



Animal Feedlot or Manure Storage Area Annual Report

NPDES/SDS Permit Program

Doc Type: Permitting Annual Report

Facility Information

Name: _____ Registration number: _____

Location: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

NPDES/SDS Permit number: MN _____ Reporting period: (01/01/20____ - 12/31/20____)

National Pollutant Discharge Elimination System (NPDES) /State Disposal System (SDS)

I. Type and Number of Animals

Report the maximum number of each type of animal confined at this facility at any one time.

Type	Number in open confinement	Number housed under roof
Mature dairy cow (over 1,000 pounds)		
Mature dairy cow (under 1,000 pounds)		
Dairy heifer		
Dairy calf		
Veal		
Beef slaughter steer/heifer, stock cow, or bull		
Beef feeder cattle (stocker or backgrounding), heifer		
Beef cow and calf pair		
Beef calf (weaned)		
Swine (over 300 pounds)		
Swine (between 55 and 300 pounds)		
Swine (under 55 pounds)		
Horses		
Sheep or lamb		
Chickens w/liquid manure systems		
Broiler chickens w/dry manure systems		
Layer hens w/dry manure systems		
Turkeys (over 5 pounds)		
Turkeys (under 5 pounds)		
Ducks		
Others (List Types):		
1.		
2.		

II. Manure and process wastewater production

Report the estimated amount of manure and process wastewater that were generated at this facility in the 12-month period covered by this report. Process wastewater is any wastewater that is handled or stored separately from the manure such as feedpad runoff or milkhouse waste.

- A. Amount of manure generated in the 12-month period covered by this report. Liquid _____ gallons and/or solid _____ tons.
- B. Amount of process wastewater generated in the 12-month period covered by this report: _____ gallons.

III. Manure and process wastewater transferred to other persons

Report the estimated amount of manure and process wastewater that was transferred to other persons in the 12-month period covered by this report. Transferred manure includes all application to land that is not owned, rented, or under direct control of the feedlot owner/operator.

- A. Amount of manure transferred in the 12-month period covered by this report: Liquid _____ gallons and/or solid _____ tons.
- B. Amount of process wastewater transferred in the 12-month period covered by this report: _____ gallons

IV. Land and application of manure and process wastewater

- A. Report the total number of acres of land that are covered by this facility's manure and nutrient management plan (MMP). Include all land application acres covered by the Manure Management Plan (MMP), whether or not they were used for land application during the 12-month period covered by this report.

Total number of land application acres covered by the MMP: _____ acres

- B. Report the total number of acres of land where manure or process wastewater generated at this facility was spread. Include only land application areas that are under the control of this facility.

Total number of acres under the control of the facility used for land application in the 12-month period covered by this report _____ acres.

V. Summary of Discharges

(Does not apply to any occurrences in which manure was land applied in accordance with Minn. R. 7020).

Provide a summary of each discharge of manure, litter, and/or process wastewater from the production area(s) that occurred in the 12-month period covered by this report. Attach additional sheets, if needed.

A discharge is a release of manure, litter, and/or process wastewater to waters of the state by leaking, pumping, pouring, emitting, emptying, dumping, escaping, seeping, leaching, or any other means.

Date ^a	Time ^b	Location ^{c,f}	Description ^{d,f}	Volume ^e

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

^b **Time:** The time of the discharge. If the discharge was detected after it happened, give an estimate of the time when the discharge occurred.

^c **Location:** The location of the discharge to waters of the United States. Be specific. Include the name of the water body and a specific description of where the manure, litter, or process wastewater entered the water body. Include landmarks or other points of reference (e.g., Three Mile Creek, at southeast corner of feedlot where creek bends to the west).

^d **Description:** Provide other relevant information about the discharge, including the source, cause, composition (e.g., emergency overflow of process wastewater from lagoon #2), and impacts observed (e.g., fish kill in water body).

^e **Volume:** Give an estimate of the number of gallons or tons of manure, litter, or process wastewater discharged.

