

CTV Reference Price is the price per tree by tree age listed on the actuarial documents for tree value replacement that is used in calculating the CTV unit value, the CTV amount of insurance, and the indemnity.

CTV Underreport Factor is the result of dividing the CTV amount of insurance by the CTV unit value, rounded to two decimal places and not to exceed 1.00.

CTV Unit Value is the amount determined by multiplying the number of insurable trees in the unit on the day before the loss (but not reduced for any insured loss that occurred during the crop year) times the CTV reference prices listed in the actuarial documents for the applicable tree ages, totaling these values, and then multiplying the result times the coverage level selected by you.

Comprehensive Tree Value Endorsement (CTVE) is a separate coverage endorsement to the Base Policy that the insured may elect for an additional premium.

Definitions (continued)

Crop means each of the following tropical trees is a separate crop under the HTT Pilot Crop Provisions:

Banana trees (*Musa acuminata*)

Coffee trees (*Coffea Arabica*)

Papaya trees (*Carica papaya*)

Crop Year is, in lieu of the definition in the BP, the period beginning January 1 and extending through December 31 of the same calendar year. The crop year will be designated by the calendar year in which the insurance attaches.

Dead (Death) means trees that die or will die due to insurable causes of loss specified in section 11 (a) – (i) of the HTT Pilot CP.

Destroyed Trees are live trees that are destroyed with our consent to control the spread of BBTv or PRV as specified in sections 11(j) and 12 (c) of the HTT Pilot CP. This term is only used to describe the destruction of live trees to control the spread of BBTv or PRV and not trees that die as a result of other insured causes of loss specified in section 11 (a) – (i) of the HTT Pilot CP.

Nematodes are (*Meloidogyne konaensis*: the Kona Coffee root-knot nematode) - The small, parasitic roundworms that reside in the earth in some areas of Kona, which reduce production and could result in the death of coffee trees growing in these areas.

PPCB is the Plant Pest Control Branch, an agency of the Hawaii Department of Agriculture, or a successor agency, which identifies trees with BBTv and PRV and is responsible for controlling the spread of those diseases.

Replacement Trees are trees set out in existing orchards to replace trees that have died, been destroyed and/or removed.

Set Out means the event of the tree being transplanted or direct seeded into the orchard.

Toppled means a tree that is leaning and in danger of falling, but is not uprooted.

Tree Reference Price is the value per tree by age contained in the actuarial documents.

Underreport Factor is the result of dividing the amount of insurance by the unit value, rounded to two decimal places and not to exceed 1.00.

Unit Value is the amount determined by multiplying the number of insurable trees in the unit on the day before the loss (but not reduced for any insured loss that occurred during the crop year) times the tree reference prices contained in the actuarial documents for the applicable tree ages, adding these values, multiplying by the result times the coverage level selected by the insured, and then multiplying this result times the insured's share.

Definitions (continued)

Uprooted means a tree that is not upright and that has an exposed root system.

Verticals are coffee tree branches that always grow upward from the trunk of the tree.

Form Standards – Appraisal Worksheet

| Element/Item Number | Description |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Appraisal Worksheet Type | Check the appropriate box to indicate whether this is a worksheet for the base policy or CTVE. |
| Company | Name of AIP, if not preprinted on the worksheet. |
| Claim Number | Claim number assigned by the AIP. |
| 1. Insured's Name | Name of insured that identifies EXACTLY the person (legal entity) to whom the policy is issued. |
| 2. Policy Number | Insured's assigned policy number. |
| 3. County | Name of the county where the trees are insured. |
| 4. Unit Number | Unit number from the Summary of Coverage after it is verified to be correct. |
| 5. Crop/Type/Practice | Four –digit crop code and three-digit type and practice code entered exactly as specified on the actuarial documents for the crop/type/practice that the insured grows. |
| 6. Crop Year | Four-digit crop year, as defined in the policy, for which the claim is filed. |

