



**Kentucky Pollutant Discharge
Elimination System**

Permit Application

Animal Waste Management

A complete application consists of this form and Form 1.
For additional information, contact: Surface Water Permits Branch, (502) 564-3410.

Name of Facility _____

I. GENERAL INFORMATION (See Instructions)	Agency Use								
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A. Type of Business (Check one)

- Concentrated animal feeding operation (Complete Items I and II)
- Concentrated aquatic animal production operation (Complete Items I and III)

B. Contact Information

Owner/or Operator Name:	
Telephone	
Facsimile:	
Mailing Address:	
City, State, Zip Code:	

C. Facility Operation Status (Check one)

- Existing facility
- Proposed facility

D. Facility Information

Name:		
Telephone		
Facsimile:		
Physical Address		
City, State, Zip Code:		
County:	Latitude:	Longitude:
If contract operation:	Name of integrator:	
	Address of Integrator:	

II. CONCENTRATED ANIMAL FEEDING OPERATION CHARACTERISTICS

A. Type and Number of Animals in Open and Housed

Type	Number in Open Confinement	Number Housed Under Roof
<input type="checkbox"/> Mature Dairy Cows		
<input type="checkbox"/> Dairy Heifers		
<input type="checkbox"/> Veal Calves		
<input type="checkbox"/> Cattle (not dairy or veal)		
<input type="checkbox"/> Swine (55 lbs. or over)		
<input type="checkbox"/> Swine (under 55 lbs.)		
<input type="checkbox"/> Horses		
<input type="checkbox"/> Sheep or Lambs		
<input type="checkbox"/> Turkeys		
<input type="checkbox"/> Chickens (Broilers)		
<input type="checkbox"/> Chickens (Layers)		
<input type="checkbox"/> Ducks		
<input type="checkbox"/> Other Specify:		
Total Animals		

B. Manure, Litter and/or Wastewater Production and Use

1. How much manure, litter and wastewater is generated annually by the facility?	_____ tons _____ gallons
1. If land applied, how many acres of land under the control of the applicant are available for applying the CAFOs manure/litter/wastewater?	_____ acres.

C. Topographic Map Submitted with Form 1

D. Type of Containment, Storage and Capacity

1. Type of Containment	Total Capacity (in gallons)	
<input type="checkbox"/> Lagoon		
<input type="checkbox"/> Holding Pond		
<input type="checkbox"/> Evaporation Pond		
<input type="checkbox"/> Other (specify):		
2. Report the total number of acres contributing drainage: _____ acres.		
3. Type of Storage	Total Number of Days	Total Capacity (gallons/tons)
Anaerobic Lagoon		
Storage Lagoon		
Evaporation Pond		
Above Ground Storage Tanks		
Belowground Storage Tanks		
Roofed Storage Shed		
Concrete Pad		
Impervious Soil Pad		
Other (specify):		

E. Nutrient Management Plan

- Has a nutrient management plan been developed for the facility and included with this permit application? Yes No
- If no, when will the nutrient management plan be developed? Date: _____
- Is a nutrient management plan being implemented for this facility? Yes No
- The date of the last review or revision of the nutrient management plan. Date: _____
- If not land applying, describe alternative use(s) of manure, litter and or wastewater.

Note: Permit application is not complete until a nutrient management plan is submitted to the Permitting Authority.

F. Land application best management practices

Please check any of the following best management practices that are being implemented at the facility to control runoff and protect water quality:

- Buffers Setbacks Conservation tillage Constructed Wetlands Infiltration Field Grass Filter Terrace

III. CONCENTRATED AQUATIC ANIMAL PRODUCTION OPERATION CHARACTERISTICS

A. For each outfall, give the maximum daily flow, maximum 30-day flow, and the long-term average flow.

Outfall Number	Flow (gallons per day)		
	Maximum Daily	Maximum 30 Days	Long Term Average

B. Indicate the total number of ponds, raceways, and similar structures in your facility.

Ponds _____ Raceways _____ Other _____

C. Provide the name of the receiving water and the source of water used by your facility:

Receiving Water _____ Water Source _____

D. List the species of fish or aquatic animals held and fed at your facility. For each species, give the total weight produced by your facility per year in pounds of harvestable weight, and also give the maximum weight present at any one time.

Cold Water Species			Warm Water Species		
Species	Harvestable Weight (pounds)		Species	Harvestable Weight (pounds)	
	Total Yearly	Maximum		Total Yearly	Maximum

E. Report the total pounds of food fed during the calendar month of maximum feeding.

Month _____ Pounds _____

IV. 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 gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the 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.

NAME AND OFFICIAL TITLE (type or print) Mr. <input type="checkbox"/> Ms. <input type="checkbox"/>	TELEPHONE NUMBER (area code and number)
SIGNATURE	DATE SIGNED

If according to 401 KAR 5:072 a second signature is necessary, please provide below.

NAME AND OFFICIAL TITLE (type or print) Mr. <input type="checkbox"/> Ms. <input type="checkbox"/>	TELEPHONE NUMBER (area code and number)
SIGNATURE	DATE SIGNED

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM
FORM B – INSTRUCTIONS

Listed below are explanations of select Form B questions. If further information is needed concerning any question, please contact the Division of Water.

