

Application for Coverage Notice of Intent (NOI) For Coverage Under A Concentrated Animal Feeding Operation (CAFO) General Permit

I. Select Type of Application Being Submitted:				
New Application for State Only Permit Coverage (State Only	ate Waste Discharge)			
New Application for Combined Permit Coverage (NI	PDES and State Waste I	Discharge)		
Updated Information for Permit Number:				
II. Applicant/Permittee Information				
Applicant Name: Business/Facility Name:				
Mailing Address:				
City:	State:	Zip:		
Phone:	Cell Phone (Optional			
Email:	UBI:			
III Equility Information (CH : 15 U.S				
III. Facility Information (fill in if different from info Facility Contact:	rmation in II. Applicant/Pe	ermittee Information above)	_	
Facility Address:				
City:	State:	Zip:		
Phone:	Cell Phone (Optional			
Email:				
IV. Animal Numbers				
Give the maximum number of each type of animals at yo	our facility for the year.			
Dairy Cows:	Sheep or La	ambs:		
Dairy Heifers:	☐ Turkeys:			
☐ Veal Calves:	Ducks:			
☐ Beef:	Horses:			
Swine	Chickens			
≥55 pounds:	Broilers:			
< 55pounds:				
Other:				
V. Manure Generation and Storage				
Total amount of manure, litter, process waste, or process	wastewater			
generated at the facility per year.		Tons/Gallon	S	
Total amount of water captured by production area of the facility that is		G II		
1 1 1		Gallon	S	
Estimate how much manure, litter, process waste and pro		☐Tons/☐Gallon	c	
will be exported to other parties not affiliated with the op Number of acres under the applicant's control that are av		Tons/Gallon	5	
application of manure, litter, process waste, process wast				
digestate.		Acre	S	

Type of Containment or Storage	Total Capacity	Design Freeboard
Lagoon	Gallons	Feet
Roofed Storage Shed	☐Tons/☐Cubic Yards	n/a
Storage Ponds	Gallons	Feet
Under-floor Pits	Gallons	Feet
Above Ground Storage Tanks	Gallons	Feet
Below Ground Storage Tanks	Gallons	Feet
Concrete Pad	☐Tons/☐Cubic Yards	n/a
Soil Pad	☐Tons/☐Cubic Yards	n/a
Other (Specify):	☐Tons/☐Cubic Yards/☐Gallons	n/a

VI. Combined Permit Only: Field Discharge Management Compliance Alternative

If the Applicant/Permittee is applying for the Combined Permit and is planning on using a field discharge management alternative practice compliance alternative (permit special condition S4.M.3) the following information must be provided for each field on which a compliance alternative is planned for use:

- 1. Field ID matching the field ID used in the applicant/Permittee's Manure Pollution Prevention Plan
- 2. A map of the field where the alternative practice compliance alternative is planned for use showing the location(s) on the field where the compliance alternative is to be implemented.
- 3. Supporting information demonstrating that the alternative practice compliance alternative will provide pollutant reductions equivalent of better than the reductions that would be achieved by a 100-foot setback.

Requests for approval to use alternative practice compliance alternatives submitted without this information will not be considered for approval.

VII. Public Notice

(Continued on next page. . .)

