|  |  |
| --- | --- |
| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Animal feedlot or manurestorage area annual reportNPDES and SDS Permit Program*Doc Type: Permitting Annual Report* |

**Applicability:** Feedlots owners with National Pollutant Discharge Elimination System (NPDES) or State Disposal System (SDS) feedlot permit coverage must submit this form to the Minnesota Pollution Control Agency (MPCA) annually to report activities at the facility. When a single permit covers multiple registered sites, one form must be submitted for each registered site.

***Keep a copy of this form and all submittals for your records.***

**Submit this form and any required enclosures to the MPCA as follows:**

* This form must be submitted via email to FeedlotSubmittal.pca@state.mn.us. Paper copies will **not** be accepted.
* The form must be submitted as a PDF. Detailed instructions for submittal are included at the end of this form.

|  |  |
| --- | --- |
| **Report due date** | **Reporting period** |
| March 1, 2021 | September 1, 2019 to August 31, 2020 |
| March 1, 2022 | September 1, 2020 to August 31, 2021 |
| March 1, 2023 | September 1, 2021 to August 31, 2022 |
| March 1, 2024 | September 1, 2022 to August 31, 2023 |
| March 1, 2025 | September 1, 2023 to August 31, 2024 |
| March 1, 2026 | September 1, 2024 to August 31, 2025 |

## Reporting period

An annual report is due March 1 of each year.

The reporting period for each annual report is the crop year that ends in the year before the due date of the annual report.

The chart to the right will help you identify the reporting period.

Indicate below the period covered by this report.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reporting period:** | September 1, |      | to August 31, |      |

## Facility information

**You must include your registration number.** Your registration number is located on your permit cover letter.
You can also call your regional MPCA staff person to obtain this number if you cannot locate it.

## When a single permit covers multiple registered sites, a separate form must be submitted for each registered site.

|  |  |  |  |
| --- | --- | --- | --- |
| Facility name: |       | Registration number: |       |
| County: |       | Township:  |       | Section:  |       |

**Permit type and permit number**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  NPDES Permit - Permit number: |       | [ ]  SDS Permit - Permit number: |       |

## Type and number of animals

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Animal type** | **Numberin open confinement** | **Number housed under roof** | **Animal type** | **Numberin open confinement** | **Number housed under roof** |
| Mature dairy cow (over 1,000 pounds) |       |       | Swine (over 300 pounds) |       |       |
| Mature dairy cow (under 1,000 pounds) |       |       | Swine (between 55 and 300 pounds) |       |       |
| Dairy heifer |       |       | Swine (under 55 pounds) |       |       |
| Dairy calf |       |       | Chickens with liquid manure system |       |       |
| Veal |       |       | Layer hens with dry manure system |       |       |
| Beef slaughter steer/heifer, stock cow, or bull |       |       | Broiler chickens with dry manure system |       |       |
| Beef feeder cattle (stocker or backgrounding), heifer |       |       | Turkeys (over 5 pounds) |       |       |
| Beef cow and calf pair |       |       | Turkeys (under 5 pounds) |       |       |
| Beef calf (weaned) |       |       | Ducks |       |       |
| Horses |       |       | Sheep or lamb |       |       |
| Others (List type): |       |       |       |

## Manure and process wastewater production

Report the amount of manure and process wastewater generated during the reporting period. Also, indicate the portion of the total amount generated that is transferred to others.

Transferred manure includes manure that is sold or given to another entity and is applied to land that is not owned, rented, or under direct control of the feedlot owner/operator.

Process wastewater is any wastewater handled or stored separately from the manure such as feedpad runoff or milkhouse waste.

|  |  |  |
| --- | --- | --- |
|  | **Total amount generated** | **Portion of total transferred to others** |
|  | Liquid | Solid | Liquid | Solid |
| **Manure** |       | Gal |       | Ton |       | Gal |       | Ton |
| **Process wastewater** |       | Gal |       | Ton |       | Gal |       | Ton |

1. Manure and nutrient management plan (MMP)
(Complete this section for non-transferred manure only)

|  |  |  |
| --- | --- | --- |
| Report the total number of land application acres included within the MMP:(whether or not they were used for land application) |       | acres |
| Report the total number of acres under the control of the facility actually used for land application: (do not include those acres that received manure with transferred ownership) |       | acres |

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

[ ]  Other – Please note that the MPCA does not require facility owners to use a certified nutrient management planner to prepare or approve MMPs.

