



CFO / CAFO APPLICATION PACKET

State Form 55051 (R5 / 10-22)
Confined Feeding Operation (CFO)
National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT
Confined Feeding Section
Office of Land Quality
100 North Senate Avenue
IGCN Rm 1101
Indianapolis, Indiana 46204
(800) 451-6027 request CFO Permits

INSTRUCTIONS: Use this application packet to submit the following types of Confined Feeding Operation (CFO) and Concentrated Animal Feeding Operation (CAFO) applications under 327 IAC 19, and for NPDES Individual Permits under 327 IAC 15-16, to the Indiana Department of Environmental Management (IDEM):

1. CFO Approval – New Approval, Construction Approval (Expansion), Amendments, and Renewals
2. NPDES CAFO Individual Permit – Construction and Permit Coverage
3. NPDES CAFO Individual Permit – Permit Modification
4. NPDES CAFO Individual Permit – Permit Renewal

The application packet contains the following checklist, worksheet, and forms:

- I. Application Type and Requirements Worksheet
- II. General Information
- III. Notification Format for Agency Correspondence
- IV. Fee Transmittal
- V. CFO and CAFO New Construction Permit Application Checklist
- VI. NPDES Application
- VII. Animal Capacity
- VIII. Farmstead Plan
- IX. Construction
- X. Manure Management Plan (MMP)
- XI. Plot Maps
- XII. Disclosure Statement
- XIII. Notification Requirements
- XIV. Marketing and Distribution of Manure
- XV. Certification of Required Acreage for Land Application

The checklist, worksheet, and forms are required and supersede all previous versions. IDEM will not accept substitutes, altered or previously supplied forms.

Start with the “Application Type and Requirements Worksheet.” The worksheet will assist you in identifying the application type and necessary application forms for a complete application. You do not have to submit any forms that are not required for the type of application you are submitting. The worksheet and the “CFO and CAFO New Construction Permit Application Checklist” are designed to help you submit a complete application. An incomplete application will delay approval of your project.

The application fee will not be refunded if a construction application is deemed significantly incomplete and is returned to the applicant. If IDEM estimates that missing items will take more than thirty (30) days for the applicant to produce the application would be considered incomplete.

You must submit three (3) complete copies of all applications that include construction, expansion or an amendment of your permit, one (1) of which may be electronic in a PDF file format.

This application packet is based on the requirements in IC 13-18-10, 327 IAC 19, and 327 IAC 15-16. You can view the Indiana Code (IC) and Indiana Administrative Code (IAC) references in this application at iga.IN.gov. IC references are under the “Laws” link. IAC references are under the “Publications” link.

NOTE: If your CFO has a bio-digester on the CFO property, you must also submit a “BIOMASS ANAEROBIC DIGESTER/GASIFICATION FACILITY REGISTRATION APPLICATION” (State Form 55309) that is not included in this packet. Submit this form with your CFO Application Packet.

If you need assistance in identifying your specific application type, materials that must be submitted, or have questions regarding the permitting process, please contact IDEM, Confined Feeding Permits Section, at the phone number above.

Definitions:

Construction: means the fabrication, erection, or installation of a facility or manure control equipment at the location where the facility or manure control equipment is intended to be used. This would include any addition to any confinement, manure, silage storage or leachate collection system, or any item that is a permitted structure on a farm (*see expansion application*).

Construction or expansion Application: If you will be constructing new facilities that will house livestock or poultry and/or store manure or silage, then you must select a construction application (permit type "A" or "D" in the Application Type Table). In addition, if you have an existing approval that has expired, then you must submit application type "C"; if you have an existing operation that has never been permitted but you now wish to obtain an approval, select application type "B". A change in design that increases the amount of storage of an approved or new waste storage facility requires a new construction approval.

Amendment of an existing Approval: An owner/operator may request to amend the approval to address changes at the CFO that do not require new Construction or Expansion Approval. The amendment may be a change in the number of animals. An amendment is required to address an increase in manure production on the site that does not involve construction that will increase animal or manure storage capacity. An amendment of your approval must be requested if you wish to replace old outdated buildings with newer designs as long as the change does not result in an increase in animals or manure containment capacity and the new buildings are constructed in the same footprint of the existing structure. An amendment must be approved prior to implementing the proposed changes.

Facility Change: Any alteration of an approved design that does not increase manure storage capacity or other changes on the production area that do not change, or that decrease the amount of manure stored on the production site. IDEM may determine what is being proposed under a Facility Change may need to be submitted as an Amendment or a Construction or expansion Application. The most common facility change requests are items such as moving the outlet of a perimeter drain, changing some design criteria of a building that meets or exceeds the original design.

Renewal: If you have an existing approval and you are still operating in the same manner you were when you were approved, you must renew your approval every five (5) years. If you do not renew your approval, it will expire and you would have to reapply as an existing operation with an expired approval. IDEM will try to send out a notice to all expiring approvals at least three (3) months before expiration, though this is not guaranteed and it is the responsibility of the permittee to submit your renewal at least thirty (30) day prior to its expiration date.

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INDEX

	Page Number
INSTRUCTIONS	Application Checklist..... v
SECTION I	General Information..... 1 <i>(Required section for all CFO applications)</i>
SECTION II	Correspondence Notification 5 <i>(Required section for all CFO applications)</i>
SECTION III	Fee Transmittal..... 7
SECTION IV	Construction Checklist..... 9
SECTION V	NPDES Application..... 13
SECTION VI	Animal Capacity..... 15 <i>(Required section for all CFO applications)</i>
SECTION VII	Farmstead Plan..... 17 <i>(Required section for all CFO applications)</i>
SECTION VIII	Construction Plans..... 23
SECTION IX	Manure Management Plan (MMP).....29 <i>(Required section for all CFO applications) *</i>
SECTION X	Plot Maps..... 31 <i>(Required section for all CFO applications)</i>
SECTION XI	Disclosure Statement..... 33
SECTION XII	Notification Requirements..... 39
SECTION XIII	Marketing and Distribution of Manure..... 49
SECTION XIV	Certification of Required Acreage for Land Application.. 51

** See special note for NPDES required Nutrient Management Plans.*

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Application Checklist and Sections from this Form which Must Be Completed for Application Type																
Application Type	Required Number of Copies	SEC I General Information	SEC II Correspondence	SEC III Fee Transmittal	SEC IV CFO CAFO Const. Checklist	SEC V NPDES Application	SEC VI Animal Capacity	SEC VII Farmstead Plan	SEC VIII Construction	SEC IX MMP	SEC X Plot Maps	SEC XI Disclosure	SEC XII Notice	SEC XIII Marketing and Distribution	SEC XIV Acreage Certification	
CFO Approval – Construction and/or Operation (Including Renewals) Permitted Under 327 IAC 19																
A.	Completely New Operation (Currently Undeveloped Site)	3	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	
B.	Existing Operation without Existing CFO Approval	3	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	
C.	Existing Operation with Expired CFO Approval	3	Yes	Yes	Yes	No	No	Yes	Yes	No	Yes	Yes	Yes	Yes	No	
D.	Expansion of Operation with Current CFO Approval	3	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
E.	Amendment of Existing CFO Approval – Permit Condition	3	Yes	Yes	No	No	No	Yes	Yes	No	Yes	Yes	No	Yes*	No	
F.	Amendment of Existing CFO Approval – Change in the type or number of animals or that increases manure production	3	Yes	Yes	No	No	No	Yes	Yes	No	Yes	Yes	No	Yes*	No	
G.	CFO Approval Renewal/Manure Management Plan	1	Yes	Yes	No	No	No	Yes	Yes	No	Yes	Yes	No	No	No	
NPDES CAFO Individual Permit – Construction and Permit Coverage Permitted under 327 IAC 15-16																
H.	Completely New Operation (Currently Undeveloped Site)	3	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No*	Yes	Yes	Yes	No	No
I.	Existing Operation without Current CFO Approval or NPDES Permit														No	
J.	Existing Operation with Current CFO Approval														Opt	
K.	Current NPDES CAFO Individual Permit Holder Proposing Construction														Opt	
NPDES CAFO Individual Permit – Permit Modification Permitted under 327 IAC 15-16																
L.	Construction or Expansion of Storage or Animals – No Permit Extension	3	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No*	Yes	Yes	Yes	Opt	No
M.	No Construction or Expansion of Storage or Animals – No Permit Extension					No				No						
NPDES CAFO Individual Permit – Renewal Permitted under 327 IAC 15-16																
N.	Renewal of Coverage for Operation with Current NPDES CAFO Individual Permit	1	Yes	Yes	Yes	No	Yes	Yes	Yes	No	No	Yes	No	Yes	Opt	No

Yes = Required Form for Application Type

No = Not Applicable Form for Application Type (Not Required and Not Appropriate for Application Type)

Opt = Optional Form for Application Type (See Specific Form Listed for Details)

* Applicants using the form to request amendments do not have to notify county officials and affected parties that they submitted an application. For amendment applications, complete these pages so IDEM can notify county officials and affected parties of the decision.

** Submittal of a nutrient management plan per 327 IAC 15-16-9 by a CAFO that meets the requirements of 327 IAC 15-16-9 satisfies the requirements of IC 13-18-10-2(a)(2) regarding submission of a manure management plan.

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CFO / CAFO APPLICATION PACKET
SECTION I - General Information

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

- INSTRUCTIONS:**
- 1. COMPLETE THIS SECTION FOR ALL APPLICATION TYPES.**
 - 2. Complete all general application information solicited below.**
 - 3. Provide the required signature(s) as directed.**
 - 4. Select the application type.**

This form is required and supersedes all previous versions. IDEM will not accept substitutes, altered or previously supplied forms.

A. GENERAL APPLICATION INFORMATION

1. OPERATION INFORMATION

Operation Name:		Farm ID Number:	
Operation Address:			
Operation City:		Operation ZIP Code:	
Operation Telephone:			
Operation County:			
Nearest Crossroads to Operation:			

2. APPLICANT (Person or entity the CFO Approval is issued to - permittee)

The Applicant is the Owner/Operator that applies for or has received a CFO Approval under IC 13-18-10, 327 IAC 19, or 327 IAC 15-16 including renewals and amendments. An Applicant may be an individual, a partnership, a co-partnership, a firm, a company or any other entity listed under IC 13-11-2-158(b). There may be more than one entity that constitutes an Owner/Operator. Each entity that meets the definition of Owner/Operator for the CFO must submit the requested information below.

Name:*			
Mailing Address:			
City:			
State:		ZIP Code:	
Telephone (Home):			
Telephone (Business):			
Telephone (Cell):			
Facsimile:		E-mail Address:	

***A limited liability company (LLC) or corporation (Inc. or Corp.) must be registered and active with the Indiana Secretary of State.**

3. PROPERTY OWNER (At the Time of Application Submittal)

Same as Applicant Listed in Section 2; if not, please complete below.

