CHERRY INDUSTRY ADMINISTRATIVE BOARD GROWER DIVERSION APPLICATION Crop Year 2022

To divert cherries in your orchard for Crop Year 2022, this form must be filed at the CIAB office **no later than April 18, 2022.** Along with this application, new and/or updated orchard maps for the diverted blocks must also be submitted.

Name of Grower:	Grower #:	
Address:		
City:	State	Zip
Phone number: ()Email:	_ Cell number: ()	
This section must be completed. (Indicate all approximate (If you do not have any changes to your maps on fil be returned.)		loes NOT need to
A Attached are revised orchard new orchard n	maps.	
I agree by participating in this diversion program that hereby established by the Board for diversion.	at I will abide by the rules and	d regulations
AUTHORIZATION FOR RELEASE OF PRODUCTION IN By marking this box I authorize the CIAB to rel (e.g. Greenstone, FSA) my production number recognize that this sharing will streamline the recarrier. This authorization shall continue until re	ease to my crop insurance carriers for crop year(s)	ier
Signature:	Dated:	

Return by April 18, 2022 to:

Cherry Industry Administrative Board

12800 Escanaba Drive, Suite A DeWitt, MI 48820-0388 Phone: (517) 669-1070 Toll Free: (888) 639-2422

Fax: (517) 669-1260

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 0581-0177. The time required to complete this information collection is estimated to average 10 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.

CHERRY INDUSTRY ADMINISTRATIVE BOARD TART CHERRY ORCHARD MAP

GROW	'ER NAME:			CIAB #:		P	HONE:		
ADDRESS: CITY:			STATE: ZIP:						
BLOCI	K NAME:			BLOCK	#: COU	NTY:			
Townsl	hip:	Section	ı #:		T: R:	S	: (Exa	mple: T2N, R1W, S12)	
		ADS:		and					
LOCA	ΓΙΟΝ DIRECTI	ONS:							
	ı	GENERAL INFO	ORMAT	ION ABOUT	THIS BLOCK	OF CH	ERRIES		
ACRES	CRES: SPACING: x VARIETY: Montmorency Balaton							Balaton 🔲	
		EES REMAININ		/0	(optional) Othe				
ROW 1	NO. 1 IS ON TH	IE North	Sout	th East	West S	SIDE OF	THE FIELD).	
	PLEASE	NOTE: PLEASI	E MAP T	THE BLOCK A	AS IT WAS OF			ED.	
ROW NO.	TREES IN ROW	YEAR PLANTED	ROW NO.			ROW		YEAR PLANTED	
NO.	ROW	FLANIED	l	KOW	FLANIED		KOW	FLANIED	
1			<u>21</u>			41		+	
2			22			42		+	
3			23			43		+	
5			24			44		+	
6			25 26			45 46		+	
7						46 47			
8			27 28			48		+	
9			29			48 49		+	
10			30			50		+	
11			31			51		+	
12			32			52		+	
13			33			53		+	
14			34			5 <u>4</u>		+	
15			35			55			
16			36			56			
17			37			57			
18			38			58			
19			39			59		1	
20			40			60			
IF THE THE SE LOCAT CAN BI	ECOND MAP IS A TION USING SEC E EASILY FOUN	A CONTINUATIO CTIONS, TOWNS,	ON OF TH , ROADS	IE FIRST. AT , and/or OTHEF	TACH OR DRA R IMPORTANT	W MAP(LANDM	(S) THAT SHO ARKS SO TH	AT THE BLOCK	
		mii iiiisisa II	COL AINL	CORRECT M	ZH I II O OF III	L OKCII	TWD 10 WIII	CITIT ATT LILS.	
Grower	Grower Signature: Date:								

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions 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.

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To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at

To the 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 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. USDA is an equal opportunity provider, employer, and lender.