

Producer Code _____

Change of address from 2017 crop?

Yes _____ No _____



169 East Main Street • Prattville, AL 36067 • Fax: (334) 365-9261

Federal Det Collection
Improvement Act Certification

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

Yes _____ No _____

2018 Crop Farm Verification Form

Producer / Entity Name _____

Mailing Address _____

City, State, Zip _____

SS # or EIN # _____
as listed at
Co. FSA

Home Phone _____ Mobile Phone _____

Fax # _____ Email Address _____

Lein(s) 2018 crop _____

GIN to be used 2018 _____

Warehouse to be used 2018 _____

PLEASE CHECK HERE IF YOU WOULD LIKE A DEFER CONTRACT MAILED TO YOU FOR THE 2018 CROP.
THIS CONTRACT MUST BE SIGNED EACH YEAR IN ORDER TO HOLD PAYMENTS UNTIL JAN 1.

☐

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

SIGNATURE:

DATE:



MARKETING CHOICES

[illegible]