Name:			
Mailing Address:			
City:			
State:		ZIP Code:	
Telephone (Home):			
Telephone (Business):			
Telephone (Cell):			
Facsimile:		E-mail Address:	

4. OPERATION MANAGER, OPERATOR, AND/OR LESSEE (If Different than Applicant or manager and/or authorized agent for Entity)

Same as Applicant Listed in Section 2 OR Person listed below is: Manager Operator Lessee

Name:			
Mailing Address:			
City:			
State:		ZIP Code:	
Telephone (Home):			
Telephone (Business):			
Telephone (Cell):			
Facsimile:		E-mail Address:	

5. CURRENT OPERATION PERMIT INFORMATION

Current Permit/Approval Type (check one):

- CFO Approval None - Expired Approval or Expired Permit
 NPDES CAFO Individual Permit
 None - New Facility

_____ Farm ID (Log ID) Number (Current or expired) _____ Current/Last Approval (Animal Waste) Number

6. ADJACENT OR CONTIGUOUS ANIMAL FEEDING OPERATIONS (AFOs)

Are there any AFOs adjacent to or contiguous with the CFO that are under common ownership or control of the applicant? Yes No

If yes, provide a statement identifying the AFOs and describing the common ownership. The response to this item will determine whether the AFOs will have to be incorporated into the CFO approval. Attach additional sheets as necessary.

B. SIGNATURES

I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, IC 13-18-10-1.4, IC 13-18-10-2.2, and IC 13-15-7-1(3), that the statements and representations in this application and the accompanying forms and application materials are true, accurate, and complete.

The agency decision based on the application and accompanying form and application materials will be issued in the name of the person or entity listed as the applicant(s).

THIS SECTION MUST BE SIGNED.

I warrant that I have the authority to sign this Application on my own behalf, and on behalf of any entity for which I am signing in a representative capacity.

Title and Name of Operation Owner or Authorized Agent* – **Type or Print**

Signature of Applicant or Authorized Agent

Date Signed (month, day, year)

Printed Name and Signature of Property Owner If Different than Operation Owner **

Date Signed (month, day, year)

* A signature by an Authorized Agent will require Power of Attorney (POA) if not a member of the entity.

** A signed letter from the property owner acknowledging the submittal of an application on their property may substitute for signature.

C. APPLICATION TYPE

Using the Application Type and Requirements Worksheet, in the list below, select the application type that you are submitting. Please note that an Amendment of Existing CFO Approval (E. or F.) and CFO Approval Renewal (G.) are the only situations where more than one box may be selected.

CFO Approval – Construction and/or Operation (Including Renewals)

<input type="checkbox"/>	A. Completely New Operation (Currently Undeveloped Site)
<input type="checkbox"/>	B. Existing Operation Without Existing CFO Approval
<input type="checkbox"/>	C. Existing Operation with Expired CFO Approval
<input type="checkbox"/>	D. Expansion of Operation with Current CFO Approval
<input type="checkbox"/>	E. Amendment of Existing CFO Approval – Permit Condition ¹
<input type="checkbox"/>	F. Amendment of Existing CFO Approval – Change in the type or number of animals that increases manure production ¹
<input type="checkbox"/>	G. CFO Approval Renewal/Manure Management Plan

NPDES CAFO Individual Permit – Construction and Permit Coverage

<input type="checkbox"/>	H. Completely New Operation (Currently Undeveloped Site)
<input type="checkbox"/>	I. Existing Operation without Current CFO Approval or NPDES Permit
<input type="checkbox"/>	J. Existing Operation with Current CFO Approval
<input type="checkbox"/>	K. Current NPDES CAFO Individual Permit Holder Proposing Construction

NPDES CAFO Individual Permit - Permit Modification

<input type="checkbox"/>	L. Construction or Expansion of Storage or Animals ¹
<input type="checkbox"/>	M. No Construction or Expansion of Storage or Animals ¹

NPDES CAFO Individual Permit - Renewal

<input type="checkbox"/>	N. Renewal Coverage for Operation with Current NPDES CAFO Individual Permit
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¹ Action does not provide for or allow an extension of the Approval (Permit).

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**CFO / CAFO APPLICATION PACKET
SECTION II - Notification Format for
Agency Correspondence**

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Confined Feeding Section
Office of Land Quality
100 North Senate Avenue
IGCN Rm 1101
Indianapolis, Indiana 46204
(800) 451-6027 request CFO Permits

INSTRUCTIONS: THIS SECTION IS COMPLETED FOR ALL APPLICATION TYPES. The Indiana Department of Environmental Management (IDEM) normally notifies applicants of final decisions by mail. In 2012, Indiana Law changed to allow IDEM to use electronic mail instead of US Postal Service mail. This form allows you to specify whether you want to receive correspondence and notices related to your CFO or CAFO application by mail, by e-mail or both. It also allows you to specify if you want correspondence directed to a consultant by e-mail. Please complete the information below to indicate your preference.

A. GENERAL INFORMATION

Operation Name _____ Farm ID Number _____

Applicant Name (printed) _____

Applicant Consent for Notification Only for This Permit Application (initials and date) _____

Applicant Consent for Notification on All Future Applications/Correspondence (initials and date) _____

B. NOTIFICATION FORMAT

Applicant should understand that, as a result of consenting to electronic notification, e-mail address(es) listed below would be part of the agency's public record.

Please indicate your preference for the method of receiving these notifications by initialing and dating the appropriate lines below and then return the completed form to our office with your application.

Initials	Date (month, day, year)	
_____	_____	Please continue sending via US Postal Service mail.
_____	_____	AND/OR
_____	_____	Please send correspondence to the e-mail address as indicated below: <i>I understand that my e-mail address will be part of the public record.</i> E-mail address: _____
_____	_____	Please send copies of correspondence for this application to the following consultant e-mail address(es): <i>I understand that this e-mail address will be part of the public record.</i> Consultant e-mail address(es): _____ _____

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**CFO / CAFO APPLICATION PACKET
SECTION III - Fee Transmittal**

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 Office of Land Quality
 100 North Senate Avenue
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 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS:

This form must be used to transmit fees for all CFO or NPDES CAFO applications as required in IC 13-18-10-2(a)(5), 327 IAC 15-16-5(a)(2) and (3), 327 IAC 15-16-5(b)(1)(B), and 327 IAC 19-7-1(c)(9). This form is required for all application types that require a fee and supersedes all previous versions. IDEM will not accept substitutes, altered or previously supplied forms. The application fee for each application type is listed in the table below. Locate the type of application to be submitted and the appropriate application fee amount. Make a check or money order for the appropriate application fee amount listed below payable to the Indiana Department of Environmental Management. For payment by Master Card or Visa, please contact the office by telephone at 317-234-3099 Monday through Friday between the hours of 9:00am to 3:00pm. Return only the Fee Transmittal Form and fee to:

**Indiana Department of Environmental Management
 PO Box 3295
 Indianapolis, IN 46206-3295**

NOTE: *A copy of the check or credit card receipt and a copy of this completed Fee Transmittal Form must contain the Applicants name and farm ID number (if known) and be attached to all other submitted application materials. Submit these copies and all application information to:*

**Indiana Department of Environmental Management
 Confined Feeding Permits Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN 1101
 Indianapolis, Indiana 46204**

A. APPLICANT INFORMATION			
Name (Applicant):	*	Farm ID Number:	*
Mailing Address:			
City:			
State:		ZIP Code:	
Telephone:			
Operation County:			
B. APPLICATION TYPE AND FEE AMOUNT			
Application Type			Fee Amount
CFO Approval – Construction and/or Operation (Including Renewals)			
<input type="checkbox"/>	A.	Completely New Operation (Currently Undeveloped Site)	\$175.00
<input type="checkbox"/>	B.	Existing Operation without Existing CFO Approval	
<input type="checkbox"/>	C.	Existing Operation with Expired CFO Approval	
<input type="checkbox"/>	D.	Expansion of Operation with Current CFO Approval	
<input type="checkbox"/>	E.	Amendment of Existing CFO Approval – Permit Condition	\$0.00
<input type="checkbox"/>	F.	Amendment of Existing CFO Approval – Change in the type or number of animals that increases manure production	
<input type="checkbox"/>	G.	CFO Approval Renewal/Manure Management Plan	

***Required Information – If Farm ID Number is unknown (New Applications) be sure to note applicant name on the check that is submitted. Failure to pay this fee can be grounds for denial of the application.**

B. APPLICATION TYPE AND FEE AMOUNT (continued)**Application Type****NPDES CAFO Individual Permit – Construction and Coverage**

<input type="checkbox"/>	H. Completely New Operation (Currently Undeveloped Site)	\$475.00
<input type="checkbox"/>	I. Existing Operation without Current CFO Approval or NPDES CAFO Permit	
<input type="checkbox"/>	J. Existing Operation with Current CFO Approval	\$300.00
<input type="checkbox"/>	K. Current NPDES CAFO Individual Permit Holder Proposing Construction	\$225.00

NPDES CAFO Individual Permit – Permit Modification

<input type="checkbox"/>	L. Construction or Expansion of Storage or Animals – No Permit Extension	\$225.00
<input type="checkbox"/>	M. No Construction or Expansion of Storage or Animals – No Permit Extension	\$50.00

NPDES CAFO Individual Permit – Renewal

<input type="checkbox"/>	N. Renewal of Coverage for Operation for Operation with Current NPDES CAFO Individual Permit	\$300.00
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CFO / CAFO APPLICATION PACKET
SECTION IV - CFO / CAFO New Construction
Permit Application Checklist

Part of State Form 55051 (R5 / 10-22)
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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

- INSTRUCTIONS:**
- 1. THIS SECTION IS FILLED OUT FOR APPLICATION TYPES A,B,D, AND H THRU L ONLY.**
 - 2. The application must contain the following information.**
 - 3. Indicate whether each item is provided. Mark the item "N/A" if the item is not applicable to your application. Applications deemed significantly incomplete will be returned to the applicant.**

REQUIRED INFORMATION		PROVIDED? (Y, N or N/A)
A. General		
I.	Three (3) <u>signed</u> copies of the application packet provided by Indiana Department of Environmental Management (IDEM). One (1) of the copies may be electronic.	
II.	Application Fee (<i>Fee Transmittal Form must be attached</i>).	
	A. CFO New Construction \$175	
	B. NPDES Individual (initial or renewal) with construction \$475	
	C. NPDES Individual (modification) with construction \$225	
III.	Disclosure Statement	
IV.	Notification Requirement	
	A. County Executive / County Commissioner List	
	B. One-Half Mile List	
	C. Adjoining Land Owner List	
	D. Potentially Affected Parties List	
	1. Copy of the mailing to the adjoining land owners and potentially affected parties	
	E. Copy of Notification Affidavit	
B. Plot Maps (<i>must be legible</i>)		
I.	USDA NRCS Soil Survey Map	
	A. Location of the waste management system	
	B. Property boundaries of the confined feeding operation	
	C. Boundaries of all manure application areas showing required setbacks	
	D. Boundaries of livestock and poultry production areas as defined in 327 IAC 19-2-34.	
	E. Available acreage for manure application after calculation of setbacks (spreadable acres).	
II.	USGS Topographical Map	
	A. Location of existing or proposed public water supply wells within 1,000 feet of the manure storage structure	
	B. Location of public water supply surface intake structures within 1,000 feet of the manure storage structure	
	C. Location of the waste management system	
	D. Property boundaries of the confined feeding operation	
	E. Boundaries of all manure application areas	
	F. Boundaries of livestock and poultry production areas as defined in 327 IAC 19-2-34	
	G. Available acreage for manure application after calculation of setbacks	
C. Farmstead Plan (<i>Must be drawn to approximate scale or show specific distances between waste management system and features listed below that are within 500 feet. Plan must be submitted on paper 8 1/2 x 11 inches in size or larger. Plan must also contain reference to true north.</i>)		
I.	Location of existing and proposed waste management systems	
II.	Location of any of the following within 500 feet of a waste management system (on-site or off-site)	
	A. Residences	
	B. Surface waters of the state	
	C. Public and private roads	