Was the MMP updated or modified during the past calendar year? [ ]  Yes [ ]  No

If yes, indicate below how the MMP was modified (check all that apply):

* 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

## Emergency wintertime applications of liquid manure(Complete this section for non-transferred manure only)

Wintertime application of liquid manure to acres under the control of the facility is prohibited (except for emergency situations). Report below any instance of wintertime application of non-transferred liquid manure during the reporting period.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date applied** | **Field ID** | **Acres used** | **Application rate** | **Closest sensitive feature\***  | **N & P applied during emergency application** | **Total N & P applied during crop year**(sum of all N & P applications) |
| **N applied** | **P2O5 applied** | **Total N** | **Total P2O5** |
|       |       |      |       | gal/ac |       | ft |     | lb/ac |     | lb/ac |       | lb/ac |       | lb/ac |
|       |       |      |       | gal/ac |       | ft |     | lb/ac |     | lb/ac |       | lb/ac |       | lb/ac |
|       |       |      |       | gal/ac |       | ft |     | lb/ac |     | lb/ac |       | lb/ac |       | lb/ac |
|       |       |      |       | gal/ac |       | ft |     | lb/ac |     | lb/ac |       | lb/ac |       | lb/ac |

*\* Lakes, streams, intermittent streams, drainage ditches without berms, open tile intakes, wells, wetlands, and sinkholes. Only include distance to those features within the field, or within 300 feet from the edge of the field. If over 300 feet, enter >300.*

Indicate the reason(s) for emergency application(s) below (check all that apply):

|  |
| --- |
| [ ]  Unusual weather conditions [ ]  Unavoidable equipment failure |
| [ ]  Avoid overflow [ ]  Unable to transfer manure to another storage area |
| [ ]  Other (explain): |       |

## Manure composting activities(Does not apply to composting of dead animals.)

Report the following for any instances of manure composting at the facility.

List below the quantities and sources of manure, bulking agents, and /or solid waste:

|  |  |  |  |
| --- | --- | --- | --- |
| Quantity: |       | Source: |       |

List below the analysis of the finished compost:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| pH: |     | Moisture content: |       | Particle size: |       | N: |     | P: |     | K: |     | Soluble salt content: |       |

Attach to this form the temperature and retention time data for all compost produced.

## Damage and repair of manure storage areas

Report below any damage and repair of manure storage areas (liquid or solid) at the facility:

|  |  |  |  |
| --- | --- | --- | --- |
| **Manure storage area description** | **Date damage discovered** | **Date of repair** | **Did the damage result in a release?** |
|       |       |       | [ ]  Yes [ ]  No |
|       |       |       | [ ]  Yes [ ]  No |
| Describe below any damage and the repairs or mitigation measures. |
|       |

## Closure of any portion of the facility.

If an animal holding area or manure storage area at the facility is no longer in use, report the closure information below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Description of closed area** | **Duration of closure** | **Date of closure** | **Date manure removed\*** |
|       | [ ]  Permanent [ ]  Temporary |       |       |
|       | [ ]  Permanent [ ]  Temporary |       |       |
| Describe below actions taken to prevent release of manure or process wastewater from the closed area(s). |
|       |

*\* Report land application of manure from the closed facilities on the forms required in Part 12.*

## Summary of production area discharges

Report below each discharge of manure, litter, and/or process wastewater from the production area(s) to waters of the State.

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.
 *(Does not apply when manure was land applied in accordance with Minn. R. 7020, permit conditions, and MMP).*

|  |  |  |  |
| --- | --- | --- | --- |
| **Start of discharge** | **End of discharge** | **Quantity discharged** (gal) | **Discharge caused by 25-year 24-hour storm?** |
| **Date** (mm/dd/yyyy) | **Time** | **Date** (mm/dd/yyyy) | **Time** | (estimate if unknown) |
|       |       |       |       |       | [ ]  Yes [ ]  No |
|       |       |       |       |       | [ ]  Yes [ ]  No |
| Describe below information about the discharge, including the source, cause, water bodies affected, and impacts observed: |
|       |

## Instances of noncompliance not previously reported

Report below any instances of noncompliance which have not been reported to the MPCA

|  |  |  |
| --- | --- | --- |
| **Start of noncompliance** | **End of noncompliance\*** | **Steps taken or planned to reduce, eliminate, and prevent reoccurrence** |
| **Date** | **Time** | **Date** | **Time** |
|       |       |       |       |       |
|       |       |       |       |       |
| Describe below other information about the non-compliance including the cause of the non-compliance: |
|       |

*\* If noncompliance is on going, indicate the anticipated end date.*

## Required attachments

**Facility monitoring results**

When facility monitoring is required by the MPCA, include with this form any results obtained from the required activities, including all analytical results, any monitoring system construction or repairs, and any MPCA-required interpretation of results.