Part III – APPRAISAL AND TREE COUNT

| Element/Item Number | Description |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Trees Uninsurable | Enter the number of uninsurable trees. |
| b. Trees Dead by Uninsured Causes | Enter the number of dead trees, by age, through uninsured causes with the designation "DUI" (Dead Uninsured Cause). |
| 19. Number | Make a check mark (✓) for each insurable tree. |
| 20. Age | Enter the age of the trees, as specified in the definitions. Enter 4 as the age of tree if the trees are 4 years or older. |
| 21. Dead | Make a check mark (✓) for each tree DEAD/DESTROYED due to an insurable cause of loss. |
| 22. Total Counted (page one) | Count the total number of check marks in column 19 and column 21 and enter the total number of trees counted (sum of column 19) and the total number of dead/destroyed trees (sum of column 21) for page one. |
| 23. Total Counted (continuation sheets) | Count the total number of check marks in column 19 and column 21 and enter the total number of trees counted (sum of column 19) and the total number of dead/destroyed trees (sum of column 21). |
| 24. Grand Total | Enter the sum of Item 22 and Item 23 (from all pages) to total the number of trees counted and the number of trees destroyed/dead. |
| 25. Total Counted (Age) | Record the total number of trees counted by age of tree for page one and any continuation sheets by counting the number of check marks (column 19) for each age (column 20). |
| 26. Total Dead (Age) | Record the total number of Dead/Destroyed trees counted by age of tree for page one and any continuation sheets by counting the number of check marks (column 21) for each age (column 20). |

Form Standards – Appraisal Worksheet (continued)

The following required entries are not illustrated on the Appraisal Worksheet example below.

| Element/Item Number | Description |
|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 27. Insured's Signature and Date | Insured's (or insured's authorized representative's) signature and date. BEFORE obtaining 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. |
| 28. Adjuster's Code No., Signature, 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/Narrative section of the Appraisal Worksheet (if available); otherwise, document the appraisal date in the Narrative of the Production Worksheet. |
| Page Number | Page numbers - (Example: Page 1 of 1, Page 1 of 2, Page 2 of 2, etc.). |

Part II – PERCENT DEAD

| | |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7. Field ID/Plot Number | Enter the orchard, sub-orchard, or block identification number. |
| 8. Number of Trees | Enter the total Number of Trees counted (all insurable trees) transferred from Item 24, the Grand Totals of the Number Column (Column 19) of Part III – APPRAISAL AND TREE COUNT . CTVE: This will be the same as the Base Policy. |
| 9. Number of Trees (Age) | Enter the number of trees counted by age (1 through 4) from Item 25 (Total Counted by Tree Age) of Part III. – Appraisal and Tree Count to the corresponding row (by age) in Column 9. CTVE: This will be the same as the base policy. |
| 10. Value of Tree (Age) | Enter the Tree Reference Price for the corresponding tree age from the actuarial documents. CTVE: Enter the CTV Reference Price for the corresponding tree age from the actuarial documents. |
| 11. Total Value (Age) | For each tree age, multiply Column 9 (Number of Trees by Age of Tree) by Column 10 (Value per Tree by Age of Tree) to determine the total value by age of tree to the nearest dollar. Sum the result of each tree age to determine the total value of insurable trees and enter the total in the Total line, Column 11. |
| 12. Number of Dead Trees (Age) | Transfer the number of dead/destroyed trees counted by age from Item 26 (Total Dead by Tree Age) of PART III – APPRAISAL AND TREE COUNT to the appropriate corresponding field (age) in Column 12. This will be the same for the Base Policy and CTVE. |

