



Winter Wheat, Barley and/or Dry Peas Request for Coverage

(Acceptance is subject to Company Approval)

1. INSURED NAME	2. POLICY NUMBER	3. CROP YEAR

Instructions for Winter Wheat, Barley and/or Dry Peas Request for Coverage in counties with spring only planting dates:

Complete the entire form if winter Wheat, Barley and/or Dry Peas have been planted in counties with Spring only planting dates. Sign and date prior to the applicable spring sales closing date.

LAND LOCATION			7. CROP	8. ACRES	9. SHARE	10. SHAREHOLDER
4. SECTION	5. TOWNSHIP	6. RANGE				
			<input type="checkbox"/> WHEAT <input type="checkbox"/> BARLEY <input type="checkbox"/> DPEAS			
			<input type="checkbox"/> WHEAT <input type="checkbox"/> BARLEY <input type="checkbox"/> DPEAS			
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			<input type="checkbox"/> WHEAT <input type="checkbox"/> BARLEY <input type="checkbox"/> DPEAS			

11. REMARKS

I certify that to the best of my knowledge and belief all of the information on this form is correct. I also understand that failure to report completely and accurately may result in sanctions under my policy, including but not limited to voidance of the policy, and in criminal or civil penalties (18 U.S.C. §1006 and §1014; 7 U.S.C. §1506; 31 U.S.C. §3729, §3730 and any other applicable federal statutes). See attached form for statements required by Privacy Act of 1974.

12. INSURED'S SIGNATURE	DATE	
13. AGENT'S SIGNATURE	AGENT CODE NUMBER	DATE

COLLECTION OF INFORMATION AND DATA (PRIVACY ACT) STATEMENT
 Agents, Loss Adjusters, and Policyholders

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a): The Risk Management Agency (RMA) is authorized by the Federal Crop Insurance Act (7 U.S.C. 1501-1524) or other Acts, and the regulations promulgated thereunder, to solicit the information requested on documents established by RMA or by approved insurance providers (AIPs) that have been approved by the Federal Crop Insurance Corporation (FCIC) to deliver Federal crop insurance. The information is necessary for AIPs and RMA to operate the Federal crop insurance program, determine program eligibility, conduct statistical analysis, and ensure program integrity. Information provided herein may be furnished to other Federal, State, or local agencies, as required or permitted by law, law enforcement agencies, courts or adjudicative bodies, foreign agencies, magistrate, administrative tribunal, AIPs contractors and cooperators, Comprehensive Information Management System (CIMS), congressional offices, or entities under contract with RMA. For insurance agents, certain information may also be disclosed to the public to assist interested individuals in locating agents in a particular area. Disclosure of the information requested is voluntary. However, failure to correctly report the requested information may result in the rejection of this document by the AIP or RMA in accordance with the Standard Reinsurance Agreement between AIP and FCIC, Federal regulations, or RMA-approved procedures and the denial of program eligibility or benefits derived therefrom. Also failure to provide true and correct information may result in civil suit or criminal prosecution and the assessment of penalties or pursuit of other remedies.

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To file a complaint of discrimination, write to: USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.