

**LARGE FARM OPERATION PERMIT APPLICATION**
*Appendix A-1: Facility Information Form*

(This form must be filled out for each facility managed under the LFO)

**I. Applicant Information**

Business Name \_\_\_\_\_

Facility Name \_\_\_\_\_

Facility E911 Location \_\_\_\_\_

**II. Animal Information** (List all applicable animal numbers for each type listed at this facility only)

Type	Current Number	Proposed Number	Weight (lbs.)	Bedding Type	Manure Type (Liquid /Solid)	Milk Production (lbs/animal/year)
Mature Dairy Cows (Milkers / Dry Cows)						
Youngstock or Heifers						
Cattle and Cow/Calf pairs						
Swine (55 lb. or more)						
Swine (under 55 lb.)						
Horses						
Sheep or Lambs						
Turkeys						
Chickens (w/ liquid system)						
Chickens (w/o liquid system)						
Ducks (w/ liquid system)						
Ducks (w/o liquid system)						

**III. Waste Generation Information** (at this facility only)

		Current Amounts	Proposed Amounts
Total amount of waste generation annually:	Liquid (gallons):		
	Solid (tons / ft <sup>3</sup> ):		
Total amount of wastes imported annually:	Liquid (gallons):		
	Solid (tons / ft <sup>3</sup> ):		
Total amount of wastes exported/ transferred annually:	Liquid (gallons):		
	Solid (tons / ft <sup>3</sup> ):		

**IV. Waste Storage Facility Information (at this facility only)**

Number of Waste Storage Facilities (Pits, Lagoons, Bunkers and other Storage Areas): \_\_\_\_\_  
 (For each one, fill out the **Waste Storage Facility Form**)

Name of waste storage facilities: \_\_\_\_\_  
 \_\_\_\_\_

**V. Waste Collection and Management Systems (at this facility only)**

1) Do you have systems to collect all "dirty water" (barnyard or silage runoff, roof top water which moves across unpaved or uncropped land, manure runoff, bedding by product, milkhouse waste, mortality composting) that is created on this facility so that it is not allowed to runoff into waters of the state?

\_\_\_\_ Yes      \_\_\_\_ No

If "**No**", does the application contain a plan for developing a system to collect all dirty water?      \_\_\_\_ Yes \_\_\_\_ No

2) Are the following structures designed by: NRCS, VAAFM, or a third party registered to practice in Vermont?

Check the appropriate box	Designed By:				
	Yes	No	NRCS	VAAFM	Third Party
*Barnyard Runoff Control:					
*Silage Runoff Control:					
Rooftop Water:					
Milkhouse Waste:					
*Animal Mortalities					

\* include an aerial photo/map with location of waste management structures.

3) Are mortalities managed in accordance with Required Agricultural Practices (RAPs), the LFO Rules, and applicable NRCS standards?      \_\_\_\_ Yes      \_\_\_\_ No

**VI. Nutrient Management**

Is this facility included in your LFO's Nutrient Management Plan?      \_\_\_\_ Yes      \_\_\_\_ No

**VII. Nutrient and Pesticide Storage**

Do you store manure, pesticide, or fertilizer at this facility?      \_\_\_\_ Yes      \_\_\_\_ No

Is the storage area located within a floodway or within a 100 year floodplain?      \_\_\_\_ Yes      \_\_\_\_ No

**VIII. Agricultural Waste Management**

Do you store, handle, or dispose chemicals, petroleum products, containers at this facility?      \_\_\_\_ Yes      \_\_\_\_ No

If yes, describe where the storage of each occurs, and whether each storage area is under cover (roofed, tarped, etc.), on a pad, or in some other way protected. Locate each storage area on a farm map (the orthophoto maps required for field identification are sufficient to use for the purpose).

\_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF FARM OWNER/APPLICANT FOR LFO PERMIT

\_\_\_\_\_  
 DATE OF SIGNATURE