

(Reverse 70 Detail Record – Type 70)
Format/Edit

Field No	Field Name	Begin Pos	Size	Picture	Field Edits
1	Record Type	1	2	XX	Must be "70"
2	Approved Insurance Provider	3	2	XX	
3	Location State	5	2	99	
4	Company	7	3	999	
5	Policy-Number	10	7	9(07)	
6	Crop-Year	17	4	9(04)	
7	Paid-Amount	21	10	S9(08)V99	Must be payment type 00. (Paid by Insured)
8	Crop-Code1	31	4	9(04)	CROP #1
9	Rev70-Plan-Code1	35	2	9(02)	Must be 12, 13, 14, or 73(GRP/GRIP), 25 (RA), 42 or 45 (IP), 44 (CRC), 99 (Other)
10	Rev70-Coverage-Flag1	37	1	X(01)	Must be C (CAT) or N (NonCAT)
11	Total-Premium1	38	7	9(07)	
12	Crop-Code2	45	4	9(04)	CROP #2
13	Rev70-Plan-Code2	49	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
14	Rev70-Coverage-Flag2	51	1	X(01)	Must be C(CAT) or N(NonCAT)
15	Total-Premium2	52	7	9(07)	
16	Crop-Code3	59	4	9(04)	CROP #3
17	Rev70-Plan-Code3	63	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
18	Rev70-Coverage-Flag3	65	1	X(01)	Must Be C(CAT) or N(NonCAT)
19	Total-Premium3	66	7	9(07)	
20	Crop-Code4	73	4	9(04)	CROP #4
21	Rev70-Plan-Code4	77	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
22	Rev70-Coverage-Flag4	79	1	X(01)	Must Be C(CAT) or N(NonCAT)
23	Total-Premium4	80	7	9 (07)	
24	Crop-Code5	87	4	9(04)	CROP #5
25	Rev70-Plan-Code5	91	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)

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26	Rev70-Coverage-Flag5	93	1	X(01)	Must Be C(CAT) or N(NonCAT)
27	Total-Premium5	94	7	9(07)	
28	Crop-Code6	101	4	9(04)	CROP #6
29	Rev70-Plan-Code6	105	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
30	Rev70-Coverage-Flag6	107	1	X(01)	Must Be C(CAT) or N(NonCAT)
31	Total-Premium6	108	7	9(07)	
32	Crop-Code7	115	4	9(04)	CROP #7
33	Rev70-Plan-Code7	119	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
34	Rev70-Coverage-Flag7	121	1	X(01)	Must Be C(CAT) or N(NonCAT)
35	Total-Premium7	122	7	9(07)	
36	Crop-Code8	129	4	9(04)	CROP #8
37	Rev70-Plan-Code8	133	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
38	Rev70-Coverage-Flag8	135	1	X(01)	Must Be C(CAT) or N(NonCAT)
39	Total-Premium8	136	7	9(07)	
40	Crop-Code9	143	4	9(04)	CROP #9
41	Rev70-Plan-Code9	147	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
42	Rev70-Coverage-Flag9	149	1	X(01)	Must Be C(CAT) or N(NonCAT)
43	Total-Premium9	150	7	9(07)	
44	Crop-Code10	157	4	9(04)	CROP #10
45	Rev70-Plan-Code10	161	2	9(02)	Must Be 12, 13, 14, or 73(GRP/GRIP), 25(RA), 42 or 45 (IP), 44(CRC), 99(other)
46	Rev70-Coverage-Flag10	163	1	X(01)	Must Be C(CAT) or N(NonCAT)
47	Total-Premium10	164	7	9(07)	
48	Claim-Number1	171	8	9(08)	CLAIM #1
49	Loss-Credit-Total-Amount1	179	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
50	Total-Indemnity1	187	8	S9(08)	

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Field No	Field Name	Begin Pos	Size	Picture	Field Edits
51	Claim-Number2	195	8	9(08)	CLAIM #2
52	Loss-Credit-Total-Amount2	203	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
53	Total-Indemnity2	211	8	S9(08)	
54	Claim-Number3	219	8	9(08)	CLAIM #3
55	Loss-Credit-Total-Amount3	227	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
56	Total-Indemnity3	235	8	S9(08)	
57	Claim-Number4	243	8	9(08)	CLAIM #4
58	Loss-Credit-Total-Amount4	251	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
59	Total-Indemnity4	259	8	S9(08)	
60	Claim-Number5	267	8	9(08)	CLAIM #5
61	Loss-Credit-Total-Amount5	275	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
62	Total-Indemnity5	283	8	S9(08)	
63	Claim-Number6	291	8	9(08)	CLAIM #6
64	Loss-Credit-Total-Amount6	299	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
65	Total-Indemnity6	307	8	S9(08)	
66	Claim-Number7	315	8	9(08)	CLAIM #7
67	Loss-Credit-Total-Amount7	323	8	S9(08)	Must be Loss Total Code M (Credit Memo – this policy) or P (Credit Memo – Loss applied to another policy)
68	Total-Indemnity7	331	8	S9(08)	
69	Filler	339	212	X(212)	

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Field No	Field Name	Begin Pos	Size	Picture	Field Edits
70	FCIC Control Time	551	4	9(04)	Internal Use. The time the transaction batch file was received. (From when transmission started) HHMMSSMM Format.
71	FCIC Control Date	555	8	9(08)	Internal Use. The date the transaction batch file was received. (From when transmission started) CCYYMMDD Format.
72	Reinsurance Year	563	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
73	Batch Number	567	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the AIP to FCIC/RMA.
74	Transaction Sequence Number	571	8	9(08)	Internal Use. The sequential number assigned to each transaction number processed by DAS <u>after it has been sorted</u> .
75	Transaction Rejected Flag	579	1	X(01)	Internal. Will be: “Y” if the transaction was rejected. “N” if the transaction was not rejected.
76	Transaction Source Flag	580	1	X(01)	Internal Use. Will be: “I” if the transaction is from the input file. “G” if the transaction was generated by DAS. “D” if the transaction came from a transaction database.
77	Filler	581	20	X(20)	Internal Use.