Form Standards – Appraisal Worksheet (continued)

| Element/Item Number | Description |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 13. Total Value of Dead Trees (Age) | For each tree age, multiply Column 12 (Number of Dead Trees by Age of Tree) by Column 10 (Value per Tree by Age of Tree) to determine the value of dead/destroyed trees by age of tree to the nearest dollar. Sum the result of each tree age to determine the total value of dead/destroyed trees and enter it in the Total line, Column 13. |
| 14. Percent Damage | Divide the Total of Column 13 (Total Value of Dead Trees by Age of Tree) by the Total of Column 11 (Total Value by Age of Tree) and enter the result to three decimals. |
| 15. Percent Dead Trees | Divide the Total of Column 12 (Number of Dead Trees by Age of Tree) by the Total of Column 9, (Number of Trees by Age of Tree), rounded to three decimal places. If the insured has elected the OLO, and the result of Item 15 is less than or equal to 3% (0.030), no indemnity is payable on either the Base Policy or CTVE. Do not complete the Claim Form. |
| 16. Deductible | MAKE NO ENTRY. |
| 17. Applicable Percent of Loss | Make NO ENTRY. |
| 18. Value of Production to Count | Make NO ENTRY. |

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

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

Form Standards – Production Worksheet

If the insured has elected the OLO, the Base Policy instructions will apply. Indicate in the narrative if the OLO is in effect.

Enter all percent entries as three-place decimals (e.g., enter 79.4% as .794; enter 100% as 1.000).

| Element/Item Number | Description |
|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Crop/Code # | Enter the crop name and the crop code number of the HTT crop insured. |
| 2. Unit # | Unit number from the Summary of Coverage after it is verified to be correct. Designate when the CTV Endorsement and/or the OLO are in effect. |
| 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 CLUs and tract numbers; GPS identifications; or Grid identifications) as applicable for the crop. |
| 4. Date(s) of Damage | <p>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.</p> <p>If there is no insurable cause of loss and a no indemnity due claim will be completed, MAKE NO ENTRY.</p> |
| 5. Cause(s) of Damage | <p>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.</p> <p>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). If the claim is denied, enter “DC” and refer to the LAM for further instructions.</p> |

Form Standards – Production Worksheet (continued)

| | | | | | | | | | | | | | | | | | |
|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--|--|--|-----------------------|--|--|--|--------------------|--|--|--|------------------------------------------------------------|--|--|--|
| 6. Insured Cause % | <p>PRELIMINARY: MAKE NO ENTRY.</p> <p>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%.</p> <p>If there is no insurable cause of loss, and a no indemnity due claim will be completed, MAKE NO ENTRY.</p> <p>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 percent:</p> <table border="1" data-bbox="735 789 1507 978"> <tr> <td>4. Date(s) of Damage</td><td></td><td></td><td></td></tr> <tr> <td>5. Cause(s) of Damage</td><td></td><td></td><td></td></tr> <tr> <td>6. Insured Cause %</td><td></td><td></td><td></td></tr> <tr> <td colspan="4">Narrative: Additional date of damage – ; Cause of Damage –</td></tr> </table> | 4. Date(s) of Damage | | | | 5. Cause(s) of Damage | | | | 6. Insured Cause % | | | | Narrative: Additional date of damage – ; Cause of Damage – | | | |
| 4. Date(s) of Damage | | | | | | | | | | | | | | | | | |
| 5. Cause(s) of Damage | | | | | | | | | | | | | | | | | |
| 6. Insured Cause % | | | | | | | | | | | | | | | | | |
| Narrative: Additional date of damage – ; Cause of Damage – | | | | | | | | | | | | | | | | | |
| 7. Company/Agent | Name of the 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 | <p>PRELIMINARY: MAKE NO ENTRY.</p> <p>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.</p> <p>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.</p> | | | | | | | | | | | | | | | | |
| 13. Est. Prod. Per Acre | MAKE NO ENTRY. | | | | | | | | | | | | | | | | |
| 14. Date(s) of Notice of Loss | <p>PRELIMINARY:</p> <p>(1) 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, and YYYY) for each notice.</p> <p>(2) A notice of damage or loss for a third preliminary inspection (if needed) requires an additional set of Production Worksheets. Enter</p> | | | | | | | | | | | | | | | | |

