

<b>FSA-940</b> (proposal 2)  <b>U.S. DEPARTMENT OF AGRICULTURE</b> Farm Service Agency  <b>SPOT MARKET HOG PANDEMIC PROGRAM (SMHPP) APPLICATION</b>	1. Recording State	2. Program Year  <b>2020</b>
	3. Recording County	4. Application Number

**NOTE:** The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Notice of Funds Availability FR Doc. 2021-0012, the Coronavirus Aid, Relief, and Economic Security Act (Pub. L. 116-136), and 15 U.S.C. 714b and 714c. The information will be used to determine eligibility for program benefits. The information collected on this form may be disclosed to other Federal, State, and Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary; however, failure to furnish the requested information will result in a determination of ineligibility for program benefits. Payments may be made under the program to which the form applies only to the extent permitted by applicable authorities.

**Public Burden Statement (Paperwork Reduction Act):** Public reporting burden for this collection is estimated to average 40 minutes per response, including reviewing instructions, gathering and maintaining the data needed, completing (providing the information), and reviewing the collection of information. You are not required to respond to the collection of information, unless it displays a valid OMB control number. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

**PART A – PRODUCER AGREEMENT**

The Department of Agriculture (USDA) will make payments under SMHPP to producers who meet the requirements of the program. The following information is needed in order for USDA to make a determination that the producer is eligible to receive a SMHPP payment. By submitting this application, and upon its approval by USDA, the producer agrees:

- To comply with applicable Notice of Funds Availability published by USDA. Copies of these documents may be found at [www.regulations.gov/docket?D=FSA-2021-0012](http://www.regulations.gov/docket?D=FSA-2021-0012).
- That the payment will be limited to the maximum number of hogs per producer as announced by FSA that were sold through a spot market sale from April 16, 2020 through September 1, 2020, in the United States.
- To provide to USDA all information required for application to SMHPP and as requested by USDA that USDA determines is necessary to verify that information provided on this form is accurate. Evidence of sales is required to support certification in Part C, Item 6, within 15 days from the date the producer submits this application.
- To provide to USDA all information required or requested by USDA for program participation within 60 days from the date the producer submits this application. Failure of an individual, entity, or member of an entity to timely submit all information required may result in no payment or a reduced payment.
- To comply with payment attribution and payment eligibility provisions by completing forms:
  - AD-2047, Customer Data Worksheet (if applicable)
  - CCC-902, Farm Operating Plan for Payment Eligibility
  - CCC-901, Member Information for Legal Entities (if applicable)
  - CCC-941, Average Adjusted Gross Income (AGI) Certification and Consent to Disclosure of Tax Information
  - FSA-1123 Certification of 2020 AGI (if applicable)

**Note:** Payment Limitation does not apply to this program.
- To comply with the provisions of the Food Security Act of 1985 that protect highly erodible land and wetlands. All producers must complete and submit all portions of form AD-1026, Highly Erodible Land Conservation (HELC) and Wetland Conservation (WC) Certification.

**PART B – PRODUCER INFORMATION**

5. Producer's Name, Address (City, State and Zip Code) and Phone Number (include Area code)

**PART C – HOGS SOLD**

<b>COC USE ONLY</b>	
6. Total Number of Producer Sold Hogs through a Spot Market Sale from April 16, 2020 through Sept. 1, 2020 (Excluding Breeding Stock)	7. COC Adjusted Total Number of Producer Sold Hogs through a Spot Market Sale from April 16, 2020 through Sept. 1, 2020 (Excluding Breeding Stock)

Date Stamp

Producer Name:

Application Number:

**PART D – PRODUCER CERTIFICATION**

8. *Is the producer identified in Part B an individual person that is a US Citizen or Resident Alien; or a legal entity, including corporation, LLC, LP, trust, estate, general partnership or joint venture, or similar type entity, comprised solely of persons who are US Citizens or Resident Aliens; or is an Indian Tribe or Tribal organization, as defined in section 4(b) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304)?*

YES  NO

9. *Is the producer identified in Part B a contract grower, Federal, State, or local government (including public school), or a processor or packer?*

YES  NO

*I hereby sign and acknowledge under penalty of perjury in accordance with 28 U.S.C. § 1746 and 18 U.S.C. § 1621 that the foregoing is true and correct.*

10A. Signature	10B. Title/Relationship of the Individual Signing in the Representative Capacity	10C. Date (MM-DD-YYYY)
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**PART E – COC DETERMINATION**

11A. COC or Designee Signature/Title	11B. Date (MM-DD-YYYY)	12. Determination  <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED
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*In accordance with Federal civil rights law and USDA civil rights regulations and policies, the USDA, its agencies, offices, and employees participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.*

*Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.*

*To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.*