

**CHERRY INDUSTRY ADMINISTRATIVE BOARD**  
**GROWER DIVERSION APPLICATION**  
**Crop Year 20\_\_**

To divert cherries in your orchard for Crop Year 20\_\_, this form must be filed at the CIAB office **no later than April 15, 20\_\_**. 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: ( ) \_\_\_\_\_ Cell number: ( ) \_\_\_\_\_  
 Email: \_\_\_\_\_

**This section must be completed.** (Indicate all appropriate responses.)

- A. \_\_\_ I have carefully reviewed the orchard maps sent to me by CIAB after January 20\_\_ and there are **NO changes to any of those blocks represented by those printouts.** I certify those printouts are a true and accurate representation of my current orchard blocks.
- B. \_\_\_ Attached are \_\_\_\_\_ revised orchard maps. The rest are the same
- C. \_\_\_ Attached are \_\_\_\_\_ new orchard maps.  
 (Number of maps)

**I agree by participating in this diversion program that I will abide by the rules and regulations hereby established by the Board for diversion.**

**AUTHORIZATION FOR RELEASE OF PRODUCTION INFORMATION TO YOUR INSURANCE CARRIER**

By marking this box, I authorize the CIAB to release to my crop insurance carrier \_\_\_\_\_ (e.g. Greenstone, FSA...) my production numbers for crop year(s) \_\_\_\_\_. I recognize that this sharing will streamline the reporting of this information to the insurance carrier. This authorization shall continue until revoked by me in writing.

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

**Return by April 15, 20\_\_ to:**

**Cherry Industry Administrative Board**  
 12800 Escanaba Drive, Suite A  
 P.O. Box 388  
 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**

**GROWER NAME:** \_\_\_\_\_ **CIAB #:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**BLOCK NAME:** \_\_\_\_\_ **COUNTY:** \_\_\_\_\_

**Township:** \_\_\_\_\_ **Section #:** \_\_\_\_\_ **T:** \_\_\_\_\_ **R:** \_\_\_\_\_ **S:** \_\_\_\_\_ (Example: T2N, R1W, S12)

GPS Info, Optional and if Available

Lat.	Long.
Row 1, Tree 1	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 2	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 3	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 4	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 5	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 6	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 7	___ E ___ ' ___ " / ___ E ___ ' ___ "
Point 8	___ E ___ ' ___ " / ___ E ___ ' ___ "

**BLOCK LOCATION:** \_\_\_\_\_

**NEAREST CROSSROADS:** \_\_\_\_\_ **and** \_\_\_\_\_

**LOCATION DIRECTIONS:** \_\_\_\_\_

**GENERAL INFORMATION ABOUT THIS BLOCK OF CHERRIES**

**ACRES:** \_\_\_\_\_ **SPACING:** N x N **VARIETY:** 9 Montmorency 9 Balaton 9  
**EST. OF LIVE TREES REMAINING:** \_\_\_\_\_ % **Meteor (optional)** 9 **Other** \_\_\_\_\_

**ROW NO. 1 IS ON THE** 9 North 9 South 9 East 9 West **SIDE OF THE FIELD.**

**PLEASE NOTE: PLEASE MAP THE BLOCK AS IT WAS ORIGINALLY PLANTED.**

<u>ROW NO.</u>	<u>TREES IN ROW</u>	<u>YEAR PLANTED</u>	<u>ROW NO.</u>	<u>TREES IN ROW</u>	<u>YEAR PLANTED</u>	<u>ROW NO.</u>	<u>TREES IN ROW</u>	<u>YEAR PLANTED</u>
1			21			41		
2			22			42		
3			23			43		
4			24			44		
5			25			45		
6			26			46		
7			27			47		
8			28			48		
9			29			49		
10			30			50		
11			31			51		
12			32			52		
13			33			53		
14			34			54		
15			35			55		
16			36			56		
17			37			57		
18			38			58		
19			39			59		
20			40			60		

**IF THE BLOCK IS LARGER THAN 60 ROWS, USE ANOTHER MAP FOR THE CONTINUATION AND INDICATE THAT THE SECOND MAP IS A CONTINUATION OF THE FIRST. ATTACH OR DRAW MAP(S) THAT SHOWS BLOCK LOCATION USING SECTIONS, TOWNS, ROADS, and/or OTHER IMPORTANT LANDMARKS SO THAT THE BLOCK CAN BE EASILY FOUND.**

**I HEREBY CERTIFY THAT THIS IS A TRUE AND CORRECT MAPPING OF THE ORCHARD TO WHICH IT APPLIES.**

**Grower Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

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