Form Standards – Production Worksheet (Continued)

| Element/Item Number | Description |
|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 14. Date(s) of Notice of Loss (continued) | <p>the date of notice for a third preliminary inspection in the 1st space of item 14 on the second set of Production Worksheets.</p> <p>(3) Reserve the “Final” space on the first page of the first set of Production Worksheets for the date of notice for the final inspection.</p> <p>(4) If the inspection is initiated by the AIP, enter “Company Insp.” instead of the date.</p> <p>(5) If the notice does not require an inspection, document as directed in the Narrative instructions.</p> <p>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, and YYYY) for the “FINAL” inspection in the FINAL space on the first page of the first set of Production Worksheets. For a delayed notice of loss or delayed claim, refer to the LAM.</p> |
| 15. Companion Policy(s) | <p>(1) If no other person has a share in the unit (insured has 100 percent share), MAKE NO ENTRY.</p> <p>(2) 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.”</p> <p>(a) 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.</p> <p>(b) 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 and/or agent (and contract number) if known.</p> <p>(c) If unable to verify the existence of a companion contract, enter “Unknown” and contact the AIP for further instructions.</p> <p>(3) Refer to the LAM for further information regarding companion contracts.</p> |

Form Standards – Production Worksheet (Continued)

Section I – Determined Acreage Appraised, Production, and Adjustments

Make separate line entries for varying:

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

| Element/Item Number | Description |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 16. Field ID | The orchard (sub-orchard or block) identification symbol from an Orchard Location Plat Map. Refer to the narrative instructions. In the margin of the last line entry (or in a separate column, enter the date of inspection for the last line entry for each inspection. |
| 17. Multi-Crop Code | MAKE NO ENTRY. |
| 18. Reported Trees | In the event of over-reported trees, handle according to the individual AIP's instructions. In the event of under-reported trees, enter the reported trees for the orchard or sub orchard. |
| 19. Determined Trees | <p>PRELIMINARY: MAKE NO ENTRY.</p> <p>FINAL: Enter the number of insurable trees for the respective age, from Part II of the Appraisal Worksheet, Column 9.</p> <p>Insurable trees may NOT be estimated. Indicate on an orchard diagram (map) which trees are alive and dead.</p> |
| 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 class specified on the actuarial documents. Verify with the Summary of Coverage and if the rate class is found to be incorrect, revise according to the AIP's instructions. Refer to the LAM. |
| 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. |

Form Standards – Production Worksheet (Continued)

| Element/Item Number | Description | | | | | | | | | | | | | | |
|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------|-------|------------------------------------------|-------|---------------------------|-----|-----------|------|-------------|------|----------------------------|------|----------------------|
| 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. Use of Acreage | <p data-bbox="553 1430 1208 1465">Use the following “Use of Acreage” abbreviations.</p> <table data-bbox="699 1499 1386 1793"> <thead> <tr> <th data-bbox="699 1499 834 1537"><u>USE</u></th><th data-bbox="834 1499 1386 1537"><u>EXPLANATION</u></th></tr> </thead> <tbody> <tr> <td data-bbox="699 1570 834 1608">“WOC”</td><td data-bbox="834 1570 1386 1608">Other use without consent (refer to LAM)</td></tr> <tr> <td data-bbox="699 1608 834 1646">“ABA”</td><td data-bbox="834 1608 1386 1646">Abandoned without consent</td></tr> <tr> <td data-bbox="699 1646 834 1684">“H”</td><td data-bbox="834 1646 1386 1684">Harvested</td></tr> <tr> <td data-bbox="699 1684 834 1722">“UH”</td><td data-bbox="834 1684 1386 1722">Unharvested</td></tr> <tr> <td data-bbox="699 1722 834 1759">“DM”</td><td data-bbox="834 1722 1386 1759">Direct Marketed Production</td></tr> <tr> <td data-bbox="699 1759 834 1797">“UR”</td><td data-bbox="834 1759 1386 1797">Unacceptable Records</td></tr> </tbody> </table> | <u>USE</u> | <u>EXPLANATION</u> | “WOC” | Other use without consent (refer to LAM) | “ABA” | Abandoned without consent | “H” | Harvested | “UH” | Unharvested | “DM” | Direct Marketed Production | “UR” | Unacceptable Records |
| <u>USE</u> | <u>EXPLANATION</u> | | | | | | | | | | | | | | |
| “WOC” | Other use without consent (refer to LAM) | | | | | | | | | | | | | | |
| “ABA” | Abandoned without consent | | | | | | | | | | | | | | |
| “H” | Harvested | | | | | | | | | | | | | | |
| “UH” | Unharvested | | | | | | | | | | | | | | |
| “DM” | Direct Marketed Production | | | | | | | | | | | | | | |
| “UR” | Unacceptable Records | | | | | | | | | | | | | | |

