



ACKNOWLEDGMENT OF DIFFERENCES INCOME PROTECTION

I acknowledge that I understand:

1. The terms and conditions of the Income Protection (IP) plan differ from traditional MPCI as follows:
 1. I may have a low yield on the land I farm and not receive payment under IP. Payments are made when the combination of individual yield and harvest price as defined in the IP Crop Provisions is less than the amount of protection.
 2. The insurance unit for this plan consists of all insurable acreage of the covered crop in the county in which I have a share on the date coverage begins for the crop year. I can not subdivide this unit by sharing entity or any other criteria.
 3. Any indemnity payment will be made within 60 days after the later of: 1) the date you determine my production to count or 2) the date the Harvest Price is calculated.
2. I cannot obtain any other federally subsidized insurance policy for the covered crop(s) in counties where I select the IP plan.
3. The IP Crop Provisions specify that IP insurance is not available on High Risk Land. I have reviewed the High Risk map(s) applicable to all counties for which I am purchasing an IP policy and realize that any acreage designated as High Risk is not insured. I must purchase a separate Catastrophic Risk Protection Policy to cover my High Risk Land or sign a Waiver of Eligibility for Emergency Assistance to meet the linkage requirements.
4. I am not eligible to participate in the Income Protection pilot program if I or any person I share with in the crop are identified in the non-standard classification system or I am an entity in which a person identified in the non-standard classification system has a substantial beneficial interest in my policy.

I fully understand the terms of the IP Policy and the items listed in this Acknowledgment. All my questions have been answered by my agent to my satisfaction.

Applicant/Insured _____ Date _____

Agent (as witness) _____ Date _____

COLLECTION OF INFORMATION AND DATA (PRIVACY ACT) STATEMENT

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 the 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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