

530.142C Payment Review Checklist

Payment Review Checklist	
Participant Name:	CIN #(s):
Contract Number:	Payment #:
Service Center:	Amount: \$
1. Prepare for Participant Signature on NRCS-CPA-1245	
<input type="checkbox"/>	(AMA, EQIP, RCPP) For the first contract payment, verify that the higher payment rates applicable to historically underserved producers are appropriately administered.
<input type="checkbox"/>	Verify that practice certification was appropriately completed. (Ref. 450-GM, Part 407, Subpart B).
<input type="checkbox"/>	Verify correct extent performed amount is entered to calculate the payment within the period of performance.
<input type="checkbox"/>	Where applicable: itemized receipts, invoices, or bills to support payment applications based on "actual cost not to exceed the average cost" (AA) and "actual cost not to exceed a specified maximum cost" (AM) methods.
2. Advance Payment Criteria	
<input type="checkbox"/>	The advance payment is for anticipated costs related to purchasing materials or securing services to implement a conservation practice
<input type="checkbox"/>	The participant has accepted final design(s), implementation requirements and/or job sheet(s) is available.
<input type="checkbox"/>	The final design quantities match the schedule of operations, and if needed, a modification has been completed prior to approving the advance.
3. Verify Signature Authority for Businesses (check one as applicable)	
<input type="checkbox"/>	Entity documents verifying the name of the entity, and who has the authority to sign
<input type="checkbox"/>	CCC-901 or CCC-902 with signature authority designated
4. Power of Attorney (POA) (if applicable)	
<input type="checkbox"/>	NRCS-CPA-09, notarized on contracts signed between 10/01/2004 to 09/30/2009
<input type="checkbox"/>	FSA-211, notarized or witnessed by FSA employee on contracts signed on or after 12/17/2008 (REQUIRED on all contracts signed after 10/01/2009), indicating applicability to NRCS programs. <i>Note that spouses must have a valid POA on file in order to sign on behalf of each other.</i>
5. Direct Deposit Review of SF-1199A	
<input type="checkbox"/>	SF-1199A names match the NRCS-CPA-1245 and NRCS-CPA-1202 or NRCS-CPA-152.
<input type="checkbox"/>	A separate SF-1199A exists for each participant receiving a payment per the NRCS-CPA-1202 and NRCS-CPA-1245.
<input type="checkbox"/>	Routing number and bank account number are filled in on SF-1199A and match vendor info in ProTracts.
<input type="checkbox"/>	Participants have verified their bank account information is current and correct. Verification date:
<input type="checkbox"/>	Electronic funds transfer (EFT) waiver in lieu of direct deposit, if applicable.
6. Determine Assignments with NRCS-CPA-1236 or CCC-36 (if applicable)	
<input type="checkbox"/>	NRCS-CPA-1236 or CCC-36 is signed and dated by participant.
<input type="checkbox"/>	NRCS-CPA-1236 or CCC-36 indicates contract item or dollar amount of assignment.
<input type="checkbox"/>	NRS-CPA-1236 or CCC-36 is signed and dated by the assignee and matches the SF-1199A.

7. Complete Payment Instructions for Payees	
<input type="checkbox"/>	NRCS-CPA-1245 is accurate and complete for participant signature and applicable payment reductions (including AGI where applicable) or additions are correct.
<input type="checkbox"/>	Agricultural Management Assistance (AMA) Program only: NRCS-CPA-1263, "Producer Self-Certification – Fiscal Year Payments" is complete for AMS and RMS payments.
<input type="checkbox"/>	Vendor address is correct and matches the SF-1199A.
<input type="checkbox"/>	Payment share to each participant is correct.
8. NRCS-CPA-1245 Obtain Participant Signature	
<input type="checkbox"/>	Signed and dated by participant only after payment instructions are completed.
<input type="checkbox"/>	Participant signature matches signature on NRCS-CPA-1202, NRCS-CPA-152, power of attorney document or other signature authority document as applicable.
<input type="checkbox"/>	Payment shares match NRCS-CPA-1202 and bank routing information is still current.
<input type="checkbox"/>	If applicable, Form NRCS-CPA-125, "Application for Payment to Deceased or Incapacitated Participants" is completed including concurrence from OGC if needed.
9. Optional: Additional Notes	
10. Optional: Payment Review Completed by:	Date:
11. Optional: NRCS Electronic Approval Signature:	Date:
The NRCS-CPA-1245 must be maintained in the electronic file as per 440-CPM-530-E-530.42B.	