

General Permit for Medium Farm Operations (MFO GP)
Annual Compliance Report

Reporting Period: Jan 1st—Dec 31th ___2018 ___2019 ___2020 ___2021 ___2022

I. Permittee Information

Business Name: _____ Farm Owner/ Operator: _____

II. Animal Information (List the **maximum** animal numbers for each type listed for all facilities associated with the MFO)

Type	Maximum Number of Animals for <u>Previous 12 Months</u>
[200-699] Mature Dairy Cows (Milkers / Dry Cows)	
[300-999] Youngstock or Heifers	
[300-999] Cattle and Cow/Calf pairs	
[750-2,499] Swine (55 lb. or more)	
[3,000-9,999] Swine (under 55 lb.)	
[150-499] Horses	
[3,000-9,999] Sheep or Lambs	
[16,500– 54,999] Turkeys	
[9,000-29,999] Chickens (w/liquid system)	
[25,000-81,999] Chickens (w/out liquid system)	
[1,500-4,999] Ducks (w/liquid system)	
[10,000-29,999] Ducks (w/out liquid system)	

- a. If you are over the MFO threshold, have you applied for an LFO Individual Permit? ___ Yes ___ No
- b. Would you like more information about the LFO Program? ___ Yes ___ No
- c. In the past year, have you built or expanded a barn, barnyard, waste storage facility, or bunk? ___ Yes ___ No
- d. In the next year, do you plan to build or expand a barn, barnyard, waste storage facility, or bunk? ___ Yes ___ No

III. Nutrient Management Plan and Land Application of Manure and other Wastes (previous 12 months)

- a. Did the farm keep manure, fertilizer, and crop yield records during this reporting cycle? ___ Yes ___ No

b. Complete the acreage table below:

	Corn	Hay	Pasture	Other: _____	Total
Owned Acreage					
Rented Acreage					
Total Acreage					

- c. Based on the above table, is this farm's NMP up-to-date (all lands that receive nutrients): ___ Yes ___ No

1. Current NMP written by: _____

IV. Waste Generation and Balance Information (waste generation for all facilities associated to the MFO)

Total estimated amount of wastes generated for the previous 12 months:	Liquid (gallons):
	Solid (tons / ft ³):
Total estimated amount of wastes imported for the previous 12 months:	Liquid (gallons):
	Solid (tons / ft ³):
Total estimated amount of wastes exported/transferred for the previous 12 months:	Liquid (gallons):
	Solid (tons / ft ³):
Total liquid storage available (gallons):	
Liquid waste generated/imported in 180 days (gallons):	(-)
Balance:	
Total semi-solid storage available (tons / ft ³):	
Semi-solid waste generated/imported in 180 days (tons / ft ³):	(-)
Balance:	

V. Summary of Discharges

Did the farm have a discharge of waste from the production area(s) in the past 12 months? Yes No

Date	Location	Description	Volume

If yes, provide a summary of each discharge of waste from the production area(s) that occurred during the 12-month period covered by this report. Attach additional sheets if necessary.

Date: The date of the discharge. If the discharge was detected after it happened, give an estimate of the date when the discharge occurred.

Location: The location of the discharge to waters of the state. Be specific. Include the name of the water body and a specific description where the waste entered the water body. Include landmarks or other points of reference.

Description: Provide other relevant information about the discharge including the source, cause, composition and impacts observed.

Volume: Give an estimate of the number of gallons or tons of manure and waste discharged.

VI. Permittee Certification

I certify that I have examined the information submitted in this Annual Compliance Report, and that the information contained in this Annual Compliance Report is true, accurate, and complete. I understand that I may be subject to the criminal sanctions of 13 V.S.A. § 3016 for false, misleading, or untrue representations on this form. I understand that with my signature of this form, I acknowledge that I am operating as a Medium Farm Operation under Vermont General Permit for Medium Farm Operations (the MFO General Permit). I also understand that if I do not comply with the agricultural water quality requirements under Title 6 (e.g., the MFO General Permit), I may be subject to enforcement action(s) by the Agency of Agriculture, Food and Markets.

SIGNATURE OF FARM OWNER/ OPERATOR

PRINTED NAME

DATE OF SIGNATURE

A complete and accurate Annual Compliance Report must be submitted by April 30 each year to:
 Vermont Agency of Agriculture, Food and Markets
 Medium Farm Operation Program
 94 Harvest Lane, Suite 201
 Williston, VT 05495