REQUIRED INFORMATION

**PROVIDED?
(Y, N or N/A)**

D. Water well locations	
E. Characteristics of karst terrain as identified in 327 IAC 19-2-24	
F. Drainage patterns	
G. Property line boundary	
H. All outlets of known tile drains or any other type of subsurface or surface drainage outlet	
I. Drainage inlets, including water and sediment control basins showing their outlets, and ponds with outlets	
J. Mortality management sites	
III. Show the diversion of uncontaminated surface water	
IV. Show the type and number of animals per structure	
V. Indicate any part of the CFO that is within 100 year flood plain	
D. Unapproved Waste Management System Drawings	
I. Detailed views	
II. Necessary cross sections to define all dimensions	
III. Construction materials	
IV. Elevations of the entire waste management system (<i>applicable only if relying on gravity flow</i>)	
E. Soil and Water Table Information	
I. Test Holes	
A. Must be conducted by certified soil scientist, professional geologist or professional engineer registered in Indiana	
B. Number of test holes must be sufficient to adequately characterize the seasonal water table and soil and as specified in NRCS IN 531 Engineering Geology, Subpart A – Geologic Site Evaluation with additional requirements as noted below.	
1. Concrete storage structures	
a. Test hole must be two (2) feet below base of structure	
2. Earthen storage structures	
a. Test hole must be five (5) feet below base of structure for non-karst area	
b. Test hole must be to shallower of either bedrock or ten (10) feet below base of structure in karst area	
F. Manure Management Plan	
I. Procedures for soil testing	
A. Soil test must provide sufficient information about soil fertility to allow for nutrient recommendations (may not represent more than twenty (20) acres per sample)	
B. Frequency of soil test must be specified in the plan and at a minimum be conducted once every four (4) years	
II. Procedures for manure testing	
A. Manure test must provide sufficient information about manure content to allow for nutrient recommendations	
B. Frequency of manure test must be specified in the plan and at a minimum be conducted once every year	
C. One (1) manure test must be conducted for each type of manure generated	
III. Legible maps of manure application areas with eligible application acres and with setbacks noted	
IV. Land use agreements signed by the property owners on whose property the manure will be applied	
V. If Applicable	
A. Alternate method proposed by applicant for managing of the manure	
B. Other practices to be used that assure the CFO meet the performance standards of 327 IAC 19-3-1	
C. Land application acreage requirements waiver, as described in 327 IAC 19-14-2(d)	
G. Nutrient Management Plan (<i>required for NPDES CAFO Individual permit applicants only</i>)	
I. Any NPDES CAFO Individual Permit applicant must submit a nutrient management plan (NMP) with their application materials. The NMP should contain best management practices necessary to meet the requirements listed below, and any applicable effluent limitations and standards, including those specified in 40 CFR part 412. The NMP must, to the extent applicable:	
A. Ensure adequate storage of manure, litter, and process wastewater, including procedures to ensure proper operation and maintenance of the storage facilities	

REQUIRED INFORMATION

**PROVIDED?
(Y, N or N/A)**

Page 3

B. Ensure proper management of mortalities so that they are not disposed of in a liquid manure, storm water, or process wastewater storage or treatment system that is not specifically designed to treat animal mortalities	
C. Ensure that clean water is diverted, as appropriate, from the production area	
D. Prevent direct contact of confined animals with waters of the United States	
E. Ensure that chemicals and other contaminants handled on-site are not disposed of in any manure, litter, process wastewater, or storm water storage or treatment system unless specifically designed to treat such chemicals and other contaminants	
F. Identify appropriate site specific conservation practices to be implemented, including buffers or equivalent practices, to control runoff of pollutants to waters of the United States	
G. Identify protocols for appropriate testing of manure, litter, process wastewater, and soil	
H. Establish protocols to land apply manure, litter or process wastewater in accordance with site specific nutrient management practices that ensure appropriate agricultural utilization of the nutrients in the manure, litter or process wastewater	
I. Identify specific records that will be maintained to document the implementation and management of the minimum elements above	
H. Alternate Design or Compliance Approach; Innovative Technology (if applicable)	
I. Documentation that indicates that the performance standards in 327 IAC 19-3-1 will be met should include:	
A. Design specification that indicate adequate structural integrity	
B. Protective measures that reduce the potential for spills	
C. Existence of barriers or surface gradient that directs liquid away from features specified for protection	
D. Operational practices that provide additional protection	
E. Threats of adverse impacts to water quality or other specified sensitive areas	
F. Other criteria related to protection of the environment or human health	
I. Additional Attachments (if applicable)	
I. Copies of any written waivers related to reduction of setback distances	
II. Copies of all land use agreements as described in 327 IAC 19-14-2(b)	

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CFO / CAFO APPLICATION PACKET
SECTION V - NPDES Application

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
 Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: *ONLY NPDES CAFO Individual Permit applicants must complete this form. This form supplements the "General Information", "Animal Capacity", and "Plot Maps" forms to meet the application requirements in 327 IAC 15-16-5(a) which references federal regulation 40 CFR 122.21 and Indiana regulation 327 IAC 5-2-3. This form satisfies the federal requirements and substitutes for federal form "2B". This form is required and supersedes all previous versions. IDEM will not accept substitutes, altered, or previously supplied forms.*

A. NPDES CAFO INFORMATION

The owner or operator must include the following information:

1. Total number of acres **under control** of the applicant available for land application: _____ Acres

2. The estimated amount of manure, litter, and process wastewater as follows:

a) Generated per year: _____ Tons _____ Gallons

b) Transferred to other person per year: _____ Tons _____ Gallons

3. The name of waterbody receiving drainage from the production area (*stream/creek/river/ditch/lake*): _____

4. Other than Indiana, list all states wherein the owner or operator owns or operates a CAFO: _____ Not Applicable

B. SIC CODES

Rank the appropriate activities (1, 2, 3 etc.) below that apply to the operation from most significant to least.

Rank	SIC	Description
	0211	Beef Cattle Feedlots
	0212	Beef Cattle, Except Feedlots
	0213	Hogs
	0214	Sheep and Goats
	0219	General Livestock, Except Dairy and Poultry
	0241	Dairy Farms
	0251	Broiler, Fryer, and Roaster Chickens
	0252	Chicken Eggs
	0253	Turkeys and Turkey Eggs
	0254	Poultry Hatcheries
	0259	Poultry and Eggs, Not Elsewhere Classified
	0271	Fur-bearing Animals and Rabbits
	0272	Horses and Other Equines
	0273	Animal Aquaculture
	0279	Animal Specialties, Not Elsewhere Classified
	0291	General Farms, Primarily Livestock and Animal Specialties

C. EXISTING ENVIRONMENTAL PERMITS

Does the operation have any current environmental permits besides a NPDES CAFO Permit?

Yes No

- A. If yes, and the permit is a CFO Approval, verify the CFO Farm ID number is listed on the General Information attachment in Section I.A.5.
- B. If yes, and the facility has other current environmental permits besides a CFO approval, on a separate sheet list all current permits including permitting authority, permit types, permit number, and issuance date for each. Attach all sheets to this form.

D. DISCHARGE INFORMATION

Has the operation had a discharge to waters of the state during the five (5) years preceding the submittal of this application?

Yes No

If yes, on a separate sheet list all discharges including the date, time, and if known, the approximate volume. Attach any sheets to this form.

E. TYPE OF CONTAINMENT, STORAGE, AND CAPACITY

Detail, by completing the table below, the type of existing and proposed containment and storage and total capacity for manure, litter, and process wastewater storage.

Type of Containment/Storage	Total Capacity (Tons or Gallons Please Note Unit(s))	Detention Time (Number of Days)	Structural Material(s)	Collected Stormwater Drainage (Square Feet)
Earthen Waste Treatment Lagoon System				
Earthen Waste Storage Pit or Pond				
Earthen Solids Settling Basin				
Below Ground Liquid Storage Tanks				
Above Ground Liquid Storage Tanks				
High Rise Layers/ Deep Pit Dry Litter Storage				
Broiler or Turkey Barn with Dry Litter Storage				
Dry Manure Storage Shed				
Concrete Pad				
Impervious Soil Pad				
Other, Specify: _____				

F. NUTRIENT MANAGEMENT PLAN

NPDES CAFO Individual Permit holder must develop a nutrient management plan and maintain it in their operating record.

Have you developed a comprehensive nutrient management plan for your facility?

Yes No

If yes and this application is for construction or expansion, please include a copy with your application materials.



CFO / CAFO APPLICATION PACKET

SECTION VI - Animal Capacity

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
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 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: *This Section is completed for ALL application types. Complete the table below by listing the total approved capacity of animals confined by the provided animal type listed. For applications that include a construction or expansion proposal, the total number of animals listed should reflect the total proposed maximum for any forty-five (45) day period within a twelve (12) month period as described on the Facility Detail Sheet submitted with the application. For renewal applications, the total number of animals listed should reflect the total approved animal capacity.*

A. ANIMAL INFORMATION		
	Animal Type	Total Approved Animal Capacity
Swine <i>Weighing More Than Fifty-five (55) Pounds</i>	Finishers	
	Sows	
	Boars	
Swine <i>Weighing Less Than Fifty-five (55) Pounds</i>	Nursery Pigs	
Cattle or Cow/Calf Pairs	Beef Cattle	
	Beef Calves	
	Dairy Heifers	
	Dairy Calves	
Mature Dairy Cattle	Dairy Cattle	
Veal Calves	Veal Calves	
Chickens Other than Laying Hens <i>Other Than a Liquid Manure Handling System</i>	Pullets	
	Broilers	<i>Dry</i>
Laying Hens and Broilers <i>Liquid Manure Handling System</i>		<i>Liquid</i>
	Laying Hens <i>Other Than a Liquid Manure Handling System</i>	<i>Liquid</i>
Turkeys		Layers
	Toms	
	Hens	
Ducks <i>Other Than a Liquid Manure Handling System</i>	Ducks	<i>Dry</i>
		<i>Liquid</i>
Ducks <i>Liquid Manure Handling System</i>		
Sheep and Lambs		
Horses		
Other <i>(Specify):</i>		
Total		

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CFO / CAFO APPLICATION PACKET
SECTION VII - Farmstead Plan

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
 Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: ***This Section is completed for ALL application types. Prepare a Farmstead Plan that meets the requirements noted in the Section A. Farmstead Plan Checklist. Attach the Farmstead Plan to this form. Complete the Facility Detail Information in Section D. using the Section B. Checklist and the examples in Section C. Check the boxes next to each item in Sections A. and B. as you verify that the Farmstead Plan and Facility Detail Information sheets are complete. Failure to complete this section accurately will cause delays in processing this application.***

A. FARMSTEAD PLAN CHECKLIST

<input type="checkbox"/>	1. The farmstead plan must be on a sheet no less than 8 ¹ / ₂ inches by 11 inches in size.
<input type="checkbox"/>	2. The farmstead plan must show all existing and proposed waste management systems, and all of the following features within 500 feet of the waste management systems (<i>label each feature</i>): a) Residences b) Surface waters of the state c) Public and private roads d) Water well locations e) Characteristics of karst terrain as identified in 327 IAC 19-2-24 f) Drainage patterns g) Property boundary line h) All outlets of known tile drains or any other type of subsurface or surface drainage outlet i) Drainage inlets, including water and sediment control basins showing their outlets, and ponds with outlets j) Mortality management sites
<input type="checkbox"/>	3. The farmstead plan must be legible and either: a) Drawn to approximate scale; or b) Show specific distances between the waste management systems and the features listed immediately above in section 2 that are within 500 feet of the existing or proposed waste management system.