Production Worksheet (continued)

| Element/Item Number | Description |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 29. Use of Acreage (cont) | Verify any intended "Use of Acreage" 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. |
| 30. Reference Price | Enter the Tree Reference Price by the applicable age from Column 10, Part II, of the respective Appraisal Worksheet. For the CTV Endorsement: Enter the applicable CTV Reference Price by age from Column 10, Part II, of the respective Appraisal Worksheet. |
| 31. Coverage Level | Enter the coverage level to three decimal places from the insured's Summary of Coverage. |
| 32. Tree Value | Enter the value by tree age from Column 11 of Part II of the respective Appraisal Worksheet. |
| 33. Value of Dead Trees | Enter the value of dead trees by age from Column 13, Part II, of the respective appraisal worksheet. |
| 34a. % Damage | Enter the entry from Column 14 of the respective Appraisal Worksheet. If the Percent Damage FOR THE UNIT exceeds 80 percent, consider it a 100-percent loss. In this case, enter 1.000. |
| 34b. % Loss | For policies without the OLO , enter the result of subtracting the deductible (1 minus the coverage level) from the value in 34a, rounded to three decimal places. For policies with the OLO , make no entry. |
| 35. % Remaining | For policies without the OLO , enter the result of subtracting the entry in Column 34b from the entry in Column 31. |
| 36. Value of Production to Count | For policies without the OLO , enter the result of multiplying the value(s) in Column 32 times Column 35 and round the results to dollars and cents. For policies with the OLO , enter the result of subtracting the entry(ies) in Column 33 from the entry(ies) in Column 32, multiplying the result(s) by the entry in Column 31, and rounding this result to dollars and cents (value of production to count = (tree value – value of dead trees) x coverage level). |
| 37. Per Tree | Enter the result of multiplying the value (s) in Column 30 times Column 31, rounded to dollars and cents. |
| 38. Total to Count | Enter the result of multiplying the tree count (s) in Column 19 times the value(s) in Column 37, rounding this result to dollars and cents. |
| 39. Underreport Factor | Divide the amount of insurance on the summary of coverage by the total of column 38 times the share, rounded to two decimal places. Enter 1.00 if the amount of insurance equals or exceeds the unit value. Show your calculations in the narrative. CTV Endorsement: Divide the CTV amount of coverage from the Summary of Coverage by the CTV unit value (column 38) times the share, rounded to two decimal places. Enter 1.00 if the amount of insurance equals or exceeds the unit value. |

Form Standards – Production Worksheet (Continued)

| Element/Item Number | Description |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 40. Uninsured Cause(s) | Enter the result of appraisals for uninsured causes (taken from the applicable appraisal worksheet or other documentation), rounded to whole cents. Document calculations in the narrative. Refer to the LAM for information on how to determine uninsured cause appraisals. If no uninsured causes, MAKE NO ENTRY. |
| 41. Total Determined Trees | MAKE NO ENTRY. |
| 42. Totals | Total of entries in columns 36 and 38. If a column has no entries, MAKE NO ENTRY. |

Narrative Instructions

If more space is needed, document on a Special Report, and enter “Refer to the Special Report.” Attach the Special Report to the Production Worksheet.