General

I. GENERAL INFORMATION

This form must be completed by all applicants with a facility (either existing or proposed) that includes a concentrated animal feeding operation or an aquatic animal production facility which results in a discharge to waters of the Commonwealth. Not all animal feeding operations or fish farms are required to obtain KPDES permits. Exclusions are based on size and absence of discharge. See the description of regulatory exclusions in 40 CFR 122.3. See the definition for animal feeding operations and the definition for concentrated animal feeding operations in 401 KAR 5:002 and 40 CFR 122.23. Only concentrated animal feeding operations are required to have a KPDES discharge permit. In particular, for animal feeding operations, the size cutoffs depend on whether or not pollutants are discharged through a manmade device or by direct contact with the facility or animals. A facility for laying hens or broilers is required to have a permit if it has a liquid manure handling system or continuous overflow watering.

For aquatic animal production facilities, the size cutoffs are based on whether the species are warm water or cold water, on the production weight per year in harvestable pounds, and on the amount of feeding in pounds of food (for cold water species). In addition, facilities which discharge less than 30 days per year, or only during periods of excess runoff (for warm water fish), are not required to have a permit.

- A. See 40 CFR 122.23 and 40 CFR 122.24 for the definitions of “concentrated animal feeding” and “concentrated aquatic animal production.”
- B. Use this space to give owner/operator contact information.
- C. Check “proposed” if your facility is not now in operation or is expanding to meet the definition of a concentrated animal feeding operation (CAFO) as defined in 40 CFR 122.23.
- D. Use this space to give a complete legal description of your facility’s location including name, address, and latitude/longitude. Also, if a contract grower, provide the name and address of the integrator.

II. CONCENTRATED ANIMAL FEEDING OPERATION CHARACTERISTICS

- A. If you have identified the facility as a concentrated animal feeding operation in part I, give the maximum number of each type of animal in open confinement or housed under roof (either partially or totally) which are held at your facility for a total of 45 days or more in any 12 month period. Provide the total number of animals confined at the facility.
- B. Provide the total amount of manure, litter and wastewater generated annually by the facility. Identify if manure, litter and wastewater generated by the facility is to be land applied and the number of acres, under the control of the CAFO operator, suitable for land application. Provide the estimated annual quantity of manure, litter, and wastewater that the applicant plans to transfer off-site.
- C. Check this box if you have submitted Form 1 with a topographic map of the entire operation, including the production area and land under the operational control of the CAFO operator where manure, litter and/or wastewater are applied.
- D. Type of Containment, Storage and Capacity
 - 1. Provide information on the type of containment and the capacity of the containment structure(s).
 - 2. Provide the number of acres that are drained and collected in the containment structure(s).
 - 3. Identify the type of storage for the manure, litter and/or wastewater. Give the capacity of this storage in days.
- E. Provide information concerning the status of the development and implementation of a nutrient management plan for the facility. In those cases where the nutrient management plan has not been completed, provide an estimated date of development and implementation. If not land applying, describe the alternative uses of the manure, litter and wastewater (e.g., composting, pelletizing, energy generation, etc.). An application any CAFO cannot be considered complete until submittal of the nutrient management plan.
- F. Check any of the identified conservation practices that are being implemented at the facility to control runoff and protect water quality.

III. CONCENTRATED AQUATIC ANIMAL PRODUCTION FACILITY CHARACTERISTICS

- A. Outfalls should be numbered to correspond with the map submitted in Item III of Form 1. Values given for flow should be representative of your normal operation. The maximum daily flow is the maximum measured flow occurring over a calendar day. The maximum 30-day flow is the average of measured daily flows over the calendar month of highest flow. The long-term average flow is the average of measured daily flows over a calendar year.

- B. Give the total number of discrete ponds or raceways in your facility. Under "other," give a descriptive name of any structure which is not a pond or a raceway but which results in discharge to waters of the Commonwealth.
- C. Use names for the receiving water and source of water which correspond to the map submitted in Item III of Form 1.
- D. The names of fish species should be proper, common, or scientific names as given in special Publication No. 6 of the American Fisheries Society, "A List of Common and Scientific Names of Fishes from the United States and Canada." The values given for total weight produced by your facility per year and maximum weight present at any one time should be representative of your normal operation.
- E. The value given for maximum monthly pounds of food should be representative of your normal operation.

IV. CERTIFICATION

The Clean Water Act provides for severe penalties for submitting false information on this application form. Section 309 ©(2) of the Clean Water Act provides that "Any person who knowingly makes any false statement, representation, or certification in any application....shall upon conviction, be punished by a fine of no more than \$10,000 or by imprisonment for not more than six months, or both."

Federal regulations require the certification to be signed as follows:

Corporation: by a principal executive officer of at least the level of vice president.

Partnership or sole proprietorship: by a general partner or the proprietor.

Municipality, state, federal, or other public agency: by either a principal executive officer or ranking elected official.

SEND COMPLETED FORMS TO:

**Division of Water
Surface Water Permits
200 Fair Oaks Lane
Frankfort, Kentucky 40601**

For additional information, call (502) 564-3410.