B. FACILITY DETAIL INFORMATION CHECKLIST

Using the instructions below, complete Part D. of this section, "Facility Detail Information" sheet for all confinement and waste structures present or proposed at the site. If the rows of the provided Section D. "Facility Detail Information" sheet are not properly sized for your needs, you may create your own table with the same column headers and required information listed below.

<input type="checkbox"/>	1. Label the Farmstead Plan – The waste management systems (confinement and waste structures) must be uniquely identified on the farmstead plan. Existing structures should be labeled with an "E". Proposed structure should be labeled with a "P". After labeling each building with a "P" or "E", number the structures. Your structures should be labeled as "E1", "E2", "E3", etc.; or "P1", "P2", "P3", etc.; or a combination of the two. Other unique labeling systems will be accepted.
<input type="checkbox"/>	2. Animal Type – Animal type(s) listed on Animal Information Attachment.
<input type="checkbox"/>	3. Number of Animals – The MAXIMUM APPROVED CAPACITY of the unit at any one time.
<input type="checkbox"/>	4. Solid or Liquid – Denote if the manure in the unit is handled as a solid or liquid.
<input type="checkbox"/>	5. Date Constructed – List the approximate date of construction for existing waste storage structures.
<input type="checkbox"/>	6. Water Uses (gallons/unit of time) – If the inside of the building is washed, indicate how much water is used and how often the building is cleaned. Also include any excess non-contact cooling water or drinking water directed to the waste management system.
<input type="checkbox"/>	7. Brief Description – Provide a brief description of the facility and waste management system. Indicate if the unit shares manure storage with another unit (i.e. common lagoon system, slurry store, etc.). Previously approved structures must have the approval number and date approved listed.

C. FACILITY DETAIL SHEET EXAMPLES

Example 1

Existing Previously Approved Swine Facility Proposing an Expansion

You are seeking approval for a proposed 1,000 head finishing building with a flush gutter system to a proposed lagoon. The lagoon will service the new building as well as two existing buildings that were approved on 12/17/1994, AW #1234. One of the existing buildings contains 1,500 nursery pigs, the other 300 gestating sows. The new finishing building will be washed out between groups of hogs with about 5,000 gallons of water per cleaning. You labeled the 1,000 head finisher "P1" and the lagoon "P2" on the farmstead map.

FACILITY DETAIL INFORMATION

Label on Farmstead Map	Animal Type	Number of Animals	Solid or Liquid	Date Constructed (for existing buildings)	Water Uses (gallons/unit of time)	Brief Description:
P1	Finishing Hogs	1,000	Liquid	N/A	5,000 gallons/3 times a year	A finishing building with flush gutter system to lagoon that will service two (2) other buildings on site.
E1	Nursery Pigs	1,500	Liquid	3/95	N/A	Shallow pits, previously approved on 12/17/1994, AW# 1234. Pit will be connected to new lagoon.
E2	Gestating Sows	300	Liquid	3/95	N/A	Six (6) foot concrete pit, previously approved on 12/17/1994, AW# 1234. Pit will be connected to new lagoon.
P2	N/A	N/A	Liquid	N/A	N/A	A clay lined lagoon will service the proposed building as well as the two (2) buildings previously approved on 12/17/1994, AW#1234

Example 2

Existing Turkey Facility with No Prior Approval Proposing an Expansion

You currently own/operate a 20,000-bird broiler barn that does not require an approval, and wish to expand your operation by adding another 20,000-bird broiler barn and a manure compost building. Your total capacity will rise from 20,000 to 40,000 birds. You now must seek approval for both the existing barn and the proposed barn.

FACILITY DETAIL INFORMATION

Label on Farmstead Map	Animal Type	Number of Animals	Solid or Liquid	Date Constructed (for existing buildings)	Water Uses (gallons/unit of time)	Brief Description:
E1	Broiler	20,000	Solid	~ 1995	N/A	A broiler barn with earthen floors
P1	Broiler	20,000	Solid	N/A	N/A	A broiler barn with earthen floors
P2	N/A	N/A	Solid	N/A	N/A	Concrete floored, additional manure storage

D. FACILITY DETAIL INFORMATION

Label on Farmstead Plan	Animal Type	Number of Approved Animals	Solid or Liquid	Date Constructed <i>(for existing buildings)</i>	Water Uses <i>(gallons/unit of time)</i>	Brief Description

D. FACILITY DETAIL INFORMATION (Continued)

Label on Farmstead Plan	Animal Type	Number of Approved Animals	Solid or Liquid	Date Constructed <i>(for existing buildings)</i>	Water Uses <i>(gallons/unit of time)</i>	Brief Description

Insert Farmstead Plan Map(s)

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**CFO / CAFO APPLICATION PACKET
SECTION VIII - Construction**

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
 Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS:

Refer to the "Application Types and Requirements Worksheet" to determine if Construction information is required for the type of application you are submitting. Complete Section A. Prepare construction drawings and the other construction information listed in this form using the checklists in Section B. through Section S. Use the check boxes to indicate whether each item is addressed or if it is not applicable to your application. The checklists cover the construction details required in the Confined Feeding Operations rule, 327 IAC 19 or 327 IAC 15-16. The instructions give you the rule citation for each section. It is helpful to refer to the rule, when completing this form. You can view the Indiana Code (IC) and Indiana Administrative Code (IAC) references in this form at iga.IN.gov. IC references are under the "Laws" link. IAC references are under the "Publications" link. This form is required and supersedes all previous versions. IDEM will not accept substitutes, altered, or previously supplied forms.

A. OPERATION LOCATION INFORMATION

1. Complete the operation location information below using the United States Geological Survey (USGS) topographic map the operation is shown upon.

USGS Quadrangle Section Township Range

2. In space below provide detailed directions from the nearest town to the site of the operation:

B. WASTE MANAGEMENT SYSTEM DRAWINGS CHECKLIST

Review the waste management system drawing requirements in 327 IAC 19-7-4 and answer the questions below.

	Yes	No	N/A
1. Is a design drawing included for all structures proposed (new/expanded production structure or manure storage structure) or existing (previously unapproved or expired) above what is listed in a current CFO approval or NPDES CAFO permit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Do the waste management system drawings show detailed views and cross sections to define all dimensions and construction materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Do all manure handling systems relying on gravity flow provide the required elevations of the entire waste management system that relies on gravity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. SOIL BORINGS CHECKLIST

Review the soil and water table information requirements in 327 IAC 19-7-1(c)(6) and answer the questions below.

	Yes	No	N/A
1. Is the soil and water table information for the test holes for proposed manure storage structures provided from a soil scientist certified under the Federation of Certified Board of Agriculture, Biology, Earth and Environmental Sciences, a professional geologist certified in Indiana under IC 25-17.6, or a professional engineer registered in Indiana?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are the number of test holes sufficient to adequately characterize the seasonal water table and soil? <ul style="list-style-type: none"> • For liquid manure storage structures, at least two (2) holes per site up to one-half acre, then an additional hole for each additional half acre. (<i>Site in general is defined as size of waste storage structure plus the area between each structure in acres.</i>) • For earthen solid manure storage structures, at least two (2) test holes for a structure up to one (1) acre in size, then an additional hole for each additional half acre. • For concrete solid manure storage structures, at least two (2) holes per structure regardless of size. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are all test holes for concrete manure storage structures at least two (2) feet below the base of the structure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are all test holes for earthen manure storage structures in non-karst areas at least five (5) feet below the base of the structure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is at least one test hole for earthen manure storage structures in karst areas to either bedrock or ten (10) feet below base of structure, whichever is shallower?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D. NEW WASTE MANAGEMENT SYSTEMS SITE RESTRICTIONS CHECKLIST

Review the site restrictions specifically listed in 327 IAC 19-12-2 and answer the questions below.

	Yes	No	N/A
1. Is the new or the expansion of an existing waste management system proposed in karst terrain?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is the new or the expansion of an existing waste management system proposed over reclaimed surface mines? <i>Note: Construction over underground mine is prohibited.</i>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If the response to either A. and/or B. above is "Yes", does the application contain the information requested in 327 IAC 19-12-2(b)?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Is the new waste management system proposed in a one hundred (100) year flood plain? <i>Note: Construction in a floodway is prohibited.</i>	<input type="checkbox"/>	<input type="checkbox"/>	
5. If the response to 4. above is "Yes", 327 IAC 19-12-2(a)(3) requires: a) The access to the waste management system to be at least two (2) feet above the one hundred (100) year flood elevation; and b) The management system is structurally sound without lowering the floodwaters or seasonal water table to below the bottom of the waste management system. Please provide the information below: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <p>_____ Feet Above Mean Sea Level</p> <p>Elevation of 100 year flood plain</p> </div> <div style="text-align: center;"> <p>_____ Feet Above Mean Sea Level</p> <p>Elevation of access to waste management system</p> </div> </div>			
6. Is any portion of the waste management system located below the seasonal high water table?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the response to 6. above is "Yes", does the application show the drainage system, provide details how the water table is lowered and maintained below the base of the waste management system (including proper drainage location, elevation of the entire waste management system, sizing, pumps (including a backup pump) and emergency power sources if necessary), and show the access point for sampling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Is there a potential wetland on the site? If yes, please provide a US Army Corp of Engineers certified wetland determination or request a determination from the IDEM Office of Water Quality, Wetlands and Stormwater Section prior to building or clearing the site.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E. WASTE MANAGEMENT SYSTEM SETBACKS CHECKLIST