- (1) If no trees are released on the unit, enter “No trees released,” adjuster’s initials, and date.
- (2) If notice of damage was given and no inspection is required, enter “No Inspection,” the unit number(s), date, and adjuster’s initials (do not enter unit numbers for which notice has not been given). The insured’s signature is not required.
- (3) Explain any uninsured causes, unusual, or controversial cases.
- (4) 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.
- (5) 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. Also refer to the LAM.
- (6) Explain any errors found on the Summary of Coverage.
- (7) Attach a sketch map or aerial photograph to identify the total unit:
 - (a) If you give or have given consent to put part of the unit to another use;
 - (b) If uninsured causes are present; or
 - (c) If the claim is unusual or controversial.

Form Standards – Production Worksheet (Continued)

- (8) Indicate on the sketch map or aerial photo the disposition of acreage put to another use with or without consent.
- (9) Enter “OLO in effect” if the insured elected the OLO option. Enter “CTVE in effect” if this is a CTVE claim (OLO/CTVE if the OLO option also applies).
- (10) If an underreporting factor applies, record the amount of insurance for the unit from the Summary of Coverage and show the calculations used to determine the factor.
- (11) If applicable, explain that the 1.000 entry in Column 34a is based on appraised tree damage that exceeds 80 percent for the unit.
- (12) Enter the amount of any prior indemnity (total all prior indemnities). The total amount of indemnity payable for the unit is limited to the lesser of the amount of insurance shown on the Summary of Coverage or the unit value. Enter “No prior indemnities paid” if no other indemnity has been paid on the unit.
- (13) Explain a “NO” checked in item 44, “Damage Similar to Other Farms in the Area?”
- (14) 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.
- (15) 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.
- (16) Explain the reason for a “No Indemnity Due” claim. “No Indemnity Due” claims are to be distributed in accordance with the AIP’s instructions.
- (17) Explain any delayed notices or delayed claims as instructed in the LAM.
- (18) 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.
- (19) 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

Form Standards – Production Worksheet (Continued)

| Element/Item Number | Description |
|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 43. Date Harvest Completed | Used to determine if there is a delayed notice or a delayed claim. Refer to the LAM. PRELIMINARY: MAKE NO ENTRY. FINAL: MAKE NO ENTRY. |
| 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 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.- 72. | MAKE NO ENTRY. |

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

| Element/Item Number | Description |
|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 73. 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 (or insured’s authorized representative), particularly explaining codes, etc., that may not be readily understood. Final indemnity inspections and final replanting payment 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 and final replanting payment inspections should be signed on 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.). |

Form Standards – Production Worksheet (Continued)