**Land application records**

You must include with this form a copy of the records of land application activities that occurred during the reporting period.
You must use the forms specified below (available on the MPCA website at <https://www.pca.state.mn.us/feedlots>).

**Transferred ownership records**

You must use the formfound on page 7 and 8 of this report, or the version available on the MPCA website at: <https://www.pca.state.mn.us/sites/default/files/wq-f6-43e.doc>.

**Non-Transferred ownership records**

You must use the form found on pages 5 and 6 of this report, or the version available on the MPCA website at: <https://www.pca.state.mn.us/sites/default/files/wq-f6-23a.doc>.
The record keeping form generated by the MPCA’s manure management planner spreadsheet is also acceptable.
The planner can be found on the MPCA website at: <https://www.pca.state.mn.us/sites/default/files/wq-f6-12.xlsm>.

## Signature and 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.By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.**Owner/Operator:** |
| Name: |       | Title: |       |
|  | *(This document has been electronically signed.)* | Date: |       |

## Submittal instructions

You must submit this form and any required attachments electronically; no paper copies will be accepted.

**You must submit the report following the steps below to ensure that it will be attributed to the proper facility.**

1. After typing your name above, you should first save a copy of the report as you normally would for a word document.
2. Then create a PDF version of the report to send to the MPCA. This can be accomplished in the following manner:
* Click on the file menu of the Microsoft Word program and then choose “Save As”.
* Within the “Save As” dialogue box change the “save as type” to “PDF (\*.pdf)”.
* Save the document with the filename format “[facility name] [year of report due date] annual report”
	+ *Example file name for annual report due March 2019: ACPM Dairy 2018 annual report*



1. If land application records are transcribed to the forms that follow within this document proceed to step 4 now; if not, a PDF file of the land application records must be created as well. The process to create a PDF of the records maintained on the approved forms is the same as described above except that the phrase “land application records” should be added to the end of the file name convention required above.
*Example filename: ACPM Dairy 2018 annual report land application records*

When records are maintained within the MPCA MMP spreadsheet, a PDF of the records can be created within the MMP spreadsheet by clicking on “Create a PDF” within the add-ins menu.

You will need to attach the land application records PDF file to the email described in step 4.

1. Email the annual report PDF file to FeedlotSubmittal.pca@state.mn.us. The subject line of the email should be the same as the annual report PDF file name. *Example:* *ACPM Dairy 2018 annual report*

Note: If step 3 was applicable to you, you must include the land application records PDF file with this email as well.

1. Should you desire confirmation of receipt of the email, you can request a delivery/read receipt within your email program.

## Land application records for non-transferred manure at NPDES and SDS permitted feedlots

Instructions for completing this form are available on the MPCA website at: <http://www.pca.state.mn.us/feedlots>.

**Note**: Additional records are required for - Short-term Stockpiling; Manure Ownership Transfer; and CAFO Animal Production Sites.

**Note**: The electronic records form found in the [MPCA manure management planner](https://www.pca.state.mn.us/sites/default/files/wq-f6-12.xlsm)can be used in place of this form.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Cropping year: September 1,** |  | **to August 31,** |  | **Cropland manager’s name:** |       |
| **Name of facility where manure generated:** |       | **Registration number:** |       |
| **Licensed commercial animal waste technician name (if used):** |       | **License no.:** |       |

