

CROP PLAN (FMC-12)

Instructions: Provide a list of all <u>fruit and vegetable</u> crops to be grown by you (the farmer) on your farm this season <u>and</u> the location of each field where these crops are grown. If you plan on purchasing items for re-sale, list those items too. The purpose of this form is to provide evidence that you ("Farmer") meet the FMNP "50% Grow Rule" at every market where you ("Farmer") accept FMNP checks, as defined in the NYS FMNP Rules and Procedures for Farmers (FMC-5). This form must be given to every market manager where you ("Farmer") accept FMNP checks; submit crop plans annually.

| Farm Business N | ame: | | | | | |
|-------------------------------|--|---|---|------------------|---|--|
| Principal/Owner's | | FMNP ID: | | | | |
| Farm's Total Tilla | ble Acres: _ | Farm's Anticipa | ted Cultivated A | cres in Fruits a | and Vegetables: | |
| ☐ Check this box | x if you grov | v in a community gard | en plot that is sp | oonsored by a | third party. | |
| vegetable produc | ction fields a | are located. If your far | m is growing fru | its and vegeta | on where your fruit and ables at more than one uction at each location. | |
| Location #1: | | | | | Acres: | |
| Location #2: | | | | | | |
| | | | | | Acres: | |
| Grown by You (F | armer): | | | | | |
| Product (e.g. Corn) | Acres* (e.g. 2) | · · · · · · · · · · · · · · · · · · · | Product | Acres* | Market Availability | |
| *Or row foot or on | | | aller enerations of | and grouphouse | a: apocify which unit | |
| "Or row-feet or squ | uare-reet or r | number of plants for sma | aller operations a | na greennouse | s; specify which unit. | |
| Purchased for Re | e-sale (Not | Grown by the Farmer | <u>):</u> | | | |
| □ N/A, I do not p | olan on purc | hasing produce for re | -sale at my marl | ket stall this F | MNP season. | |
| Product (e.g. Blueberries) | Production Field(s) Location (e.g. Albany, NY) | | Producer/Supplier (e.g. Joe's Blueberry Farm) | | Market Availability (e.g. June-November) | |
| _ | | vledge that I have reallC-5)" provided by the | _ | • | YS FMNP "Rules and are and Markets. By | |
| | | all information is true a | | | | |
| Signature (requi | ired): | | | | Date: | |

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| Grown (con't): | | | | | | |
|-------------------------------|--|------------------------------------|--|----------------|--|---------------------|
| Product (e.g. Corn) | Acres* (e.g. 2) | Market Availability (e.g. Jun-Nov) | Product | Acr | es* | Market Availability |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| *Or row-feet or squ | are-feet or r | number of plants for sm | aller operations ar | nd greenho | ouses; | specify which unit. |
| Purchased for Re | e-sale (con'i | <u>t):</u> | | | | |
| □ N/A, I do not p | lan on purc | hasing produce for re | -sale at my mark | et stall th | is FMN | NP season. |
| Product (e.g. Blueberries) | Production Field(s) Location (e.g. Albany, NY) | | Producer/Supplier (e.g. Joe's Blueberry Farm) | | Market Availability (e.g. June-November) | |
| | | | | | | |
| | | | | | | |

Reminders:

- 1. If your farm participates in the NYS FMNP exclusively as a vendor at a traditional multi-vendor farmers market, you must submit this form to every market manager where you accept FMNP checks every year, annually. Markets participating in the NYS FMNP must retain a copy of all crop plans in the market records for every farmer at their market participating in the NYS FMNP. Note: Farmers must also submit a Farmer Participation Agreement (FMC-6) annually.
- 2. If your farm operates a farm stand, and you want to enroll your farm stand in the NYS FMNP as an authorized market, you must also submit this form as support documentation with your farm stand application annually. Include a copy of your crop plan when you submit your Market Participation Agreement (FMC-8) for your farm stand. Note: Farmers enrolling their farm stand into the program must also submit a Farmer Participation Agreement (FMC-6) annually.

Submit to:

NYS Dept. of Agriculture and Markets Attention: FMNP Fax: (518) 457-8398

10B Airline Drive Albany NY 12235 Email: farmersmarkets@agriculture.ny.gov

Questions? Albany: (518) 457-7076 prompt #1 Toll Free: (800) 554-4501

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