Ohio | Department of Agriculture
Governor Ted Strickland • Lt. Governor Lee Fisher
Director Robert J. Boggs

Livestock Environmental Permitting Program
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GENERAL INFORMATION

The following sections are required for the all permits, regardless of type:

- PART 1: OWNER'S/OPERATOR'S INFORMATION
- PART 2: FACILITY INFORMATION
- PART 3: WATERSHED RECORD
- PART 4: PERMIT APPLICATION PREPARATION
- PART 5: REASON FOR APPLICATION
  - *Part A – Permit to Install*
  - *Part B – Permit to Operate*
  - *Part C – National Pollutant Discharge Elimination System (NPDES)*
  - *Part D – Fees*
  - *Part E – Construction Storm Water NPDES Permit*
- PART 6: OTHER PERMITS, LICENSES, CERTIFICATIONS, ETC.
  - *Part A – Flood Plain Permit*
  - *Part B – Septic System*
  - *Part C – Dairy Milk License*
  - *Part D – Dam Safety Permit (Ohio DNR/Division of Water)*
  - *Part E – Water Withdrawal Facility Registration*
  - *Part F – Public Drinking Water (25 or more employees)*
  - *Part G – Mortality Composting Certification*
  - *Part H – Composting Permit*
  - *Part I – 401/404 Certificate (Ohio EPA/Army Corps of Engineers)*
  - *Part J – Other Permits or Licenses Listing*
- PART 7: CONFIDENTIAL INFORMATION
- PART 8: CERTIFIED LIVESTOCK MANAGER
- PART 9: LOCAL NOTIFICATION
- PART 10: COMPLIANCE INFORMATION
- PART 11: TYPES OF ANIMAL CONFINEMENT BUILDINGS
- PART 12: ANIMAL CAPACITY

OWNER'S/OPERATOR'S INFORMATION

INSTRUCTIONS: All owners, operators, officers, directors, partners, or others that have a right to control or in fact control management of an applicant or the selection of officers, directors or managers of an applicant must be identified. If more space is needed, attach a separate piece of paper with the required information. At least one owner/operator must sign and certify the permit application (Rule 901:10-1-02). If any owner, operator, partner, or controlling person is a corporation, limited liability company (LLC or Ltd.), or limited liability partnership (LLP), identify the officers, directors, partners, or members of that company using supplemental General Information Form 3900-GEN-001b.

OWNER/OPERATOR 1:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone _____ Fax: _____ Cell: _____

Email Address: _____

OWNER/OPERATOR 2:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone _____ Fax: _____ Cell: _____

Email Address: _____

OWNER/OPERATOR 3:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone _____ Fax: _____ Cell: _____

Email Address: _____

OWNER/OPERATOR 4:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Cell: _____

Email Address: _____

OWNER/OPERATOR 5:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Cell: _____

Email Address: _____

SIGNATURE AND 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 information, the information is, to the best of my knowledge and belief, true and accurate and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations." [*Rule 901:10-1-02(A)(8)*]

Check one or both: ☐ Name of Owner ☐ Name of Operator

Print Name

Signature

Date Signed

PART 2: FACILITY NAME AND ADDRESS

FACILITY INFORMATION

Name of Facility: _____

Contact Person: _____

Facility Address: _____

City: _____ State: _____ Zip Code: _____

County: _____ Township: _____ Section: _____

Phone: _____ Fax: _____

Email: _____

PART 3: WATERSHED

WATERSHED OF RECORD

The name of the watershed can be located on the U.S. Environmental Protection Agency Watershed Information Network web site: http://cfpub.epa.gov/surf/locate/index.cfm. For assistance please contact the Ohio Department of Agriculture, Livestock Environmental Permitting Program at (614) 387-0470 or through the ODA web site at: www.ohioagriculture.gov.

Watershed Name: _____

Address (8 digit code): _____

PART 4: PERMIT APPLICATION PREPARATION

PERMIT APPLICATION PREPARATION

PERMIT APPLICATION PREPARED BY (Rule 901:10-1-02[A][8]):

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

PERMIT TO INSTALL PREPARATION BY PROFESSIONAL ENGINEER (Rules 901:10-2-03, 901:10-2-05, 901:10-2-06):

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

REASON FOR APPLICATION

A. PERMIT TO INSTALL (Rules 901:10-2-01 to 901:10-2-06)

- ☐ Proposed construction of a new CAFF or MCAFF.
- ☐ Proposed construction of a new manure storage or treatment facility at an existing CAFF or MCAFF by more than 10%.
- ☐ Proposed modification of an existing PTI. ("modification" is defined in Rule 901:10-1-01).
- ☐ Proposed expansion of design capacity at an existing animal feeding facility (AFF) to the size of a CAFF or a MCAFF.
- ☐ Proposed expansion of design capacity at an existing CAFF or existing MCAFF by more than 10% increase.
- ☐ Proposed expansion of design capacity at an existing CAFF to a MCAFF.
- ☐ Other (List and describe in detail):