1. Does the waste management system comply with the following setbacks detailed in 327 IAC 19-12-3(a), (b), and (e)?

Identifiable Feature at Time of Application	Setback Distance (feet)		Yes	No (see B.)	N/A
	All Waste Management Systems	Solid Manure Storage Structures per 327 IAC 19-12-3(b)			
a) Public water supply well (existing or planned – <i>Please note that an on-site public well placed on-site must meet this setback before or after construction.</i>)	1,000	1,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Public water supply intake or surface intake structure	1,000	1,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Existing off-site residential and public buildings	400	400	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Surface waters of the state	300	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Drainage inlets (<i>Including water and sediment control basins and any planned surface water management structures detailed in a required Stormwater and Erosion Control plan under 327 IAC 15-5.</i>)	300	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Sinkholes (<i>as measured from the surficial opening or the lowest point of the feature</i>)	300	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Off-site water wells	300	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

h) On-site water wells	100	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Property lines	100	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k) Public Roads	100	100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. 327 IAC 19-12-3(c) and (d) allow for reduced setbacks other than those listed in 1. Does the application request or demonstrate a reduced setback? Items E.1. a, and b setbacks cannot be waived.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

F. DESIGN REQUIREMENTS FOR ALL NEW WASTE MANAGEMENT SYSTEMS CHECKLIST

	Yes	No	N/A
1. Is the waste management system designed not to discharge to surface waters of the state? (327 IAC 19-12-4(b))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) If no, does it have an NPDES CAFO permit under 40 CFR 122.23?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G. STORAGE CAPACITY REQUIREMENTS FOR ALL NEW MANURE STORAGE FACILITIES CHECKLIST

	Yes	No	N/A
1. Is the manure storage facility designed with at least a 180 day storage capacity (327 IAC 19-12-4(c)) for the following:			
a) Manure, bedding and other accumulated wastes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Normal precipitation, less evaporation, on the surface area of an open storage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Normal runoff draining into the storage, if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Runoff from a twenty-five (25) year, twenty-four (24) hour precipitation event draining into the storage, if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) A minimum six (6) inches of storage for residual solids.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Two (2) feet of freeboard for open storages.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Six (6) inches of freeboard for covered storages.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Additional storage as necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H. DESIGN REQUIREMENTS FOR ALL NEW LIQUID MANURE STORAGE FACILITIES CHECKLIST

	Yes	No	N/A
Is the liquid manure storage facility designed according to the Indiana NRCS Conservation Practice Standard Code 313, Waste Storage Facility, October 2016? (327 IAC 19-12-4(d))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no, provide an explanation.

Note: If submitting an alternative compliance approach request for approval, see Part S. for the requirements.

327 IAC 19-12-4(d) requires the liquid manure storage facility be certified upon completion of construction by an Indiana professional engineer on an IDEM certification form to be submitted with the construction affidavit within thirty (30) days of the completion of construction.

I. DESIGN REQUIREMENTS FOR ALL NEW CONCRETE STORAGE FACILITIES FOR LIQUID MANURE CHECKLIST

1. Does the design of the concrete liquid manure storage facility comply with the design standards of Mid-West Plan Service-36: Rectangular Concrete Manure Storages, 2 nd Edition 2005 or TR-9: Circular Concrete Manure Tanks, March 1998? (327 IAC 19-12-4(e))	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no, provide an explanation and submit an ACA.

2. Does the application contain the Indiana NRCS Concrete Construction Specification, May 2015? (327 IAC 19-12-4(e))	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no, provide an explanation and submit an ACA.

3. Does the application contain drawings for the concrete liquid manure storage facility that include: a) Joints properly sized and spaced. b) Reinforcing steel adequately sized and spaced. c) A foundation that provides necessary support. d) Waterstops properly located and specified.	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

J. DESIGN REQUIREMENTS FOR ALL NEW EARTHEN STORAGE FACILITIES FOR LIQUID MANURE CHECKLIST

1. Does the pond or lagoon clay liner comply with the maximum seepage rate of 1/16 cubic inch per square inch per day? (327 IAC 19-12-5)	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no, provide an explanation.

2. Does the pond or lagoon have a flexible membrane liner or modified soil liner that complies with the appropriate specification identified in 327 IAC 19-12-5(b) (1) (2) or (3)?	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

K. DESIGN REQUIREMENTS FOR MANURE STORAGE TANKS CHECKLIST

Note: Underground steel storage tanks are prohibited.

Does the plastic or fiberglass tank and/or above ground steel tank comply with the requirements in 327 IAC 19-12-4(k)?	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no, provide an explanation.

L. DESIGN REQUIREMENTS FOR ALL NEW EARTHEN WASTE TREATMENT LAGOONS CHECKLIST

Does the earthen waste treatment lagoon comply with the design requirements with NRCS Code 359 (September 2005)? <i>(Note this standard only used for treatment lagoons that are multi-stage by definition and purpose of the CPS 359 standard.)</i> (327 IAC 19-12-4(f))	Yes	No	N/A
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If no, provide an explanation and provide an ACA.

M. DESIGN REQUIREMENTS FOR ALL NEW SOLID MANURE STORAGE FACILITIES CHECKLIST

1.	An earthen floor without a liner may be used if the following requirements are satisfied:	Yes	No	N/A
	a) Is the earthen floor at least five (5) feet above any sand or gravel soils?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b) Is the seasonal high water table at least five (5) feet below the bottom of the floor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. If no, will a perimeter drain be constructed to lower the water table five (5) feet below the bottom of the floor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c) Will the earthen floor be compacted using a sheepsfoot roller, a rubber tire roller or a loaded earthmover following the compaction specifications identified in the NRCS Construction Specification Earth fill, available at: http://www.nrcs.usda.gov/Internet/FSE_DOCUMENTS/nrcs144p2_030847.pdf ?	Yes	No	N/A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Will the solid manure storage facility be constructed with either a liner or a five (5) inch thick concrete slab/floor if the storage facility is located in a karst terrain or prohibited soil type (327 IAC 19-12-4(g))?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, provide an explanation.				
3.	Will run-on and precipitation be diverted away from the solid manure storage facility? <i>If no, the solid manure storage facility must include a method to collect and manage the contaminated run-off.</i>	Yes	No	N/A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Does the structure have a roof? <i>If no, the solid manure storage facility must include a method to collect and manage the contaminated run-off.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Is the structure at least two (2) feet above bedrock? <i>If no, the solid manure storage facility must be constructed with either a liner as described in Part J of this checklist or a five (5) inch thick concrete slab/floor.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: Additional design requirements for solid manure storage facilities may be found in the “Design and Construction Requirements & Site Restrictions for New Waste Management System” section of the Guidance Manual for Indiana’s Confined Feeding Program.

N. DESIGN REQUIREMENTS FOR ALL OTHER WASTE MANAGEMENT SYSTEMS CHECKLIST

Waste management systems not listed in 327 IAC 19-12-4 must be designed and constructed in accordance with IC 13-18-10-4(b).

	If the waste management system is not listed in 327 IAC 19-12-4, is it designed under IC 13-18-10-4(b)?	Yes	No	N/A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, provide an explanation.				

O. DESIGN REQUIREMENTS FOR ALL PIPELINES CHECKLIST

	Will the pipeline be constructed complying with NRCS Code 634 (October 2015)? (327 IAC 19-12-4(i))	Yes	No	N/A
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, provide an explanation.				

P. VEGETATIVE MANAGEMENT SYSTEMS CHECKLIST

	Yes	No	N/A
Does the vegetative management system comply with NRCS Code 635 (October 2008)? (327 IAC 19-12-4(l))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, provide an explanation.			

Q. CONSTRUCTED WETLANDS CHECKLIST

	Yes	No	N/A
Does the constructed wetland comply with NRCS Code 656 (November 2012)? (327 IAC 19-12-4(m))	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, provide an explanation.			

R. DESIGN REQUIREMENTS FOR PERIMETER DRAINS CHECKLIST

	Yes	No	N/A
Does the perimeter drain system comply with the requirements of 327 IAC 19-12-2(a)(5), 327 IAC 19-12-4(n) and (o) including elevations and size requirements of the drain and pump if applicable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, provide an explanation.			

S. ALTERNATE DESIGN CHECKLIST

	Yes	No	N/A
1. Is an alternative design, compliance approach or innovative technology, complying with the requirements of 327 IAC 19-5-1 proposed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) If yes, does it include calculations with adequate justification for the alternative design/compliance approach?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remainder of page left intentionally blank



CFO / CAFO APPLICATION PACKET SECTION IX - Manure Management Plan (MMP)

Part of State Form 55051 (R5 / 10-22)
Confined Feeding Operation (CFO)
National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
Confined Feeding Section
Office of Land Quality
100 North Senate Avenue
IGCN Rm 1101
Indianapolis, Indiana 46204
(800) 451-6027 request CFO Permits

INSTRUCTIONS: *This Section is completed for ALL application types except NPDES applications. The below required information supplements the general information and plot maps attachments for a complete CFO Approval Renewal application or construction application. CFO Approval Renewal applications and construction applications for expansions at currently regulated operations may also utilize the Marketing and Distribution of Manure attachment, if appropriate. Complete all portions of the form below. This form is required and supersedes all previous versions. IDEM will not accept substitutes, altered, or previously supplied forms.*

A. MANURE MANAGEMENT PLAN

1. Manure Testing

Consult Purdue University Cooperative Extension Service Publications AY-277, ID-101, ID-205 "Swine Manure Management Planning", ID-206 "Poultry Manure Management Planning", ID-208 "Dairy Manure Management Planning" for guidance on procedures for manure testing.

a) Manure Sample Collection Procedures:

b) Nutrient Assessment:

Private laboratory does a nutrient analysis of sample(s).

Other (explain): _____

c) Sampling Frequency:

Minimum of once every year for CFOs.

Annual sampling required for CAFOs with a NPDES permit.

2. Soil Testing

You can consult Purdue University, Cooperative Extension Service Publication AY-368-W for guidance on procedures for soil testing. A soil test must provide sufficient information about soil fertility to allow for nutrient recommendations for existing or planned crops. Soil tests may not represent more than twenty (20) acres per sample.

a) Do, or will, you perform soil testing for this operation?

Yes, all or a portion of manure is, or will be, applied to land controlled by the operator (complete b), c), and d) below).

No, 100 % of manure is, or will be, either marketed or distributed (stop here - b), c), and d) below do not need to be completed).

b) Sample Collection Method:

Management unit (field level)

Grid method

By soil type

Other (explain): _____

c) Nutrient Assessment:

Private laboratory does nutrient analysis.

Other (explain): _____

d) Sampling Frequency:

Minimum of once every four (4) years for all CFOs (sampling may be done more often).

