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CCC-505 (02-05-09)	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1. STATE AND COUNTY CODE	2. FARM NO.	3. PROGRAM YEAR
VOLUNTARY PERMANENT DIRECT AND COUNTER-CYCLICAL PROGRAM (DCP) BASE ACRES REDUCTION		4. REASON FOR REDUCTION OF DCP BASE ACRES <input type="checkbox"/> CRP Enrollment <input type="checkbox"/> Other _____		

Note: *The primary authority for requesting and safeguarding the information described on this form is the Food, Conservation, and Energy Act of 2008 (Pub. L. 110-246 and any amendments to such act as may follow). The information will be used to determine eligibility for program benefits. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in a determination of ineligibility for certain program benefits and other financial assistance. The information collected as a result of this form may be released to USDA employees, USDA contractors, or authorized USDA cooperators who are bound to safeguard the information under Section 1619 of the Food, Conservation, and Energy Act of 2008, the E-Government Act of 2002, and related authorities. The information collection is exempted from the Paperwork Reduction Act, as it is required for administration of the Food, Conservation, and Energy Act of 2008 (see Pub. L. 110-246, Title I, Subtitle F - Administration). The provisions of criminal, civil, and privacy statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.***

PART A - REQUEST

The undersigned request a permanent reduction of the Direct and Counter-Cyclical Program (DCP) Base Acres established for the following crop(s) for the farm number entered in Item 2. I/We understand that, except for reductions because of enrollment into the Conservation Reserve Program (CRP), this reduction is a permanent reduction of DCP Base Acres, and the DCP Base Acres reduced shall not be returned to the farm.

I/We understand that when the reason for the reduction entered in Item 4 is because of enrollment of cropland into CRP, the reduced DCP Base Acres may be returned to the farm if the applicable CRP contract is voluntarily terminated on or before September 30, 2007, and all other eligibility requirements are met.

5. TRACT NO.	6. COMMODITY	7. DIRECT YIELD	8. COUNTER CYCLICAL YIELD	9. COMMODITY BASE ACRES ON TRACT BEFORE REDUCTION	10. COMMODITY BASE ACRES ON TRACT TO BE REDUCED	11. COMMODITY BASE ACRES ON TRACT AFTER REDUCTION <small>(Column 9 MINUS Column 10)</small>
				-	=	
				-	=	
				-	=	
				-	=	

12. Total DCP Base Acres to be Reduced (*Total of Column 10*)

13. Total DCP Base Acres on Farm Before Reduction

14. Total DCP Base Acres on Farm After Reduction (Item 13 minus Item 12)

15A. Requestor's Signature (By)	15B. Title/Relationship (<i>of the individual signing in the Representative Capacity</i>)	15C. Date (mm/dd/yyyy)
16A. Owner's Signature (By)	16B. Title/Relationship (<i>of the individual signing in the Representative Capacity</i>)	16C. Date (mm/dd/yyyy)
17A. Owner's Signature (By)	17B. Title/Relationship (<i>of the individual signing in the Representative Capacity</i>)	17C. Date (mm/dd/yyyy)

18. REMARKS (If the DCP base acres are being reduced because of cropland enrollment into CRP on or after May 13, 2002, enter the CRP-1 number and the effective date of CRP-1).

PART B - APPROVAL (COUNTY OFFICE USE ONLY)

19. REDUCTION IS: APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/>	20. COUNTY FSA OFFICE NAME AND ADDRESS (<i>Including Zip Code</i>)
21. COC'S SIGNATURE	TELEPHONE NUMBER (<i>Area Code</i>):
DATE (mm/dd/yyyy)	

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