

## **Instructions for completion of Supplemental to Application for DUA Self-Employed Individuals ETA 81A**

APPLICANT'S NAME – Please list your last name, first name, and middle initial.

DISASTER NO. – Do not complete.

WDC NO – Do not complete.

SS# - Please enter in your correct social security number.

BUSINESS NAME AND ADDRESS – Please list your business address if applicable, and your full address including number, street, city, county, state and zip code.

TYPE OF SELF-EMPLOYMENT – Please check appropriate box farming, business or professional.

AS A: - Check appropriate box –sole owner, partner or corporation.

### **SECTION A, FARMING ACTIVITY**

SIZE OF FARM – List total acres of farm. If farm is located in more than 1 county, please list total number of acres in each county.

CROPS - List crop farmed and acres planted such as corn 150 acres.

LIVESTOCK – List type of livestock and number such as cattle 100 head.

OTHER – List other items not listed with crops or livestock such as truck gardens, forestry, eggs etc.

### **SECTION B – SELF EMPLOYMENT INFORMATION**

- 1) Describe the nature of your self-employment. - Describe nature of your self employment such as grain farmer of corn oats or soybeans for 15 years.
- 2) Did this self-employment require any part of your time in the performance of services? Please answer yes or no. If No please explain - such as a partnership and partner farms the land while you live in town.
- 3) Were you performing any services in connection with this self-employment at the time of the disaster? Yes or No. If "No" please explain why you were not performing services such as leases land to another individual or son farms land. If "Yes", identify services being performed, such as plowing and planting corn.
- 4) Did the disaster prevent you from performing all services in connection with your self employment? Yes or No If "NO" identify services being performed such as continuing to feed and raise livestock or continuing to farm 100 acres not covered by the flood.
- 5) Since becoming unemployed, have you been performing or able to perform any services in restoring or improving the value or profit-making capability of your self-employment? Please mark yes or no. If yes, explain in detail the activities the activities you have been able to perform.
- 6) At the time of the disaster, was this self-employment your primary occupation and primary means of livelihood? Yes or No. If no, please list your primary means of livelihood.
- 7) Do you have any other occupation other than this self-employment? Yes or No. If yes, list occupation, number of hours worked per week, gross weekly wage and effect disaster had on this occupation if any.

### **SECTION C – APPLICANT CERTIFICATION**

Read certification, if everything on application is correct and you understand application, sign and date application.