B. SPRAY IRRIGATION

- 1. Does the operation currently, or propose to, apply manure by spray irrigation?
 Yes No
- 2. If yes, is the spray irrigation in a flood plain?
 Yes No
- 3. CAFOs with NPDES permits must conduct spray irrigation in a flood plain in accordance with the NPDES CAFO individual permit rule for the operation, as applicable.
- 4. CFOs may only conduct spray irrigation in a flood plain in accordance with a spray irrigation plan approved by IDEM. (327 IAC 19-14-5(d))

C. SURFACE APPLICATION OF MANURE TO FROZEN OR SNOW-COVERED GROUND

- 1. CFOs which are not large CAFO-sized farms and have 120 days or less of approved storage capacity may request approval to surface apply manure to frozen or snow-covered ground based on a case-by-case authorization from the commissioner per 327 IAC 19-14-4(i).
Have you included additional information to obtain or renew a commissioner's authorization?
(You must attach State Form 55162 (R2 / 3-16) to be considered for this exemption.)
 Yes No
- 2. CAFOs with a NPDES permit and CFOs (not CAFO-sized) with 180 days of approved storage can request approval for surface application of manure to frozen or snow-covered ground under the provisions of 327 IAC 19-5-1 as an Alternate Design or Compliance Approach which meets the performance standards of 327 IAC 19-3-1.
Does the operation plan to submit a request for approval of an Alternate Design or Compliance Approach?
 Yes No
- 3. CFOs, which are not large CAFO-sized farms, may request approval to surface apply manure to frozen or snow-covered ground resulting from an unforeseen emergency condition per 327 IAC 19-14-4(g-h). Improper design or management of manure storage facilities will not qualify as an emergency condition.

**D. CFO APPROVAL RENEWAL INFORMATION
(THIS SECTION IS ONLY FOR CFO APPROVAL RENEWAL APPLICATIONS.)**

- 1. Farm ID Number: _____
- 2. Total number of approved confinement barns currently present at operation: _____
- 3. Total number of open confinement lots (earthen or concrete) currently present at operation (include calf hutch areas here): _____
- 4. Total **approved** capacity of animals which can be confined at operation: _____
- 5. Are earthen lagoon(s) or pit(s) currently present at operation? Yes No
- 6. Separate from confinement barn(s), are any concrete or metal tanks currently present at operation? Yes No
- 7. Separate from confinement barn(s), are any solid manure storage building (litter stack, barn, etc.) currently present at operation? Yes No
- 8. Since the last renewal, have any confinement barns been closed? If yes, detail in 11. below which barn(s) and the animal number(s) housed within. Yes No
- 9. Since the last renewal, have any lagoon(s), pit(s), or tank(s) been closed? If yes, detail in 11. below which structure(s). Yes No
- 10. Do you have any buildings that have been approved for Frozen or Snow Covered ground spreading? If Yes, list the barns from your Facility Detail Sheet that are approved (include State Form 55162 with this application): Yes No
- 11. Detail any changes in manure storage capacity or animal capacity (number/species/type) at the operation that have been made since the time of the last CFO approval/renewal.



CFO / CAFO APPLICATION PACKET

SECTION X - Plot Maps

Part of State Form 55051 (R5 / 10-22)
Confined Feeding Operation (CFO)
National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
Confined Feeding Section
Office of Land Quality
100 North Senate Avenue
IGCN Rm 1101
Indianapolis, Indiana 46204
(800) 451-6027 request CFO Permits

INSTRUCTIONS:

THIS SECTION IS COMPLETED FOR ALL APPLICATION TYPES. Plot maps must be submitted with applications as directed in the "Application Types and Requirements Worksheet." The specific plot maps, which must be submitted for each application type, are detailed in Section A. and Section E. The submitted plots must conform with the application requirements noted in Section B., Section C., and Section D. This form is required and supersedes all previous versions. IDEM will not accept substitutes, altered, or previously supplied forms.

A. PLOT MAPS

Listed below are plot maps required to be submitted with CFO and CAFO applications. **Please note** each plot map type is labeled (1, 2, and 3). Based on the application type previously determined in the "Application Type and Requirements Worksheet" and noted on the "General Information" form, locate the application type in Section E. below. The columns to the right of each listed application type note the required plot maps, as labeled here. As directed in Section A. above, based on the application type determined in the "Application Type and Requirements Worksheet" and noted on the "General Information" form, locate the application type below. The columns to the right of each listed application type note the required plot maps, as labeled in Section A., which are required to be submitted.

1. USDA NRCS Soil Survey Map – The boundaries of all manure application areas.
2. USDA NRCS Soil Survey Map – The location of the waste management system, boundaries of the confined feeding operation, and boundaries of livestock and poultry production areas.
3. USGS Topographic Map – The location of the waste management system, the boundaries of the confined feeding operation, boundaries of livestock and poultry production areas, identify any public water supply wells and public water supply surface intake structures within one thousand (1,000) feet of the manure storage structures, and boundaries of all manure application areas.

B. TOTAL AVAILABLE ACREAGE FOR LAND APPLICATION

1. Considering setbacks, which must be subtracted from the total acres, and any and all other limitations, what is total acreage available for land application? _____
2. On all plot maps submitted showing the boundaries of land application areas, note the total available acreage for land application in each separate area considering the applicable setbacks for land application method and slope.

C. MARKETING AND DISTRIBUTION

For operations utilizing marketing and distribution of manure, refer to Section VIII, "Marketing and Distribution of Manure", contained within this application packet. Review the directions in this section carefully for information regarding when a marketing and distribution waiver may be used. If you meet the requirements for Marketing and Distribution of your manure then no manure application area plot maps would be required. Manure Storage Structure location maps would still be required.

D. LAND USE AGREEMENTS

Any acreage identified as part of the minimum required acreage for the application of manure that is not owned by the Applicant of the operation must be documented in the operating record via land use agreements.

1. Copies of all land use agreements must accompany construction applications (application types A-D, H-K, and L).
2. If a land use agreement submitted in item 1. above has expired, new land use agreements must be submitted with a renewal.
3. The land use agreements must be signed by the property owners on whose property the manure will be applied.
4. Plot maps accompanying construction applications must have the property owner clearly labeled for each land application area submitted.

E. APPLICATION TYPE AND REQUIRED PLOT MAPS

As directed in Section A. above, based on the application type determined in the “Application Type and Requirements Worksheet” and noted on the “General Information” form, locate the application type below. The columns to the right of each listed application type note the required plot maps, as labeled in Section A., which are required to be submitted.

Application Type	Required Plot Maps <i>(as labeled in Section A.)</i>		
	1	2	3
CFO Approval – Construction and/or Operation (Including Renewals)			
1. Completely New Operation (Currently Undeveloped Site)	Yes	Yes	Yes
2. Existing Operation Without Existing CFO Approval			
3. Existing Operation with Expired CFO Approval			
4. Expansion of Operation with Current CFO Approval			
5. Amendment of Existing CFO Approval – Permit Condition		No	No
6. Amendment of Existing CFO Approval – Change in the type or number of animals that increases manure production			
7. CFO Approval Renewal/Manure Management Plan		Yes	
NPDES CAFO Individual Permit – Construction and Permit Coverage			
8. Completely New Operation (Currently Undeveloped Site)	Yes	Yes	Yes
9. Existing Operation without Current CFO Approval or NPDES Permit			
10. Existing Operation with Current CFO Approval			
11. Current NPDES CAFO Individual Permit Holder Proposing Construction			
NPDES CAFO Individual Permit - Permit Modification			
12. Construction or Expansion of Storage or Animals – No Permit Extension	Yes	Yes	Yes
13. No Construction or Expansion of Storage or Animals – No Permit Extension			No
NPDES CAFO Individual Permit – Renewal			
14. Renewal Coverage for Operation with Current NPDES CAFO Individual Permit	Yes	Yes	No



CFO / CAFO APPLICATION PACKET
SECTION XI - Disclosure Review

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
 Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: *Indiana's Confined Feeding Control Law requires disclosure statements regarding certain alleged material violations of environmental laws with all applications which propose construction of a confined feeding operation or expansion of a confined feeding operation that increases animal capacity or manure storage capacity, or both. (See IC 13-18-10-1.4; IC 13-18-10-2.1; IC 13-11-2-8(a); IC 13-11-2-158(b); and IC 13-11-2-191 to review the laws that apply to this form.)*

*Section A of this form helps applicants identify responsible parties associated with their application.
 Section B identifies any out-of-state CFOs/CAFOs owned/operated by each responsible party.
 Section C helps applicants determine whether each responsible party must submit a disclosure statement.
 Section D helps each responsible party submit a complete disclosure statement.*

*Follow the instructions in each section of this form. **IDEM will not accept substitutes, altered, or previously supplied forms.***

Applicant Information:

An applicant may be an individual, a partnership, a co-partnership, a firm, a company, a corporation, an association, a joint stock company, a trust, an estate, a political subdivision, a state agency, or other legal entity, or their legal representative, agent, or assigns. (See IC 13-11-2-8 and IC 13-11-2-158). The applicant(s) listed on this form must match the applicant(s) listed on the first page of the application packet.

Applicant(s):		Farm ID Number	
Contact Person:		<i>(Provide Farm ID number if expanding an existing operation.)</i>	
Business Address:		Telephone:	
City:	State:	ZIP Code:	

Section A. List of Responsible Parties:

List each responsible party associated with the application.

If required under IC 13-18-10-1.4(a) and (b), a disclosure statement must be completed for each responsible party. A Responsible Party is defined under IC 13-11-2-191(a) as: (1) the applicant; and (2) an officer, corporation director, or a senior management official of any of the following that is an applicant: a corporation, a partnership, a limited liability company, or a business association.

The applicant(s) may have multiple responsible parties. Attach additional sheets as necessary.

Responsible Party 1

Name:		Telephone:	
Business Address:		Telephone:	
City:	State:	ZIP Code:	
Relationship to Applicant:	APPLICANT		

Responsible Party 2

Name:		Telephone:	
Business Address:		Telephone:	
City:	State:	ZIP Code:	
Relationship to Applicant:			

Responsible Party 3

Name:		Telephone:	
Business Address:		Telephone:	
City:	State:	ZIP Code:	
Relationship to Applicant:			

Section A. List of Responsible Parties (Continued):

Responsible Party 4

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 5

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 6

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 7

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 8

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 9

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 10

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Responsible Party 11

Name:					
Business Address:				Telephone:	
City:		State:		ZIP Code:	
Relationship to Applicant:					

Section B. Out-of-State CFOs/CAFOs:

Have any of the responsible parties from Section A ever owned or operated a CFO/CAFO outside of Indiana?

Yes

No

If Yes, list the names and locations (state or country) of all CFOs/CAFOs that any of the responsible parties from Section A owned or operated outside of Indiana:

Section C. Determining responsible parties who must provide a disclosure statement:

Indiana’s Confined Feeding Control Law requires a Disclosure Statement for alleged violations of environmental law that meet the criteria noted in IC 13-18-10-1.4(a) & (b). This section helps applicants determine whether the responsible parties have violations that meet these criteria.

You may group responsible parties who have identical responses to the questions in this section by listing multiple names or responsible party numbers in the space provided. Provide additional copies of this page as needed to complete this section for all responsible parties listed in Section A.

Responsible Party Name(s) or Number(s)
from Section A (*type or print*) _____

Note: This section applies to material violations alleged in any state of the United States and in any other country.

1. Answer both questions a) and b) below:
- a) Have any state or federal officials at **any time** alleged that the responsible party or parties committed acts or omissions that constitute a material violation of state or federal environmental law?
 Yes **No**
 - b) Have foreign officials at any time alleged that the responsible party or parties committed acts or omissions that constituted a material violation of foreign environmental law and that would have constituted a material violation of state or federal environmental law if the act or omission had occurred in the United States?
 Yes **No**

If the answer to both questions is “No,” a disclosure statement is not required. Skip to item 4 below.

