

Water Quality Division 94 Harvest Lane, Suite 201, Williston, VT 05495 [phone] (802) 828-2431 [fax] (802) 828-1715 AGR.WQpermits@vermont.gov

 $\hfill\Box$ gallons $\hfill\Box$ tons

Non-sewage Waste Transfer Program

Transfer Application Form

Submit this form for each waste stream you are proposing to transfer and a Storage Capacity and Nutrient Management Form for each proposed recipient farm to AGR.WQpermits@vermont.gov.

A. Applicant and Contact Information				
Business Name:	Primary Conta	act:		
Business Mailing Address:				
Facility Name:	Facility E911	_ Facility E911 Address:		
Phone Number of Contact:	Email of Con	Email of Contact:		
3. Description of Non-sewage Waste				
1. Non-sewage waste type and description:				
Total proposed annual waste transfer to recip	pient farms:		□ gallons □ to	
3. List all chemicals (cleaning agents, polymers, o	Joaguiants, etc.) that me	ay be present in the	e waste, recommended usage rates	
and daily usage amounts:				
C. Proposed Recipient Farms (If five or more far	ms are proposed, subm	it an <u>Excel file</u>)		
Farm/Operation Name		Structure for	Proposed Annual Transfer	
(must match Storage Capacity and Nutrient	Management Form)	Deposit	Volume	
		☐ Manure Pit		
		□ Digester	☐ gallons ☐ tons	
		☐ Manure Pit		
		□ Digester	☐ gallons ☐ tons	
		☐ Manure Pit		
		□ Digester	□ gallons □ tons	
		☐ Manure Pit		
		☐ Digester	□ gallons □ tons	

D. Non-sewage Waste Analysis

Submit lab results of the proposed waste taken within the previous six months for the following defined parameters in the specified units.

Parameters	Units
Total Nitrogen	mg/L
Ammonium Nitrogen (NH₄-N)	mg/L
Organic Nitrogen	mg/L
Phosphorus (P ₂ O ₅)	mg/L
Potassium (K ₂ O)	mg/L
Total Solids/Dry Matter	%
рН	S.U.
Chloride (CI -)	mg/L
Sodium (Na +)	mg/L
Biochemical Oxygen Demand (5-day)	mg/L

If a sample is unavailable at the time of application because the non-sewage waste has not been generated prior to application, a lab analysis of the non-sewage waste must be submitted to AAFM within 30 days of non-sewage waste generation.

□ Lab analysis submitted with appli	cation form		
Waste not generated at this time generation.	: lab analysis will be submitted v	vithin 30 days of non-sewage w	aste
E. Signature of Applicant			
I certify under penalty of law that that the and the attached applicable lab results understand that I may be subject to representations on this form and other understand that I may be subject to encomply with the agricultural water quality	are, to the best of my knowled the criminal sanctions of 13 \documents associated with the forcement actions by the Agend	dge and belief, true, accurate, <u>/.S.A. § 3016</u> for false, misles Non-sewage Waste Transfer A cy of Agriculture, Food and Ma	and complete. I ading, or untrue Application. I also
SIGNATURE OF COMPANY OFFICER	PRINTED NAME	DATE	