B. PERMIT TO OPERATE (Rules 901:10-2-07 to 901:10-2-20)

- ☐ Proposed operation of a CAFF.
- ☐ Proposed expansion of animal numbers at an existing AFF to the size of a CAFF.
- ☐ Renewal of an expiring PTO.
- ☐ Other (List and describe in detail):

C. NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) (Rules 901:10-2-07 to 901:10-2-11, 901:10-2-13 to 901:10-2-16, 901:10-2-18, 901:10-2-20)

- ☐ Designated as a concentrated animal feeding facility (CAFF).
- ☐ Proposed new discharge.
- ☐ Other (List and describe in detail):

- ☐ **General National Pollution Discharge Elimination System** (NPDES) (901:10-4 OAC)

- ☐ **Individual National Pollution Discharge Elimination System** (NPDES) (Rules 901:10-2-07 to 901:10-2-11, 901:10-2-13 to 901:10-2-16, 901:10-2-18, 901:10-2-20, 901:10-3-01 to 901:10-3-11)

D. FEES:

☐ Permit to Install	$1,250.00
☐ Permit to Operate	$ 750.00
☐ Permit Modification	$ 200.00

E. CONSTRUCTION STORM WATER NPDES PERMIT (Rules 901-10-2-04[E] and 901:10-3-11)

During the construction described in your permit application, will one acre or more be disturbed?

- ☐ Yes. You **WILL** need to apply for a Construction Storm Water NPDES Permit.
- ☐ No. You **WILL NOT** need to apply for a Construction Storm Water NPDES Permit.

OTHER PERMITS, LICENSES, CERTIFICATIONS, ETC.

The issuance of this permit does not constitute express or implied approval or agreement that if constructed and operated in accordance with the application and the plans included in the application that this facility will operate in compliance with all applicable federal, state, and local laws and regulations. Before the start of operations authorized in a permit(s) issued by ODA, the owner/operator is advised to have all other necessary permits or any other regulatory documents current and on file. List the status of any permits, licenses, etc. and the origin or source or issuing department of the permits, that are required for the operation of this facility. The source means the issuing government agency for most of these permits, which include the Ohio Department of Health, local health department, Ohio EPA, or the Ohio Department of Natural Resources. The following steps shall be followed on answering these items:

- Check **YES** if the Permit is issued and provide the permit number.
- Check **NO** if the Permit is required but not yet issued at the date of submittal of this application and provide the status of the permit application (i.e., Submitted, Not Submitted, etc.)
- Check **N/A** if the Permit is not applicable to this facility.

A. FLOOD PLAIN PERMIT:

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

B. SEPTIC SYSTEM PERMIT:

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

C. DAIRY MILK LICENSE:

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

D. DAM SAFETY PERMIT (Ohio DNR/Division of Water):

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

E. WATER WITHDRAWAL FACILITY REGISTRATION:

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

_____

F. PUBLIC DRINKING WATER (25 or more employees):

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

G. MORTALITY COMPOSTING CERTIFICATION:

☐ Yes Status of Permit: _____

☐ No Issuing Agency: _____

☐ N/A

H. COMPOSTING PERMIT (If selling or giving compost away for application on land of others):

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

I. 401/404 CERTIFICATE (Ohio EPA/Army Corps of Engineers):

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

J. OTHER PERMITS OR LICENSES (List and describe in detail):

☐ Yes Permit I.D.: _____

☐ No Status of Permit: _____

☐ N/A Source: _____

Contact the Ohio Department of Agriculture, Livestock Environmental Permitting Program at (614) 387-0470, or the ODA web site at www.ohioagriculture.gov/lepp/ for assistance or more information.

For NPDES purposes, please note: Agricultural activities which are subject to this permit are generally reported under one or more of the following North American Industry Classifications (NAIC) [formerly referred to as SIC codes] as found in the 2002 NAIC Manual:

NAIC 112112	Beef	NAIC 112210	Swine
NAIC 112410	Sheep/Goats	NAIC 112120	Dairy
NAIC 112320	Broilers	NAIC 112310	Eggs, Layers, Starter Pullets
NAIC 112330	Turkeys	NAIC 112340	Pullets, Hatchery
NAIC 112390	Horses	NAIC 112920	Horses

PART 7: CONFIDENTIAL INFORMATION

CONFIDENTIAL INFORMATION

Rule 901:10-1-05 of the Ohio Administrative Code allows an applicant to submit a claim of "trade secret" or "confidential business information" as Ohio law defines these terms. **It is the applicant's responsibility to provide detailed information and supporting reasons for making such a claim before the application is submitted.** It is the applicant's responsibility to mark the information or the pages or to otherwise describe in detail those parts of the application and supporting documents and enclosures for which the claim of confidentiality is sought. If the Director agrees with the reasons provided with the claim, then the information will be managed by ODA as "confidential," but with certain exceptions that are also set forth in the Rule on "trade secrets." The Director's decision with respect to a claim of confidentiality may be subject to legal challenge in Ohio under Ohio's public records laws.