**Manure analysis results** (In the spaces provided, enter the most recent analysis alone or as part of a running average – *entries must represent manure applied.*)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Manure source 1:** |       | Date last analyzed: |       | **Manure source 2:** |       | Date last analyzed: |       |
| N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. | N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Manure source 3:** |       | Date last analyzed: |       | **Manure source 4:** |       | Date last analyzed: |       |
| N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. | N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field information** | **Soil testing information** (Test required every 4 yrs) | **Crop information** | **Manure application information** | **Nitrogen**(lb N/ac) | **Phosphorus**  (lb P2O5/ac) |
| **Field ID** | **Acres actually used** | **Year of most recent test** | **Soil test phosphorus field average** | **Organic matter** | **Crops grown** | **Expected yield**(crop receiving manure) | **N Needs (lb/ac)**(removal for legumes) | **Manure source (1-8)** | **Dates of application** | **Application rateper acre** | **Method of application and incorporation**Knife injectionSweep injectionSurface <12 hr IncorpSurface <4 day IncorpSurface 4+ day Incorp | (N1) | (N2) | (N3) | **Total available N** (N1 + N2 + N3) | **N BMP\*** Sept. 1 – Oct. 14(A – E from list below) | **Fertilizer P applied** | **Manure P this year's** | **Total available Pthis year** |
| **Crop grown to utilize the nutrients applied** | **Crop most recently harvested** | **Fertilizer N applied + irrigation water N** | **Carry-over N Last year's manure** | **Manure N this year's** |
|   | Bray or Olsen | Med/Highor Low |
| *Example* | *40* | *2015* | *55* | *Olsen* | *Med/High* | *Corn* | *Soybeans* | 200 | 150 | *1* | *10/7-10/8* | *3000* | *Knife Injection* | 5 | 0 | 150 | 155 | B | 5 | 50 | 55 |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |

\* N BMPs are encouraged for all applications September 1 – October 14 to help minimize nitrogen losses and potential yield reductions but only required for NPDES permitted sites.
**BMPs for September:** A) Cover crop **BMPs for October 1 -14:** A) Cover crop, B) Soil temps 50oF or less, C) Nitrogen stabilizer, D) Split application, E) Pre-approved alternative.

## Land application records for non-transferred manure at NPDES and SDS permitted feedlots **– *Continued***

**Manure analysis results:** (If more than 4 manure sources)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Manure source 5:** |       | Date last analyzed: |       | **Manure source 6:** |       | Date last analyzed: |       |
| N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. | N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Manure source 7:** |       | Date last analyzed: |       | **Manure source 8:** |       | Date last analyzed: |       |
| N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. | N: |     | P2O5: |     | K2O: |     | Units: [ ]  lb/ton [ ]  lb/1000 gal. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field information** | **Soil testing information** (Test required every 4 yrs) | **Crop information** | **Manure application information** | **Nitrogen**(lb N/ac) | **Phosphorus**  (lb P2O5/ac) |
| **Field ID** | **Acres actually used** | **Year of most recent test** | **Soil test phosphorus field average** | **Organic matter** | **Crops grown** | **Expected yield**(crop receiving manure) | **N Needs (lb/ac)**(removal for legumes) | **Manure source (1-8)** | **Dates of application** | **Application rateper acre** | **Method of application and incorporation**Knife injectionSweep injectionSurface <12 hr IncorpSurface <4 day IncorpSurface 4+ day Incorp | (N1) | (N2) | (N3) | **Total available N** (N1 + N2 + N3) | **N BMP\*** Sept. 1 – Oct. 14(A – E from list below) | **Fertilizer P applied** | **Manure P this year's** | **Total available Pthis year** |
| **Crop grown to utilize the nutrients applied** | **Crop most recently harvested** | **Fertilizer N applied + irrigation water N** | **Carry-over N Last year's manure** | **Manure N this year's** |
|   | Bray or Olsen | Med/Highor Low |
| *Example* | *40* | *2015* | *55* | *Olsen* | *Med/High* | *Corn* | *Soybeans* | 200 | 150 | *1* | *10/7-10/8* | *3000* | *Knife Injection* | 5 | 0 | 150 | 155 | B | 5 | 50 | 55 |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |
|       |     |       |     |  |  |  |  |     |     |  |       |       |  |     |     |     |     |  |     |     |     |

\* N BMPs are encouraged for all applications September 1 – October 14 to help minimize nitrogen losses and potential yield reductions but only required for NPDES permitted sites.
**BMPs for September:** A) Cover crop **BMPs for October 1 -14:** A) Cover crop, B) Soil temps 50oF or less, C) Nitrogen stabilizer, D) Split application, E) Pre-approved alternative.

## Land application records for transferred manure at NPDES and SDS permitted feedlots

Instructions for completing this form are available on the MPCA website at: <http://www.pca.state.mn.us/feedlots>.

This form must be completed for each manure recipient. For example if manure is transferred to three different entities, then three copies of this form must be completed. Multiple transfer dates to the same entity can be indicated on one form.