Combined Permit: If you are applying for the Combined permit, you must publish public notice.				
State Only Permit: Did you begin operation after January	Y 18, 2017? Yes: Publish public notice. No: Public notice is not required.			
Public notice must be published at least once each week, for two consecutive weeks with at least seven days between publications, in a single newspaper that has general circulation in the county in which the project is to take place. The applicant must use the Public Notice Template provided below. The completed NOI must be submitted to Ecology on or before the date of the first public notice. Ecology cannot grant permit coverage sooner than 31 days after the date of the second public notice. Provide the exact dates (mm/dd/yy) that the public notices will appear in the newspaper.				
First public notice date:	Second public notice date:			
Newspaper publishing the public notice:				
Public Notice Template				
Complete this template using facility-specific information and submit to a local newspaper with general circulation within the county where the facility is located. The language in bold is required and may not be modified, however the applicant may add additional information to the notice.				
[Name of Applicant/Permittee] is seeking coverage under Concentrated Animal Feeding Operation NPDES and application applies to the applicant's facility located at land application fields.	State Waste Discharge General Permit. The			
Combined Permit Only: Include the italicized section below in your public notice only if you are applying for Combined Permit coverage and are proposing to use a field discharge management practice alternative practice compliance alternative (Section VI. Combined Permit Field Discharge Management Compliance Alternative) at the time you are applying for coverage. The applicant is also is seeking approval to use an alternative practice compliance alternative as allowed by CAFO permit special condition \$4.M.3 on their land application field(s). Comments on the alternative practice compliance alternative should address whether the proposal will be as effective as the default 100-foot land application setback required by CAFO permit special condition \$4.M.				

Any person desiring to present their views to Ecology regarding this application may do so in writing within 30 days of the last date of publication of this notice. Comments should address whether coverage under this permit is appropriate for the facility. Comments must be submitted to Ecology. Any person interested in the Ecology's action on this application may notify Ecology of their interest within 30 days of the last date of publication of this notice. Comments can be submitted to: Department of Ecology, Water Quality Program, Attn: CAFO Permit Administrator, P.O. Box 47600, Olympia, WA 98504-7600.		
VIII. Applicant Certification		
"I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering information, 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 fine and imprisonment for knowing violations."		
Print Name:	Date:	
Signature:		

(Continued . . .)

Application for Coverage Instructions

Concentrated Animal Feeding Operation General Permit

I. Select Type of Application Being Submitted

- If this is your initial application, indicate which permit you would like to operate your facility under.
- If this application is just to provide updated information, check the update box and provide the permit number (assigned by Ecology) that you are providing updated information for.

II. Applicant/Permittee Information

The applicant must provide their contact information including name, business name, mailing address, phone number, and email address.

III. Facility Information

The applicant must fill out this section if there is a facility contact responsible for the day-to-day operation of the facility that is different from the applicant.

IV. Animal Numbers

Fill out the numbers and types of animals confined on the facility for a period of 45 days or more during any 12 month period. The confined animals do not have to be the same individuals during the 45 day period.

V. Manure Generation and Storage

Fill out the types and capacities of storage that the applicant has onsite.

VI. Combined Permit Only: Field Discharge Management Compliance Alternative

Attach the required information to the permit application if applying for coverage under the combined permit and proposing to implement a compliance alternative at the time of permit coverage.

VII. Public Notice

- The applicant of a new operation (started operation after this
 permit was issued) or for an operation modifying permit
 coverage (supplying updated information to Ecology is not
 modifying permit coverage) must use this template to publish
 public notice in the newspaper.
- Existing operations do not need to publish public notice.

VIII. Applicant Certification

A person who has signature authority must sign the Application. Signature authority is defined in General Condition 15 as:

- In the case of corporations, by a responsible corporate officer.
- 2. In the case of a partnership, by a general partner of a partnership.
- 3. In the case of sole proprietorship, by the proprietor.
- 4. In the case of a municipal, state, or other public facility, by either a principal executive officer or ranking elected official.

Once the information in Sections I to VIII is complete and the Application is signed, the form must be submitted to:

Washington Department of Ecology Water Quality Program Attn: CAFO Permit Administrator PO Box 47600 Olympia, WA 98504-7600 **NOTE:** Maintain a copy of the completed Application Form for your records.

Questions?

Contact: CAFO Permit Administrator at (360) 407-6600 or cafopermit@ecy.wa.gov.

To ask about the availability of this document in a format for the visually impaired, call the Water Quality Program at (360) 407-6401. Persons with hearing loss may call 711 for Washington Relay Service. Persons with a speech disability may call 877-833-6341.