



Peony Disaster Relief Program for Alaska Peony Producers



The State of Alaska, Department of Natural Resources, Division of Agriculture (DoAg), through the USDA Farm Service Agency (FSA), is providing cost assistance to Alaska Peony Producers who meet the eligibility criteria for eligible weather events in 2023 and/or 2024 for peony rootstock and their future economic loss. Please complete the application if you have replanted or intend to replant peony rootstock. **Reimbursement rates will be determined after all applications are processed, and payments will be based on a formula approved by the FSA.**

1. Eligibility criteria. Please initial or mark to certify that you meet each of the following eligibility criteria.
 - A. You are a producer located in a borough or an unorganized borough in Alaska.
 - B. You are a person or legal entity that is:
 - a. a citizen of the United States;
 - b. a resident alien; for purposes of this part, resident alien means “lawful alien” as defined in 7 CFR part 1400;
 - c. a partnership consisting solely of citizens or resident aliens of the United States;
 - d. a corporation, limited liability corporation, or other farm organizational structure organized under State law consisting solely of citizens or resident aliens of the United States; or
 - e. an Indian Tribe or Tribal organization, as defined in section 4(b) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304).
 - C. You experienced an eligible loss from an eligible weather event(s) that occurred during the period of January 1, 2023 - December 31, 2024. An eligible weather event is abnormal weather, such as abnormal rainfall immediately before or after a dormancy period, abnormal lack of snowfall that results in a snow drought that negatively impacts the ground insulation necessary to protect peony rootstock, and winter freeze/thaw events that break the rootstock’s dormancy period before spring. In section 2 below, you are required to provide a description and documentation of the weather event that caused the loss.
 - D. You experienced a loss from damage to more than two percent of the total peony rootstock that was being farmed.
 - a. Total # of peony plants on the farm (prior to weather event): _____
 - b. Total # of peony root loss: _____
 - E. You have done or will do at least one of the following (check all that apply):
 - a. Replanted peony rootstock in 2024-2025. Indicate whether you replanted all or a portion of the rootstock that was lost.
 - b. You intend to replant peony rootstock in 2026 and/or in 2027 but no later than September 1, 2027.
 - c. Amount of funds received from other federal, state, non-profit grant awards and/ or funds received by insurance claims for losses claimed on this application: \$ _____
 - F. You operate a peony farming business that is authorized by and in good standing with the state, and other jurisdictions, as applicable.

2. You are required to provide, in the space below and/or as an attachment, a description of both the weather event(s) and loss(es) you experienced that you believe make you eligible to participate in this program. Please include all relevant information and documentation, such as dates, photos, journal entries, and any other materials that support your application.

Application period is open from April 10, 2026, to May 15, 2026. To be considered for this program, an application must be complete and received or postmarked no later than May 15, 2026, at 5:00 p.m. Alaska Standard Time.

<p>Send application and supporting documentation to:</p> <p>Alaska Division of Agriculture Attn: Peony Disaster Relief 1801 S Margaret Dr. Suite 12 Palmer, AK 99645</p> <p>or dag.scbg@alaska.gov</p>	<p>I HAVE PROVIDED THE FOLLOWING: (INITIAL EACH)</p> <p>_____ Documentation that supports ownership of a Peony Farm in Alaska, e.g., Tax documents (Schedule F), bank documents, business entity documents or license, etc.</p> <p>_____ Invoices, copy of receipts for peony rootstock (if replanted in 2024 and/or 2025)</p> <p>_____ Completed W-9 or provide State of AK Vendor number below</p> <p>_____ Written description of the weather event that qualifies their claim.</p> <p>_____ Documentation to support statement of inventory of peony rootstock prior to an eligible weather event, including photos, journal entries, sworn statements, or other items.</p> <p>_____ Documentation to support statement of inventory of peony rootstock lost as a result of an eligible weather event, including photos, journal entries, or other items.</p> <p>_____ Acknowledgement that a site visit may be necessary for final payment of funding.</p>
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APPLICANT NAME	
BUSINESS/ FARM NAME	State of AK Vendor #
MAILING ADDRESS	
PHONE NUMBER	PHYSICAL ADDRESS OF FARM
EMAIL ADDRESS	

BY SIGNING BELOW, YOU ARE ACKNOWLEDGING OR AGREEING TO THE FOLLOWING:

- Applicant gives permission for a site visit (physical access to the sites claimed in this application) by Alaska Division of Agriculture (DoAg) staff. All site visits will be arranged with Applicant in advance.
- Applicant agrees to provide, upon the request of the DoAg, additional information and documentation to prove all losses claimed and information provided on this application.
- Applicant must repay the award or a portion of the award to DoAg if any funds received were issued in error; are based on incorrect representations made to DoAg; or if any costs forming the basis of an award under this program are covered by other federal, state, non-profit grant awards and/or any funds received by insurance claims. Applicant agrees that the final determination of whether there has been a duplication of benefits and the amount to be repaid, if any, will be made by DoAg.
- Applicant authorizes DoAg to share all records and information relevant to this award with federal and state agencies and as otherwise required under the public records law.
- Applicant understands that any amount awarded may be considered taxable income and may result in the issuance of a 1099-G, and that any questions about tax or other liability should be directed to the appropriate tax or legal professional.
- Applicant authorizes DoAg to release this application, data, and other relevant documents in their possession to FSA for the purpose of ensuring the Applicant's compliance with all program, legal, and recordkeeping requirements.
- The Applicant will retain financial and other records relating to the program and funds received for a period of not less than three years after completion of the distribution of program payments or until final resolution of any audit findings or litigation claims that may arise relating to the distribution of such funds, whichever is later. Failure to provide DoAg access to these records will result in a breach of Applicant's agreement with DoAg. In the case of a breach, Applicant shall be responsible for a full refund of all payments to DoAg.
- Providing information that you do not believe is true on an application for a benefit is a class A misdemeanor. AS 11.56.210. By signing, you certify that this application and all supporting documents are true and correct.

Signature of Applicant _____ **Date** _____

If you have questions, please contact the Alaska Division of Agriculture email at dag.scbg@alaska.gov.

Information below this line is for the Alaska Division of Agriculture.

1. Payment Calculation

A. Peony replant total:

a. Formula: Total # of Peony Plants eligible x \$30 x Payment Factor – Reduction = \$ Total Reimbursement

B. Future Economic Loss total:

a. Year 1: 100% production loss – Total # of plants x \$15 = Year 1 Reimbursement

b. Year 2: 95% production loss – 95% Total (.95) x \$15 = Year 2 Reimbursement

c. Year 3: 80% production loss – 80% Total (.80) x \$15 = Year 3 Reimbursement

d. Year 4: 5% production loss – 5% Total (0.05) x \$15 = Year 4 Reimbursement

e. (Year 1 Reimbursement + Year 2 Reimbursement + Year 3 Reimbursement + Year 4 Reimbursement) x Payment Factor – Reduction = \$Total Reimbursement

Note 1: The payment factor (percentage) will be determined when all applications have been reviewed for accuracy and received. After review, a determination will be made on the percentage of eligible loss that each producer will receive.

Note 2: The reduction is the amount of funds received from other federal, state, non-profit grant awards and/or funds received by insurance claims for losses claimed on this application.