^f This information is not required by the NPDES Confined Animal Feeding Operation regulations to be included in the annual report.

VI. Manure and Nutrient Management Plan

- A. Indicate whether the facility's current MMP was either developed by or reviewed and approved by (check all that apply):
- Natural Resource Conservation Service (NRCS) certified Technical Service Provider for nutrient management planning
 - Certified Crop Advisor
 - Someone who completed at least two parts of the Minnesota Extension Service Manure Management Workshop series (offered since 2004)
 - Other – Please note that the Minnesota Pollution Control Agency does not require facility owners to use a certified nutrient management planner to prepare or approve MMPs.
- B. Was the MMP updated or modified during the past year? Yes No
If yes, check each of the following ways that the MMP was modified:
- Changed rate of application due to changes in:
 - Manure nutrient content Method of application Crop rotation
 - Rates of supplemental commercial fertilizer Other (explain): _____
 - Changed fields due to:
 - Fields no longer available for application Additional acreage became available
 - Avoiding use of high soil test phosphorus fields New manure sources
 - Other (explain): _____
 - Changed setbacks and/or management in sensitive areas: Yes No
 - Changed timing of application so that more manure is applied during:
 - Summer Early fall Late fall Winter Spring

VII. Instances of non compliance not previously reported

During the past 12 months have there been any instances of noncompliance which have not been reported to the MPCA?

Yes No If yes, please provide the information requested in items A.-D., below, with this annual report.

- A. Description of the noncompliance and its cause. _____
- B. The period that the operation was in noncompliance with permit conditions, including exact dates and times.
- C. In those cases where the noncompliance has not been corrected, the anticipated time it is expected to continue
- D. Description of the steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance.

VIII. Damage and repair of any manure storage area

Was there any damage done to any of the manure storage areas at the facility? Yes No

If yes, provide the information requested in items A-F below for each incident of damage to each manure storage area with this Annual Report: Yes No

- A. Identify the manure storage area(s) that was/were damaged. _____
- B. Describe the damage(s) done to the manure storage area(s). _____
- C. Describe the corrective action(s) taken to repair the damage(s) to the manure storage area(s). _____
- D. Provide the date when the damage(s) was/were discovered. _____
- E. Provide the date when the corrective action(s) was/were taken. _____
- F. Did the damage(s) cause an overflow of manure or process wastewater from any liquid manure storage area? _____

IX. Manure composting activities

(does not apply to composting of dead animals)

Are there any **manure** composting activities occurring at the facility? Yes No

If yes, provide the information required in Part III, item D.2 of the General NPDES/SDS Permit with this Annual Report.

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage this system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Owner/Operator
Name (print): _____

Title _____

Signature: _____

Date: _____

Submit by March 1st of each year

Submit to your MPCA Regional Office at the address provided below

Minnesota Pollution Control Agency – Regional Offices

- 1) **Detroit Lakes:** 714 Lake Avenue, Suite 220
Detroit Lakes, MN 56501
Phone: 218-847-1519 · Fax: 218-846-0719
- 2) **Brainerd:** 7678 College Road, Suite 105
Baxter, MN 56425
Phone: 218-828-2492 · Fax: 218-828-2594
- 3) **Willmar:** 1601 Highway 12 East, Suite 1
Willmar, MN 56201
Phone: 320-214-3786 · Fax: 320-214-3787
- 4) **Marshall:** 1420 E. College Drive, Suite 900
Marshall, MN 56258
Phone: 507-537-7146 · Fax: 507-537-6001
- 5) **Mankato:** 12 Civic Center Plaza, Suite 2165
Mankato, MN 56001
Phone: 507-389-5977 · Fax: 507-389-5422
- 6) **Rochester:** 18 Wood Lake Drive Southeast
Rochester, MN 55904
Phone: 507-285-7343 · Fax: 507-280-5513
- 7) **St. Paul:** 520 Lafayette Road North
St. Paul, MN 55155
Phone: 651-296-6300 800-657-3864