Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1	Incoming Filename	1	20	X(20)	
2	Request Record Type	21	2	9(02)	Required. Must be 05.
3	Reinsurance Year	23	4	9(04)	
4	Approved Insurance Provider	27	2	X(02)	
5	Policy Location State	29	2	9(02)	
6	Policy Issuing Company	31	3	9(03)	
7	Policy Number	34	7	9(07)	
8	Crop Year	41	4	9(04)	
9	Crop Code	45	4	9(04)	
10	Insurance Plan Code	49	2	9(02)	
11	Policy Location County	51	3	9(03)	
12	Record Type	54	4	X(04)	Must be PRGM.
13	Policy Primary or SBI/Spousal Indicator	58	3	X(03)	PRI, SBI, or SP1, SP2, SP3, etc.
14	Policy Primary or SBI/Spousal Record Number	61	3	9(03)	
15	SCIMS Program Record Number	64	3	9(03)	
16	SCIMS Program Code	67	3	X(03)	See below for codes
17	SCIMS Program Description	70	15	X(15)	See below for description
18	SCIMS Servicing Organization Code	85	8	X(08)	
19	CIMS SCIMS FSA Producer Info As of Date	93	8	9(08)	

NOTE: Grey Highlighted areas represent data that is returned from the CIMS process. This includes CIMS Status Codes, RMA Policy Data, FSA Producer Data, and FSA Acreage Data

Code	**Short Description**	**Long Description**
992	Non-AG NRCS	Non-AG NRCS Customer
993	Inactive	Inactive Customer
994	Tech Svc Prvdr	Technical Service Provider
995	Non County FSA	Non County FSA Customer
996	RD Customer	RD Customer
997	AG NRCS	AG NRCS Customer
FSA	FSA Customer	FSA Customer