2. Indiana’s Confined Feeding Control Law requires the responsible party or parties to submit the disclosure statement required by IC 13-18-10-1.4(c) only if the alleged acts or omissions acknowledged by a “Yes” answer to questions 1 a) or 1 b) above presented a substantial endangerment to human health or the environment.
- If the alleged acts or omissions presented a substantial endangerment to human health or the environment, skip to Section D to prepare and submit the disclosure statement.
- Otherwise, proceed to item 3 on this page.

3. If the alleged acts or omissions acknowledged by a “Yes” answer to questions 1. a) or 1. b) above **did not** present a substantial endangerment to human health or the environment, the responsible party or parties do not have to submit a disclosure statement in Section D. However, consistent with IDEM’s authority to conduct an inquiry or investigation under IC 13-18-10-2.1(a)(2), the responsible party or parties **must** attach the following information:
- a) The name and address of the government entity that alleged the acts or omissions.
 - b) The information relied upon in determining that the alleged acts or omissions did not present a substantial endangerment to human health or the environment. This information should include any Agreed Orders or other similar resolutions. Provide the name and qualifications of the person(s) who made the determination.
- Please note that this information is not the same as the full information required for a disclosure statement (see Section D). The information required here might overlap with some of the information required for a disclosure statement, but this Section C requirement is not intended to seek as much detail as a disclosure statement.

Proceed to item 4 on this page.

4. If directed here by items 1 or 3, the responsible party or parties listed on this page are not required to complete Section D, the disclosure statement required by IC 13-18-10-1.4(c). The applicant or responsible party must attach the information required in item 3, if applicable, and sign and date below. Their disclosure submittal is complete.

Per IC 13-18-10-2.1(e) (1) (A), the commissioner may deny an application if a responsible party intentionally misrepresents or conceals any material fact in an application for approval under IC 13-18-10.

I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, IC 13-18-10-1.4, IC 13-18-10-2.2, and IC 13-15-7-1(3), that the statements and representations in this application and the accompanying forms and application materials are true, accurate, and complete.

Applicant or

Responsible Party Signature: _____ Date Signed: _____

Printed Name: _____

(month, day, year)

Section D. Disclosure Statement - Instructions:

Responsible parties directed here from Section C must complete and submit the disclosure statement on the next page to meet the requirements of Indiana's Confined Feeding Control Law. (See IC 13-18-10-1.4(c)).

Attach additional copies of the disclosure statement page as necessary. Label each attachment with the name of the responsible party.

The Confined Feeding Control Law directs IDEM to consider the following factors when reviewing disclosure statements and deciding whether to approve or deny the application (See IC 13-18-10-2.1(f)):

1. The nature and details of the acts attributed to the responsible party
2. The degree of culpability of the responsible party
3. The responsible party's cooperation with the state, federal, or foreign agencies
4. The responsible party's dissociation from any other persons or entities convicted in a criminal enforcement action
5. Prior or subsequent self-policing or internal education programs established by the responsible party to prevent acts, omissions, or violations

For items 4 through 8 on the next page, the responsible party must include information in the description of the enforcement action that is relevant to these factors for IDEM to consider in reviewing the disclosure.

Section D. Disclosure Statement:

1. Name (type or print): _____

(Name of Responsible Party providing this Disclosure Statement)

2. Business Address: _____

City: _____ State: _____ ZIP Code: _____

3. A description of the responsible party's experience in managing the environmental aspects of the type of facility that will be managed under the permit. Include the name and business address for employers, the State Permit number for the facility, the type of work experience and the length of time employed.

Not Applicable Description Provided

4. A description of all pending administrative, civil, or criminal enforcement actions filed in the United States against the responsible party alleging any acts or omissions that: constitute a material violation of state or federal environmental law; and present a substantial endangerment to human health or the environment.

Not Applicable Description Provided (Including the five (5) factors described in the instructions.)

5. A description of all pending administrative, civil, or criminal enforcement actions filed in a foreign country against the responsible party alleging any acts or omissions that: constitute a material violation of foreign environmental law; would have constituted a material violation of state or federal environmental law if the act or omission on which the action is based had occurred in the United States; and present a substantial endangerment to human health or the environment.

Not Applicable Description Provided (Including the five (5) factors described in the instructions.)

6. A description of all finally adjudicated or settled administrative, civil, or criminal enforcement actions in the United States resolved against the responsible party within the five (5) years that immediately precede the date of the application involving acts or omissions that: constitute a material violation of federal or state environmental law; and present a substantial endangerment to human health or the environment.

Not Applicable Description Provided (Including the five (5) factors described in the instructions.)

7. A description of all finally adjudicated or settled administrative, civil, or criminal enforcement actions in a foreign country resolved against the responsible party within the five (5) years that immediately precede the date of the application involving acts or omissions that: constitute a material violation of foreign environmental law; would have constituted a material violation of state or federal environmental law if the act or omission on which the action is based had occurred in the United States; and present a substantial endangerment to human health or the environment.

Not Applicable Description Provided (Including the five (5) factors described in the instructions.)

8. Identification of all state, federal, or foreign environmental permit applied for by the responsible party that were denied or previously held by the responsible party that were revoked.

Not Applicable Description Provided

9. This disclosure statement must be executed under oath or affirmation and is subject to perjury under IC 35-44-2-1.

Per IC 13-18-10-2.1(e) (1) (B), the commissioner may deny an application if a responsible party intentionally misrepresents or conceals any material fact in a disclosure statement.

I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, IC 13-18-10-1.4, IC 13-18-10-2.2, and IC 13-15-7-1(3), that the statements and representations in this application and the accompanying forms and application materials are true, accurate, and complete.

Responsible Party Signature: _____ Date Signed: _____

(month, day, year)

Printed Name: _____

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CFO / CAFO APPLICATION PACKET
SECTION XII - Notification Requirements

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
 Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: *THIS SECTION MUST BE FILLED OUT AND MAILINGS MADE TO ALL LISTED PARTIES BY THE APPLICANT FOR APPLICATION TYPES A, B, C, D, AND H THRU N. THIS MUST BE FILLED OUT FOR APPLICATION TYPES E AND F BUT A MAILING DOES NOT HAVE TO BE MADE BY THE APPLICANT. Indiana law requires you to notify certain people of your application submission. Complete Section A to determine what notice requirements apply to your application, if any. Complete the applicable portions of Section B and C as instructed. This form is required and supersedes all previous versions. IDEM will not accept substitutes, altered or previously supplied forms. It is recommended (not required) that you get a certificate of mailing from your local USPS for this mailing.*

A. NOTIFICATION REQUIREMENTS

1. Answer all four questions below. If an action is listed to the right of your answer, complete the section(s) listed. If none of your answers require an action, then no notice is required and the form is complete. If further action is required, read Section 2. and Section 3. below regarding proper notice requirements, materials, and certification.

a).	Does the application propose construction of a new confined feeding operation (CFO) or an expansion through construction of an existing CFO?
<input type="checkbox"/> Yes	<p style="text-align: center;">Complete</p> <p>Section B.1. County Executive / County Commissioner List Section B.2. One-Half (1/2) Mile List Section B.3. Adjoining Land Owner List Section B.4. Potentially Affected Parties List</p>
<input type="checkbox"/> No	
b).	Is the application for an amendment to the CFO approval? For example, does the application propose a change to a permit condition or a change in the type or number of animals that does not involve construction but that will increase manure production or manure containment requirements.
<input type="checkbox"/> Yes	<p style="text-align: center;">Complete</p> <p>Section B.1. County Executive / County Commissioner List Section B.3. Adjoining Land Owner List</p> <p style="font-size: small;"><i>Note: Send this information to IDEM. IDEM will use this information to notify county officials and adjoining land owners of the decision on the amendment. You do not have to notify county officials or adjoining land owners of your application as noted in Section 2. below, but you may choose to do so at your option.</i></p>
<input type="checkbox"/> No	
c).	Does the operation have a current CFO approval?
<input type="checkbox"/> Yes	Notification is not required if application is an Approval Renewal/MMP.
<input type="checkbox"/> No	<p style="text-align: center;">Complete</p> <p>Section B.1. County Executive / County Commissioner List Section B.2. One-Half (1/2) Mile List Section B.3. Adjoining Land Owner List Section B.4. Potentially Affected Parties List</p>
d).	Is the application for a NPDES CAFO Individual permit coverage, construction, modification, or renewal?
<input type="checkbox"/> Yes	<p style="text-align: center;">Complete</p> <p>Section B.1. County Executive / County Commissioner List Section B.3. Adjoining Land Owner List Section B.4. Potentially Affected Parties List</p>
<input type="checkbox"/> No	

2. The *Notification of Application Submittal* form provided in this packet or an equivalent letter or notice that you develop must:

- a) Be provided, not more than ten (10) working days **after** submitting an application, to all individuals listed in Sections B. and C. as directed in Section A. 1.a). A.1. c). or A.1.d). above;
- b) Be sent by mail;
- c) Be in writing;
- d) Include the date on which the application was submitted to IDEM;
- e) Include a brief description of the application, such as permit type, location, animal type(s), animal numbers, numbers and types of barns and storage structures, and methods of manure application; and
- f) Be paid for by you, the applicant.

3. If notification of application submittal is required, you must certify to IDEM the notice was completed in compliance with the requirements of Section 2. listed above. The certification must be included with your application and must contain:

- a) The enclosed *Notification Affidavit* which is completed, signed, and notarized;
- b) The lists generated as directed by all four answers provided in Section A.1.; and
- c) A copy of the notice described Section 2. above.

B. PARTIES NOTIFIED BY APPLICANT

1. County Executive / County Commissioner List
Required when applicable by IC 13-18-10-2(b)(1) and 327 IAC 19-8-7(a)(1)

To complete this section, list the county executive/county commissioners for the county in which the confined feeding operation is to be located or expanded. Attach additional sheets as necessary.

a)	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
b)	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
c)	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
d)	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
e)	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
f)	Name					
	Mailing address (number and street)					
	City		State		ZIP code	

2. One-Half (1/2) Mile List
Required when applicable by IC 13-18-10-2(b)(2) and 327 IAC 19-8-7(a)(2)

To complete this section, you must, to the best of your ability, list all known persons described below:

- a) Each owner and each occupant of land of which any part of the boundary is one-half (1/2) mile or less from any part of the proposed footprint of either a livestock or poultry production structure, a permanent manure storage structure, or both, on the land on which the confined feeding operation is to be located; and
- b) Each owner and each occupant of land of which any part of the boundary is one-half (1/2) mile or less from any part of the proposed footprint of either a livestock or poultry production structure, the expanded area of a livestock or poultry production structure, or both, on the land on which the confined feeding operation is to be expanded.

Attach additional sheets as necessary.

