DRAFT - ATTACHMENT A

ANIMAL FACILITY ANNUAL REPORT FORM

Certification for (previous) Calendar Year: 20	ation for (previous) Calendar Year: 20 Today's Date:				
Certificate of Coverage or Permit Number	Ficate of Coverage or Permit Number County				
Facility Name (as shown on Certificate of Coverage or Permit)					
Operator in Charge for this Facility	Certificat	ion #			
Facility's Integrator, if applicable:					
Land application of animal waste as allowed by the above permit YES NO. If NO, skip Part I and Part II and proc was generated but not land applied, attach an explanation on how Part I: Facility Information:	eed to the certificati	on. Also, if anima			
CAWMP SUMMARY					
Total number of application Fields or Pulls in the Certified Animal Waste Management Plan (CAWMP):		Fields or Pulls/zones			
Total Useable Acres approved in the CAWMP		Acres			
Total pounds of Plant Available Nitrogen (PAN) allowed to be land applied annually by the CAWMP and the permit:		Lbs. PAN			
	NNUAL OPERATIONS SUMMARY (for all crop cycles that ended during the calendar year)				
Total number of Fields or Pulls on which land application occurred during the year:		Fields or Pulls/zones			
Total Acres on which waste was applied		Acres			
Total pounds of Plant Available Nitrogen (PAN) applied during the year for all application sites:		Lbs. PAN			
BENIFICAL USE SUMMARY	I				
Estimated amount of total manure, litter and process wastewater sold		Tons			
or given to other persons and taken off site during the year		Gallons			
PRODUCTION SUMMARY	I				
	Number of Animal	Operation Type			
Annual average number of animals by type at this facility during the previous year:					

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	Number of Animal	Operation Type
Largest number of animals by type at this facility at any one time		
during the previous year:		
	Number of Animal	Operation Type
Smallest number of animals by type at this facility at any one time		
during the previous year:		
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Swine	Cattle	Dry Poultry	Other Types
Wean to Finish	Dairy Calf	Non-Laying Chickens	Horses – Horses
Wean to Feeder	Dairy Heifer	Laying Chickens	Horses – Other
Farrow to Finish	Milk Cow	Pullets	Sheep – Sheep
Feeder to Finish	Dry Cow	Turkeys	Sheep - Other
Farrow to Wean	Beef Stocker Calf	Turkey Pullet	
Farrow to Feeder	Beef Feeder		
Boar/Stud	Beef Broad Cow	Wet Poultry	
Gilts	Other	Non-Laying Pullet	
Other		Layers	

Part II: Facility Status:

IF THE ANSWER TO ANY STATEMENT BELOW IS "NO", PLEASE PROVIDE A WRITTEN DESCRIPTION AS TO WHY THE FACILITY WAS NOT COMPLIANT, THE DATES OF ANY NON COMPLIANCE, AND EXPLAIN CORRECTIVE ACTION TAKEN OR PROPOSED TO BE TAKEN TO BRING THIS FACILITY BACK INTO COMPLIANCE.

1.	Only animal waste generated at this facility was applied to the permitted sites during the past calendar year.	☐ Yes	
2.	The facility was operated in such a way that there was no direct runoff of waste from the facility (including the houses, lagoons/storage ponds and the application sites) during the past calendar year.	☐ Yes	
3.	There was no discharge of waste to surface water from this facility during the past calendar year.	☐ Yes	
4.	There was no freeboard violation in any lagoons or storage ponds at this facility during the past calendar year.	☐ Yes	
5.	There was no PAN application to any fields or crops at this facility greater than the levels specified in this facility's CAWMP during the past calendar year.	☐ Yes	
6.	All land application equipment was calibrated at least once during the past two calendar years	☐ Yes	

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7.	Sludge accumulation in all lagoons did not exceed the volume was designed or reduce the lagoon's minimum treatment volume for which the lagoon was designed.			∐ No
8.	A copy of the Annual Sludge Survey Form for this facility i	s attached to this report.	\square Yes	\square No
9.	Soils analysis were performed within the last three years on e waste during the past calendar year?	ach field receiving animal	☐ Yes	□ No
10.	Soil pH was maintained as specified in the permit during the J	past calendar year?	\square Yes	\square No
11.	All required monitoring and reporting was performed in accorporate during the past calendar year.	rdance with the facility's	☐ Yes	
12.	All operations and maintenance requirements in the permit we the past calendar year or, in the case of a deviation, prior auth from the Division of Water Resources.		☐ Yes	□ No
13.	Crops as specified in the CAWMP were maintained during the sites receiving animal waste and the crops grown were remove the facility's permit.		☐ Yes	□ No
14.	All buffer requirements as specified on the permit and the CA maintained during each application of animal waste during the		e	□ No
sup eva tho my	certify under penalty of law that this document and all attachmer pervision in accordance with a system designed to assure that quate the information submitted. Based on my inquiry of the pase persons directly responsible for gathering the information, the knowledge and belief, true, accurate, and complete. I am away mitting false information, including the possibility of fines and	ualified personnel properly erson or persons who man he information submitted re that there are significant	y gather and age the syste is, to the best t penalties for	l em, or st of or
	Permittee Name and Title (type or print)			
	Signature of Permittee	Date		
	Signature of Operator in Charge	Date		