

ANIMAL FACILITY ANNUAL REPORT FORM

Report for (previous) Calendar Year: 20_____ Today's Date: _____

Certificate of Coverage or Permit Number _____ County _____

Facility Name (as shown on Certificate of Coverage or Permit) _____

Operator in Charge for this Facility _____ Operator Certification # _____

Facility's Integrator, if applicable: _____

Part I: Facility Information (As of December 31st of reporting year unless otherwise specified):

Land application of animal waste as allowed by the above permit occurred during the past calendar year _____ YES _____ NO. If NO, skip Part I and proceed to Part II and Part III. Also, if animal waste was generated but not land applied, attach an explanation on how the animal waste was managed/disposed.

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	
LAGOON SUMMARY			
Number of Permitted Lagoons		# Lagoons	
Number of Permitted Lagoons with a sludge removal or management plan per Permit Condition III-22		# Lagoons	
ANNUAL OPERATIONS SUMMARY			
(for all crops with windows that ended during the previous calendar year)			
Total number of Fields or Pulls on which land application occurred during the year:		Fields	or
		Pulls/zones	
Total Acres on which animal waste was applied		Acres	
Total pounds of Plant Available Nitrogen (PAN) applied during the year for all application sites:	Permitted Animal Waste		Lbs. PAN
	Other Nutrient Sources (incl Dry Litter)		Lbs. PAN
SOIL SAMPLE SUMMARY			
Total number of Fields or Pulls for which the most recent soils evaluation indicated a Soil P (P-index) greater than 400		Fields	or
		Pulls/zones	
Total usable acres of Fields or Pulls for which the most recent soils evaluation indicated a Soil P (P-index) greater than 400		Acres	

BENEFICIAL USE SUMMARY		
Estimated amount of total manure, litter and process wastewater sold or given to other persons and taken off site during the year		Tons
		Gallons
PRODUCTION SUMMARY		
Annual average number of animals by type at this facility during the previous year		
Operation Type	Number of Animal	

Swine

- Wean to Finish
- Wean to Feeder
- Farrow to Finish
- Feeder to Finish
- Farrow to Wean
- Farrow to Feeder
- Boar/Stud
- Gilts
- Other

Cattle

- Dairy Calf
- Dairy Heifer
- Milk Cow
- Dry Cow
- Beef Stocker Calf
- Beef Feeder
- Beef Broad Cow
- Other

Dry Poultry

- Non-Laying Chickens
- Laying Chickens
- Pullets
- Turkeys
- Turkey Pullet

Wet Poultry

- Non-Laying Pullet
- Layers

Other Types

- Horses – Horses
- Horses – Other
- Sheep – Sheep
- Sheep - Other

Part II: Facility Status (Respond for activity within the Calendar year of reporting year unless otherwise specified):

Directions: Check box next to the appropriate answer, for each statement were the answer is “No”, provide a written description of any action take taken or pending to address the requirements and return the facility to compliance

1. All “major changes,” “revisions,” and “amendments” to the CAWMP were made according to requirements of Condition I.4. Yes No
2. There were no freeboard exceedances in any lagoons or storage ponds. Yes No
3. There was no PAN application to any fields or crops at this facility greater than the levels specified in this facility’s CAWMP. Yes No
4. Sludge Surveys as required in Condition III.22 have been completed. Yes No
5. For any temporary lagoon lowering event, drawn down restrictions and record keeping requirements in Condition II.29 have been met. Yes No
6. Soils analysis were performed within the last three years on each field receiving animal waste. Yes No

- 7. All required monitoring and reporting were performed in accordance with the facility's permit during the past calendar year. Yes No
 - 8. Crops as specified in the CAWMP were maintained during the past calendar year on all sites receiving animal waste and the crops grown were harvested and removed in accordance with the facility's permit. Yes No
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Part III: Affirmation Statement

“I affirm by my signature that this document and all attachments were prepared under my direction or supervision. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of civil and criminal penalties.”

Permittee Name and Title (type or print)

Signature of Permittee

Date

Signature of Operator in Charge
(if different from Permittee)

Date