1.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
2.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	

B. PARTIES NOTIFIED BY APPLICANT (Continued)						
2. One-Half (1/2) Mile List (Continued)						
3.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
4.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
5.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
6.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
7.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
8.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
9.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
10.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
11.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
12.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
13.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
14.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	

B. PARTIES NOTIFIED BY APPLICANT (Continued)

3. Adjoining Land Owner List
Required when applicable by 327 IAC 15-16-5(a)(4) and 327 IAC 19-7-1(c)(8)

This section may solicit individuals listed in Section B.2. above. It is not necessary to list previously listed individuals more than once. This section is for adjoining property owners to the operation that are outside of the one-half (1/2) mile distance listed above and who were not listed in Section 2. To complete this section, you must, to the best of your ability, list all known persons described below if not already provided in Section 2. above:

- a) Each person who owns land that adjoins the land on which the confined feeding operation is to be located; or
- b) If a person who owns land that adjoins the land on which the confined feeding operation is to be located does not occupy the land, all occupants of the land.

Attach additional sheets as necessary.

All adjoining land owners and occupants are included in the One-Half (1/2) Mile List. Therefore, this list is blank.

1.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
2.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
3.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
4.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
5.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
6.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
7.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
8.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
9.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	
10.	Name					
	Mailing address (number and street)					
	City		State		ZIP code	

C. POTENTIALLY AFFECTED PARTIES

Potentially affected parties required when applicable by 327 IAC 19-7-1(c)(8) and 327 IAC 5-3-12 (NPDES).

This section is for additional potentially affected parties you, the applicant, identify which are not required to be listed in Section B.2. It is not necessary to list individuals already included in Section B.2. Attach additional sheets as necessary.

Potentially affected parties are included in the lists in Section B. Therefore, this list is blank.

1.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
2.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
3.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
4.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
5.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
6.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
7.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
8.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
9.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	
10.	Name					
	Mailing address (<i>number and street</i>)					
	City		State		ZIP code	

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CFO / CAFO APPLICATION PACKET
Notification of Application Submittal

Part of State Form 55051 (R5 / 10-22)
Confined Feeding Operation (CFO)
National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
Confined Feeding Section
Office of Land Quality
100 North Senate Avenue
IGCN Rm 1101
Indianapolis, Indiana 46204
(800) 451-6027 request CFO Permits

An application has been submitted to the Indiana Department of Environmental Management (IDEM) for the Confined Feeding Operation (CFO) or Concentrated Animal Feeding Operation (CAFO) that is described below. Indiana law requires an applicant for a CFO or CAFO approval to notify certain people of an application. See IC 13-18-10-2(b) and 327 IAC 19-7-1. This notice has been sent to you by the applicant to satisfy the notice requirement. Please review the information below to learn how to get more information or submit comments about this application. IDEM will notify you of the final decision on the application.

Applicant / Operation name _____

Date application submitted (required) _____
(month, day, year)

Operation permit type (applicable regulations)

- CFO Approval (IC 13-18-10 and 327 IAC 19)
- NPDES CAFO Individual Permit (IC 13-18-10 and 327 IAC 15-16)

Operation Location

Nearest crossroads / address _____

Nearest city / town _____

County _____

Political township _____

USGS Section/Township/Range _____

Brief description of application

(Should include animal type(s), animal numbers, numbers and types of barns and storage structures, and methods of manure application.)

Questions regarding the location or other aspects of the application should be addressed to

Applicant's name _____

Address (number and street) _____

City / State / ZIP code _____

Telephone number _____

If the application meets the requirements in IC 13-18-10, 327 IAC 15-16, and 327 IAC 19, IDEM will approve the application. You may view these laws and regulations on the iga.IN.gov website.

IDEM will accept written public comments for at least thirty-three (33) days following the date the applicant mailed this notice. You can send comments on the application to the address listed at the top of this sheet. You can contact IDEM's Confined Feeding Program staff at (800) 451-6027, ask for Confined Feeding Permits, or (317) 232-4473.

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CFO / CAFO APPLICATION PACKET
Notification Affidavit

Part of State Form 55051 (R5 / 10-22)
Confined Feeding Operation (CFO)
National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
Confined Feeding Section
Office of Land Quality
100 North Senate Avenue
IGCN Rm 1101
Indianapolis, Indiana 46204
(800) 451-6027 request CFO Permits

INSTRUCTIONS: *If a notice is required as directed in Section A.1. in Section XII, the Notification Requirements form, the applicant must submit an affidavit to IDEM that certifies the notice requirements listed in Section 2. on the Notification Requirements form were completed. The certification to IDEM must contain this completed Notification Affidavit. This affidavit is required and supersedes all previous versions. IDEM will not accept substitutes, altered, or previously supplied affidavits.*

_____, being first duly sworn under oath, deposes and says:

- I live in _____ County, Indiana, and being of sound mind and over Twenty-one (21) years of age I am competent to give this affidavit.
- I hold the position of _____ for _____
(Title of Affiant) (Name of Applicant or Operation)
- I warrant that I have the authority to sign this affidavit on my own behalf, and on behalf of any entity for which I am signing in a representative capacity.
- As required by IC 13-18-10-2(b), 327 IAC 19-7-1 when applicable, the applicant will mail written notice to all required persons detailed on the Notification Requirements form not more than ten (10) days after submission of the accompanying application on behalf of _____
(Name of Applicant or Operation)
- The written notice mailed to all required persons will include a brief description of the application, such as permit type, location, animal type(s), animal numbers, numbers and types of barns and storage structures, and methods of manure application.

Further Affiant Saith Not.

I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, IC 13-18-10-1.4, IC 13-18-10-2.2, and IC 13-15-7-1(3), that the statements and representations in this application and the accompanying forms and application materials are true, accurate, and complete.

Applicant signature _____

Date signed (mm, dd, yy) _____

State of _____ County of _____

Before me, the undersigned, a Notary Public in and for said County and State, personally

appeared _____ known by me to be the person who executed the foregoing instrument, signed the same and acknowledged to me that he/she did so sign the same, and that his/her free act and deed and that the statements made in the foregoing instrument are true.

IN WITNESS WHEREOF, I have set my hand and official seal this _____ day of _____, 20 _____.

Signature _____

Printed _____

My commission expires (month, day, year) _____

Residence of _____ County, _____.

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CFO / CAFO APPLICATION PACKET
SECTION XIII - Marketing and Distribution of Manure

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation (NPDES CAFO)
 Approved by State Board of Accounts, 2022

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: *This sheet describes the documentation that must be submitted to IDEM with the Certification of Required Acreage for Land Application form when using the marketing and distribution waiver option in Section III of that form.*

A. MARKETING AND DISTRIBUTION OF MANURE

IDEM considers manure marketing and distribution as an acceptable manure management procedure. Both new and existing operations are eligible to request an acreage waiver for marketing and distribution of manure. IDEM will allow for credits of up to one hundred percent (100%) of manure generated to be given for operations with three (3) years historical data and marketing and distribution records. Proportionately, credit will be given on the required amount of land application acreage supplied in the Plot Maps attachment. In addition, new and existing operations can provide contracts for the entire approval term for marketing and distributing a percentage, up to 100%, of the projected amount of manure produced at the facility.

B. REQUIRED DOCUMENTATION FOR MARKETING AND DISTRIBUTION WAIVER

To justify the waiver, the documentation provided to IDEM must:

1. Be from the previous three (3) years for the facility.
2. Include the following details which are captured on the IDEM provided CFO Marketing or Distribution of Manure Information (State Form 56029). This form may be found at:
<https://forms.in.gov/Download.aspx?id=12766>
 - a) The name(s) of each party who received manure.
 - b) The date(s) manure transferred to each party.
 - c) The amount(s) of manure transferred to each party.
 - d) Information regarding manure nutrient values.
 - e) The list of land application restrictions that was provided to each party receiving manure.
3. Copies of individual completed CFO Marketing or Distribution of Manure Information Sheets, along with, an overall facility synopsis may be submitted. Attach any and all sheets to this form. OR,
4. Include contracts for the entire approval term for marketing the projected amount of manure produced at the facility.

C. MARKETING AND DISTRIBUTION CALCULATION EXAMPLES

The examples below detail calculations for determining required land application acreage to be submitted with the Plot Maps attachment.

Using the conversions for manure and acreage requirements on page 52 in the CFO Guidance Manual, a CFO with 30,000 broilers would need 41.7 acres (30,000 chickens/720 chickens per acre) of land available for manure application. The chickens would produce 38,325 cu.ft. /yr. of manure (30,000(0.0035/day x 365 days)) according to page 38, Table 1 in the CFO Guidance Manual.

1. If 100% of the manure generated is marketed and distributed, you are not required to provide soil survey maps to show that land application acreage is available for manure spreading.
2. If 60% of the manure generated is marketed and distributed, you must provide soil survey maps to show at least 40% of the required land application acreage for your operation is available for manure spreading. In this example, 40% of 41.7 acres is 16.7 acres (41.7 x .40 = 16.7).

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**CFO / CAFO APPLICATION PACKET
SECTION XIV - Certification of Required
Acreage for Land Application**

Part of State Form 55051 (R5 / 10-22)
 Confined Feeding Operation (CFO)
 National Pollutant Discharge Elimination System Concentrated Animal Feeding Operation
 (NPDES CAFO)
 Approved by State Board of Accounts, 2022

**INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT**
 Confined Feeding Section
 Office of Land Quality
 100 North Senate Avenue
 IGCN Rm 1101
 Indianapolis, Indiana 46204
 (800) 451-6027 request CFO Permits

INSTRUCTIONS: *THIS SECTION SHOULD ONLY BE FILLED OUT FOR APPLICATION TYPE D. Under 327 IAC 19-7-1(d), the owner/operator of an existing CFO that is expanding must certify the minimum number of acres is available for land application of manure generated at the CFO. The minimum acreage must be calculated based on nitrogen and phosphorus limitations as applicable (See 327 IAC 19-14-3). This form also allows marketing or distribution records to document a reduction in required acreage.*

A. APPLICANT INFORMATION

Name:		Farm ID Number:	
Mailing Address:			
City:			
State:		ZIP Code:	
Telephone:			
Operation County:			

B. CERTIFICATION

"I swear or affirm, as owner or operator, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10 and IC 13-15-7-1(3), that the minimum acreage for manure application is available and was calculated based on the nitrogen and phosphorus limits in 327 IAC 19-14-3 and all setbacks as applicable."

Acres Required:		Acres Available:	
Name (<i>print</i>):		Title:	
Signature:		Date Signed: <i>(month, day, year)</i>	

C. MARKETING AND DISTRIBUTION WAIVER OPTION

If a manure marketing and distribution program is used, IDEM may allow for a waiver of some or all of a facility's total land application acreage requirements based on the submittal of:

1. The marketing and distribution records documented on the CFO Marketing or Distribution of Manure Information form (State Form 56029) from at least the previous three (3) years showing the amount of manure marketed from the facility; or
2. Contracts for the entire approval term for marketing the projected amount of manure produced at the facility.

Refer to the Marketing and Distribution of Manure sheet in this application packet (Section XIII.B.2.) for a detailed description of the documentation required for this waiver.

Percentage of total annual manure generated documented by marketing and distribution records/contracts: <i>(Attach all supporting documentation.)</i>	%
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