PRODUCTION WORKSHEET

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------|-----------------|-----------------------------|------------------|----------------------------|------|----------------------|-------|-------------------------|--------------|----------------------------------|-------------------|-------------------------------|----------------|-----------------------------------|----------------|-------------|---------------------|----------|--------|-------------|----------------|----------|----------------|--|--|
| 1. Crop/Code # XXXXXX XXXX | | 2. Unit # XXXX XXXXBU | | 3. Location Description | | 7. Company Agency | | XXXXXXX XXXXXX | | 8. Name of Insured Joe Farmer | | 9. Claim # XXXXXX | | 11. Crop Year XXXX | | | | | | | | | | | |
| 4. Date(s) of Damage XX XX XXXX | | 5. Cause(s) of Damage XX | | 6. Insured Cause % XX | | 12. Additional Units | | 13. Est. Prod. Per Acre | | 10. Policy # XXXXXXX | | 14. Date(s) Notice of Loss | | 1st 2nd Final XX XX XXXX | | | | | | | | | | | |
| SECTION I – DETERMINED ACREAGE APPRAISED, PRODUCTION AND ADJUSTMENTS | | | | | | | | | | C. STAGE GAURANTEE | | | | | | | | | | | | | | | |
| A. ACTUARIAL | | | | | | | | | | B. POTENTIAL | | | | | | | | | | | | | | | |
| 16. | 17. | 18. | 19. | 20. | 21. | 22. | 23. | 24. | 25. | 26. | 27. | 28. | 29. | 30. | 31. | 32. | 33. | 34a. | 34b. | 35. | 36. | 37. | 38. | | |
| Field ID | Multi-Crop Code | Reported Trees | Determined Trees | Interest or Share | Risk | Type | Class | Sub-Class | Intended Use | Irr. Practice | Cropping Practice | Organic Practice | Use of Acreage | Reference Price | Coverage Level | Tree Value | Value of Dead Trees | % Damage | % Loss | % Remaining | Value to Count | Per Tree | Total to Count | | |
| 2A | | | 39 | 1.000 | D02 | | | | | | | | | 19.00 | .750 | 741 | 437 | 0.396 | .146 | .604 | 447.56 | 14.25 | 555.75 | | |
| 2A | | | 240 | 1.000 | D04 | | | | | | | | | 28.00 | | 6720 | 2520 | | | | 4058.88 | 21.00 | 5040.00 | | |
| 39. URF | | | 1.00 | 41. Total Determined Trees | | | | | | | | | | | | 42. Totals: | | | | | | | | | |
| 40. Uninsured Causes | | | | | | | | | | | | | | | | | | | | | | | | | |

NARRATIVE (If more space is needed, attach a Special Report) No prior indemnities paid.

SECTION II – DETERMINED HARVESTED PRODUCTION

| | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------|-----------------|--------------------|-------|-------|-----------|------------------------------------------------------------------------------------------------------------|-------------------|-------------|---------------------|---------------------|--------|-----------------------------------------------------------------------------------------|---------|---------------------|--------------------|----------------------|------------|-------------------------------------------------------------------------------------------------|---------------------|--|--|--|--|
| 43. Date Harvest Completed | | | | | | 44. Damage similar to other farms in the area? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | 45. Assignment of Indemnity Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | 46. Transfer of Right to Indemnity? Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | |
| A. MEASUREMENTS | | | | | | B. GROSS PRODUCTION | | | | | | C. ADJUSTMENTS TO HARVESTED PRODUCTION | | | | | | | | | | | |
| 47a. | 48. | 49. | 50. | 51. | 52. | 53. | 54. | 55. | 56. | 57. | 58a. | 59a. | 60a. | 61. | 62. | 63. | 64a. | 65. | 66. | | | | |
| 47b. | | | | | | | | | | | 58b. | 59b. | 60b. | | | | 64b. | | | | | | |
| Share | Multi-Crop Code | Length or Diameter | Width | Depth | Deduction | Net Cubic Feet | Conversion Factor | Gross Prod. | Bu., Ton Lbs., Cwt. | Shell/ Sugar Factor | FM% | Moisture % | Test WT | Adjusted Production | Prod. Not to Count | Production Pre-QA | Value | Quality Factor | Production to Count | | | | |
| Field ID | | | | | | | | | | | Factor | Factor | Factor | | | | Mkt. Price | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| 67. TOTAL | | | | | | | | | | | | | | | | 68. Section II Total | | | | | | | |
| | | | | | | | | | | | | | | | | 69. Section I Total | | | | | | | |
| | | | | | | | | | | | | | | | | 70. Unit Total | | | | | | | |
| | | | | | | | | | | | | | | | | 71. Allocated Prod. | | | | | | | |
| | | | | | | | | | | | | | | | | 72. Total APH Prod. | | | | | | | |

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