## Step 1: Manure generation*(Completed by feedlot owner where manure is generated)*

|  |  |
| --- | --- |
| Facility name where manure generated: |       |
| Facility address: |       |
| City: |       | State: |       | Zip: |       |

## **Manure recipient information**:

|  |  |
| --- | --- |
| Name: |       |
| Address: |       |
| City: |       | State: |       | Zip: |       |

## **Manure analysis results** *(Must be representative of manure transferred)*

|  |  |  |  |
| --- | --- | --- | --- |
| Manure source #1: |       | Date analyzed: |       |
| N: |       | P2O5: |       | K2O: |       | Units: [ ]  lb/ton [ ]  lb/1000 gallons |
| Total quantity transferred: |       | [ ]  tons [ ]  gallons | Transfer date(s): |       |
| Manure source #2: |       | Date analyzed: |       |
| N: |       | P2O5: |       | K2O: |       | Units: [ ]  lb/ton [ ]  lb/1000 gallons |
| Total quantity transferred: |       | [ ]  tons [ ]  gallons | Transfer date(s): |       |

## Step 2: Short-term stockpiling(*Completed by owner of the stockpile - If no stockpile, go to step 3*.)

|  |  |  |  |
| --- | --- | --- | --- |
| **Stockpile location(s)** | **Quantity stockpiled** | **Date stockpile established** | **Date land applied**  |
| **County** | **Township** | **Section** | **Quarter** |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

## Step 3: Manure application*(Completed by person applying the manure)*

Manure recipient must provide this information to the manure generator within 60 days of land application.

|  |  |
| --- | --- |
| Name of company or individual that applied manure: |       |
| Address: |       |
| City: |       | State: |       | Zip: |       |
| License number of commercial animal waste technician (if used): |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field ID** | **County** | **Township** | **Section** | **Application rate**(tons or gallons/ac) | **Application method**(see choices below) |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |

Application methods: Incorp within 12 hrs, Incorp 12 – 96 hrs, Incorp after 96 hrs, Sweep injection, Knife injection

## Land application records for transferred manure at NPDES and SDS permitted feedlots

Instructions for completing this form are available on the MPCA website at: <http://www.pca.state.mn.us/feedlots>.

This form must be completed for each manure recipient. For example if manure is transferred to three different entities, then three copies of this form must be completed. Multiple transfer dates to the same entity can be indicated on one form.

## Step 1: Manure generation*(Completed by feedlot owner where manure is generated)*

|  |  |
| --- | --- |
| Facility name where manure generated: |       |
| Facility address: |       |
| City: |       | State: |       | Zip: |       |

## **Manure recipient information**:

|  |  |
| --- | --- |
| Name: |       |
| Address: |       |
| City: |       | State: |       | Zip: |       |

## **Manure analysis results** *(Must be representative of manure transferred)*

|  |  |  |  |
| --- | --- | --- | --- |
| Manure source #1: |       | Date analyzed: |       |
| N: |       | P2O5: |       | K2O: |       | Units: [ ]  lb/ton [ ]  lb/1000 gallons |
| Total quantity transferred: |       | [ ]  tons [ ]  gallons | Transfer date(s): |       |
| Manure source #2: |       | Date analyzed: |       |
| N: |       | P2O5: |       | K2O: |       | Units: [ ]  lb/ton [ ]  lb/1000 gallons |
| Total quantity transferred: |       | [ ]  tons [ ]  gallons | Transfer date(s): |       |

## Step 2: Short-term stockpiling(*Completed by owner of the stockpile - If no stockpile, go to step 3*.)

|  |  |  |  |
| --- | --- | --- | --- |
| **Stockpile location(s)** | **Quantity stockpiled** | **Date stockpile established** | **Date land applied**  |
| **County** | **Township** | **Section** | **Quarter** |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

## Step 3: Manure application*(Completed by person applying the manure)*

Manure recipient must provide this information to the manure generator within 60 days of land application.

|  |  |
| --- | --- |
| Name of company or individual that applied manure:: |       |
| Address: |       |
| City: |       | State: |       | Zip: |       |
| License number of commercial animal waste technician (if used): |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field ID** | **County** | **Township** | **Section** | **Application rate**(tons or gallons/ac) | **Application method**(see choices below) |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |
|       |       |       |       |       |  |

Application methods: Incorp within 12 hrs, Incorp 12 – 96 hrs, Incorp after 96 hrs, Sweep injection, Knife injection