PART 8: CERTIFIED LIVESTOCK MANAGER

CERTIFIED LIVESTOCK MANAGER

Are you applying for a Permit to Install or a Permit to Operate for a Major Concentrated Animal Feeding Facility (MCAFF)? [See Ohio Revised Code 903.01(N)].

☐ Yes ☐ No

If "Yes," you are required to employ a Certified Livestock Manager. Please complete Form 3900-CLM-002 CERTIFIED LIVESTOCK MANAGER or provide a copy of your CLM certificate.

LOCAL NOTIFICATION

1. If you are submitting a PTI application, you must provide documentation or correspondence that verifies you have notified local officials, including the Board of County Commissioners, the county engineer, and the Board of Township Trustees (where the facility is, or will be located) to address infrastructure needs and financing of that infrastructure). This notification must include the following information [see Rule 901:10-1-02(A)(7)]:

   (a) The anticipated travel routes of motor vehicles to and from the facility;

   (b) Notwithstanding any exemptions that may be applicable under section 5577.042 of the Revised Code, the anticipated number and weights of motor vehicles traveling to and from the facility with an estimated maximum overall gross weight of vehicles upon the road surface;

   (c) Operational needs of the proposed facility for access to roads and location of such access; and

   (d) Operational needs of the proposed facility for access to tiles, culverts, off-site drainage, rights-of-way for manure transport.

2. If you propose to establish a new MCAFF, expand an existing MCAFF's design capacity by ten percent or more, or expand an existing AFF or CAFF to an MCAFF, you are required to submit written statements from the Board of County Commissioners of the county and the Board of Township Trustees of the township in which the facility is or will be located, certifying that, in accordance with sections 307.204 and 505.266 Of the Ohio Revised Code, you have provided these boards with the required written notification and that final recommendations, if any, regarding improvements and costs of improvements have been made by the boards. [Rule 901:10-1-02(A)(6)]

   Use the Local Notification Form in completing this process.

COMPLIANCE INFORMATION

Have you owned or operated a CAFF in Ohio for at least two of the five years immediately preceding the submission of this permit application?

☐ Yes ☐ No

If "Yes," you are required to provide the following information:

PERMIT INFORMATION	
Permit Type:	
Permit Issued By:	
Permit Number:	
Permit Issue Date:	
FACILITY INFORMATION	
Facility Name:	
Facility Address:	
County:	
Owner/Operator Name:	

If "No," please complete the Form – **Compliance Information** – and enclose with this permit application.

TYPES OF ANIMAL CONFINEMENT BUILDINGS

INSTRUCTIONS: Complete the following two charts for 1) Types of Animal Confinement Buildings and 2) Animal Capacity. If these forms do not provide enough space for the required information, then please make copies/duplicates of the forms and complete your application. [Rule 901:10-2-01(C)(2)]

The information to be provided here for Animal Capacity is for regulatory purposes only. This information is to be used to assess how the facility "fits" into the regulatory program described in Chapter 903 of the Ohio Revised Code for large livestock facilities. These forms are not to be used to calculate manure production.

Provide the total design capacity of each building:					
Building Identification (state Existing, Remodeled or Proposed):					
Total Confinement (Enclosed):					
Partial Confinement (Open and Enclosed):					
Open Lot:					
Other					
Other					
Other					

For existing facility, provide building identification (i.e.: Barn 1, Finisher 1, Freestall 1, etc.) and state whether it is an existing, remodeled or proposed barn. If design capacity of an existing or remodeled barn will be revised with this application, state existing population = "X" and proposed population = "Y" in the appropriate boxes. If the application is for a "modification" of the facility, be sure to check the definition of a "modification" in Rule 901:10-1-01 and then submit **ALL** required information below.

ANIMAL CAPACITY

NOTE: Maximum Design Capacity means the total number of stalls or total numbers of animal confinement capacity. Maximum Design Capacity refers to buildings. Maximum Design Capacity does NOT refer to the Total Storage Volume of manure.

Animal Type	Minimum Design Capacity CAFF/MCAFF	Existing Design Capacity (Leave blank if new)	Proposed Design Capacity
CATTLE			
• Slaughter/Feeder/Heifer	1,000/10,000		
• Mature Cow (Milked/Dry)	700/7,000		
• Veal	1,000/10,000		
SWINE			
• Over 55 Pounds	2,500/25,000		
• Under 55 Pounds	10,000/100,000		
HORSE			
• Horse	500/5,000		
SHEEP			
• Sheep or Lamb	10,000/100,000		
TURKEYS			
• Turkey	55,000/550,000		
CHICKENS			
• Laying Hen	82,000/820,000		
• Pullet or Broiler	125,000/1,250,000		
DUCKS			
• Duck	35,000/350,000		
OTHER			

PAYMENT REQUIRED

Remittance of the appropriate fee(s) must be enclosed and made payable to: Ohio Department of Agriculture. Payment by check or money order only:

Permit to Install	$1,250
Permit to Operate	$750
Permit Modification	$200
Permit Transfer	$200
Certified Livestock Manager	$30

Payment Method: ☐Money Order ☐Check *Number:*

Amount: **$** ☐☐ **,** ☐☐☐ **.** ☐☐