



Rainfall Index Acreage Report

Approved Insurance Provider		Insured Policy #:	Agency Agency Code:
ARMtech Insurance Services 7101 82nd Street Lubbock, TX 79424		Name: _____ Address: _____ _____	Agency Name: _____ Agent Name: _____ Address: _____ _____
U/W: (800) 335-0120 Bus.: (806) 473-0333 Claims: (800) 335-6010 B Fax: (806) 473-0334	Phone:		Phone:
Email: ARMtech@armt.com	Email:		Email:

Crop Year:		State:		Crop:		Plan:		Options:		Coverage Level:	
Type:		Base Value:		Protection Factor:							
GridID	Point of Reference	*Farm Service Agency Info			Insurable Acres/ Col.	Insured Acres/ Col.	Share	Interval	Exp Grid	Unit	(Acres/ Col.) / Units
		FSN:	Tract:	Field							
	Lat: _____ Long: _____	_____	_____	_____				Jan - Feb Index			
								Feb - Mar Index			
								Mar - Apr Index			
	Lat: _____ Long: _____	_____	_____	_____				Apr - May Index			
								May - Jun Index			
								Jun - Jul Index			
	Lat: _____ Long: _____	_____	_____	_____				Jul - Aug Index			
								Aug - Sep Index			
								Sep - Oct Index			
								Oct - Nov Index			
								Nov - Dec Index			



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								Jun - Jul Index			
								Jul - Aug Index			
								Aug - Sep Index			
								Sep - Oct Index			
								Oct - Nov Index			
Nov - Dec Index											

You may select any index provided in the Special Provisions; however, the selected index intervals cannot contain any month in more than one index interval. For example: If you select April - May Index Interval (which includes the months of April and May), you cannot select any other interval that contains any of these same months, such as either the March - April Index Interval or May - June Index Interval, because each of these intervals contains one of the months included in the April - May Index Interval.

*If you cannot obtain a FSA farm serial number, FSA tract number, and FSA field number, you must provide supporting documentation from FSA, a legal description, and latitude and longitude of all the non-contiguous acreage insured.



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Type:		Base Value:		Protection Factor:							
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*If you cannot obtain a FSA farm serial number, FSA tract number, and FSA field number, you must provide supporting documentation from FSA, a legal description, and latitude and longitude of all the non-contiguous acreage insured.

CERTIFICATION STATEMENT: 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).

PRF I further certify that:

the point of reference used for each grid ID is identifying my insured acres covered under the RI Basic Provisions and the applicable Crop Provisions; and That the acreage assigned to each grid ID is accurate to the best of my know ledge.

API I further certify that:

The point of reference used for each grid ID is identifying the locations of my insured colonies covered under these Crop Provisions; That colonies assigned to each grid ID is accurate to the best of my know ledge; That the colonies qualify as apiculture; and The selected index intervals support the vegetation production necessary for the insured crop.

(Insured Signature)

(Date)

(Agent Signature)

(Date)

(Agency Code)



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 rejection of this document by the AIP or RMA in accordance with the Standard Reinsurance Agreement between the 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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