

Proposed Non-Sewage Waste Transfer Application Form

(Fill out this application form for **all** Non-Sewage Waste **requesting to be transferred to pit or digester**)

I. Applicant and Contact Information

Business Name: _____ Business Contact/Operator Name: _____
 Business Mailing Address: _____
 Facility Name: _____ Facility E911 Address: _____
 Phone Number of Contact: (_____) _____ - _____ Email of Contact: _____

II. Description of Non-Sewage Waste and Proposed Disposal Location(s)

Non-Sewage Waste Type and Description: _____

 What chemicals, cleaning agents, sanitizer, etc. (if any) would be found in this non-sewage waste product which could be detrimental to plant growth when land applied? _____
 Total Estimated Non-Sewage Waste Sent to Farms Annually: _____ gallons (if liquid) _____ cubic ft (if solid)
 If you cannot transfer this non-sewage waste to the farm(s) listed below, explain your contingency plan: _____

Proposed Recipient(s) Name of Non-Sewage Waste	Proposed Annual Volume to Recipient <small>(specify gallons, if liquid; cubic ft., if solid)</small>	Type of Structure Proposing to Deliver to <small>(Circle all that apply for a location)</small>	E911 Address of Structure(s) Proposing for Disposal
		Manure Pit Digester	
		Manure Pit Digester	
		Manure Pit Digester	
		Manure Pit Digester	
		Manure Pit Digester	

III. Non-Sewage Waste Analysis

Submit actual lab results taken in the last six months for the listed parameters using the specified units. Waste analysis results must be submitted for each non-sewage waste product with this application form. If you are a start-up company and have not started generating the non-sewage waste, submit a representative summary of the anticipated analysis, and, if possible, provide samples from a similar operation if one exists.

Parameters	Units
Total Nitrogen	mg/L or lbs./1000 gallons
Ammonium Nitrogen (NH ₄ -N)	mg/L or lbs./1000 gallons
Organic Nitrogen	mg/L or lbs./1000 gallons
Phosphorus (P ₂ O ₅)	mg/L or lbs./1000 gallons
Potassium (K ₂ O)	mg/L or lbs./1000 gallons
Total Solids/Dry Matter	%
pH	S.U.
Chloride (Cl ⁻)	mg/L or lbs./1000 gallons
Sodium (Na ⁺)	mg/L or lbs./1000 gallons
Biochemical Oxygen Demand (5-day)	mg/L

VI. Signature of Applicant

I certify under penalty of law that (1) the submitted nutrient contents of the non-sewage waste listed in this *Proposed Non-Sewage Waste Transfer Form* are true, accurate, and complete and have been given to the proposed farm(s) located on page 1 of this *Form* and that (2) I have personally examined the information submitted in this *Form* and the information contained in this *Form* 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 also understand that if I do not comply with the agricultural water quality requirements under Title 6 V.S.A. § 4817 (e.g., the Management of Non-Sewage Waste), I may be subject to enforcement actions by the Agency of Agriculture, Food and Markets.

SIGNATURE OF COMPANY OFFICER

PRINTED NAMED

DATE

A complete and accurate *Proposed Non-Sewage Waste Importation Form* must be mailed or emailed to:

Vermont Agency of Agriculture, Food and Markets
Non-Sewage Waste Transfer Program
94 Harvest Lane, Suite 203
Williston, VT 05495
AGR.WQPermits@vermont.gov

