Application Source: File Group: Record Name: Record Code:			File Type:Reinsurance Year:CIMS RequestVersion:C5Release Date:			surance Yea Versio	n: 2023 n: Approved
<u>Record</u> Number	Output Field Number	Field Name	Data Type	<u>Max</u> Length	Format	<u>BUS</u> Key Red	1? Rules
					Format	<u>key</u> ket	
C5 C5	1	Record Type Code Reinsurance Year	Numeric	2	CC)///		Required. Must be 05.
C5	2	Approved Insurance Provider	Numeric Character	4	CCYY		Required. The Reinsurance Year. CCYY format.
C5	4	Policy Location State	Numeric	2	9(2)		Required. Edit with AIP/Company table. Required. Edit with FIPS State table.
	4		Numeric	Z	9(2)		Required. Edit with company table. Must be valid
C5	5	Policy Issuing Company	Numeric	3	9(3)		Pic code for reinsurance year.
C5	6	Policy Number	Numeric	7	9(7)		Required. Must be > zeros.
C5	7	Crop Year	Numeric	4	9(4)		Required. Must be the crop year of the crops reported under the policy. This will equal the Reinsurance Year or Reinsurance Year +/- 1 for applicable crop code.
C5	8	Crop Code	Numeric	4	9(4)		Required; Edit with ADM2. See Exhibit 99-a.
C5	9	Insurance Plan Code	Numeric	2	9(2)		Required; Edit with ADM2. See Exhibit 99-a.
C5	10	Policy Location County	Numeric	3	9(3)		Required; Edit with FIPS County Table.
C5	11	FSA Admin State	Numeric	2	9(2)		FIPS code for FSA Administrative State if different from Location State when reporting Common Land Unit in Land Location. Optional. If no FSA Admin State, Zero Fill.
C5	12	FSA Admin County	Numeric	3	9(3)		FIPS code for FSA Administrative County if different from Location County when reporting Common Land Unit in Land Location. Optional. If no FSA Admin County, Zero Fill.

	Application Source: File Group: Record Name: Record Code:			CIMS Request Ver			ersion:		
	<u>Field</u> Number	<u>Field Name</u>	Data Type	<u>Max</u> Length	<u>Format</u>	<u>BUS</u> Key	<u>Req?</u>	<u>Rules</u>	
C5	13	CIMS Request Flag	Character	1				Required. Must be: P = Primary Insured Producer Information S = Primary Insured and Reported SBI Producer Information B = Producer and Acreage for Primary Insured Producer A = Acreage only for Primary Insured Producer C = Current Year Acreage only for Primary Insured Producer H = 5 years historical Acreage only for Primary Insured Producer (H is limited to ONE request per Reinsurance Year & Policy Number. Any requests after the first will return Status Code 035.) E = Producer and Acreage (request year and all prior years) for Primary Insured Producer T = Producer and Acreage (request year and all prior years) for Primary Insured Producer and Reported SBIS.	

	Application Source: File Group: Record Name: CIMS Request Record Code: C5			File Type: Reinsurance Year: Version: Release Date:			Approved	
<u>Record</u> <u>Number</u>	Output <u>Field</u> <u>Number</u>	Field Name	<u>Data Type</u>	<u>Max</u> Length	<u>Format</u>	<u>BUS</u> Key	<u>Req?</u>	<u>Rules</u>
C5	14	Statewide Application Indicator	Character	1				Required. Must be: Y = Policy was accepted by RMA as state application. N = Policy was not accepted by RMA as state application. A separate request will be required for each state under a state wide application.
	15	Zip Code ByPass Flag	Character	1				Required. Enter an "N" unless a previous request received an 012 Status code due to the policy zip code not matching the SCIMS zip code. After the AIP has verified that the zip code submitted on the P10 record is correct, a "Y" may be submitted and the zip code filter will be bypassed.
	16	Entity Code ByPass Flag	Character	1				Required. Enter an "N" unless a previous request received an 009 Status code due to the policy entity type is not in the same category as the SCIMS producers business type. After the AIP has verified that the Policy entity type submitted on the P10 record is correct, a "Y" may be submitted and the entity difference filter will be bypassed.
C5	17	Filler	Character	559				Must be spaces.

	Application Source: File Group: Record Name: Record Code:		est	File Type: Reinsurance Year: Version: Release Date:			Approved
<u>Record</u> <u>Field</u> <u>Number</u> <u>Number</u>	Field Name	<u>Data Type</u>	<u>Max</u> Length	<u>Format</u>	<u>BUS</u> Key	<u>Req?</u>	Rules
Record Level Rules							
							The inside file name for the request should be in the following format: XXYRYYYYMMDDHHMMSS.REQ XX= AIP Code XX= AIP Code YR= Reinsurance Year of the data requested YYYY= Request Date Year MM = Request Date Month DD = Request Date Day HH = Request Time Hour MM = Request Time Hour MM = Request Time Minutes SS = Request Time Seconds
							The file must be zipped and the zip name must be XXYRCIMS. ZIP XX= AIP Code YR= Reinsurance Year of the data requested