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Form Approved - OMB NO. 0560-0185

FSA-492
(11-07-03)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

DATA NEEDED FOR THIRD-PARTY DETERMINATIONS

1. STATE NAME	2. COUNTY NAME
3. FARM NUMBER	

NOTE: *The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the Food Security Act of 1985, P.L. 99-198, and regulations promulgated under the Act (7 CFR Part 12). The information will be used to determine if your third party request can be granted in accordance with the swampbuster provisions of the Act. Furnishing the requested information is voluntary; however without it your eligibility to receive program payments can not be determined. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0185. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. ***RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.***

4. NAME AND ADDRESS OF PRODUCER	5. TELEPHONE NO. OF PRODUCER *(Area Code)*
	6. GIVE LEGAL DESCRIPTION OF AREA *(Attach a photo copy and identify areas)*

	YES	NO
7. Has a wetland determination been completed by NRCS? *(If "NO", a wetland determination is needed to consider a third party request.)*	☐	☐
8. If a wetland determination has been completed, are the areas in question determined to be wetlands?	☐	☐

PART A - PRODUCER'S REQUEST

9. Enter a description of actions that resulted in the drainage of the wetland by persons who have no current or former interest in the converted wetland for which the third-party exemption is requested. Provide full details of why and how you were not involved, in any way, with the drainage of the wetland.

10. Has a crop been planted in the wetland in the current year? YES ☐ NO ☐ If "YES", enter date planted: *(MM-DD-YYYY)*

11. Is the request within the boundary of a drainage district? YES ☐ NO ☐

12 A . SIGNATURE OF PRODUCER	12 B. DATE *(MM-DD-YYYY)*

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PART B - COC THIRD PARTY DETERMINATION

13. COC Determination: Third Party Exemption — Approved ☐ Disapproved ☐

14. Reasons for COC Determination:
Document in detail the COC determination and facts to support the determination.

15 A. Signature of COC member	15 B. Date *(MM-DD-YYYY)*	16. Date producer was notified *(MM-DD-YYYY)*