

Water Quality Division 94 Harvest Lane, Suite 201 Williston, VT 05495 AGR.WQpermits@vermont.gov

## **Non-sewage Waste Transfer Program**

## **Recipient Farm Form**

A. Recipient Farm Information				
Farm/Operation Name: Prim		nary Contact:		
Mailing Address:				
Phone Number of Contact: Email		il of Contact:		
B. Proposed Transfer: List information regarding the prop	osed NSW transf	er to this farm.		
Name of waste generator:				
2. Proposed annual NSW transfer volume to this farm:	□ gallons □ tons			
<b>C. Importation Summary:</b> List all actual and proposed anr digester in the table below. If more space is needed, subm	•	-		
Type of Imported Waste		Annual Importation Volume		
(e.g. manure, raw milk, brewery, etc.)		(gallons/tons)		
1a. Total proposed & current liquid imports		gallons		
1b. Total proposed & current solid imports		tons		
D. Annual Waste Balance:				
Liquid waste generated on-farm				
Liquid waste exported		(-)		
Proposed & current liquid imports (1a. in table above)	1	(+)		
	Balance	gallons		
Semi-solid waste generated on-farm				
Semi-solid waste exported		(-)		
Proposed & current semi-solid imports (1b. in table ab	oove)	(+)		
	Balance	tons		

E. Storage Capacity: List al	l current waste storages and their i	usable volume in the t	able below.			
Name of Waste Storage Facility	Storage E911 Address	Usable Volume (gallons)	Will the proposed non- sewage waste be transferred to this storage?		Is this storage connected to a digester?	
			□ Yes	□ No	□ Yes	□ No
			□ Yes	□ No	□ Yes	□ No
			□ Yes	□ No	□ Yes	□ No
			□ Yes	□ No	□ Yes	□ No
			□ Yes	□ No	□ Yes	□ No
Tot	cal Liquid Usable Volume (gallons)					
Total Semi-Solid Usable Volume (tons)						
apply agricultural waste requirements of the Nat sewage waste must be possible Small Farm Operations or agricultural waste or fer rates consistent with the non-sewage waste application. The Agency of Agricultur nutrient management as Based on the RAP thres	holds, what is the farm's size categ nutrient management requiremen	oy-field nutrient mana se Vermont 590 Nutrie he total volume of wa old must soil sample a , and account for all n Records of soil analyse eriod of five years and further information re-	gement plan (Nient Managemen stes allocated in all fields receivin autrient sources sis, agricultural v I provided to the egarding the farm	MP) consistent tstandard. All in the farm's NM ag mechanical a when determin vaste, fertilizer, e Secretary upon's waste stora	with the mported P.  pplication ing applic and imported in request.	non- s of ation orted
knowledge and belief, t false, misleading, or unt	Farm  ation contained in this Storage Cap rue, accurate, and complete, and I rue representations on this form. F Iarkets if I do not comply with the v	may be subject to the urther, I may be subj	criminal sanctio	ons of <u>13 V.S.A.</u> ent by the Agen	§ 3016 icy of	
SIGNATURE OF FARM	OWNER/OPERATOR	PRINTED NAME		DATE	_	