

PROFESSIONAL ENGINEER CERTIFICATION CONSTRUCTION OF EARTHEN LIQUID MANURE STORAGE STRUCTURES

State Form 53085 (5-22) Satellite Manure Storage Structure (SMSS)

- 1. Use this form to certify construction of a liquid manure storage structure as required in 327 IAC 20-5-5(e).
- 2. Fill in all information requested COMPLETELY.
- 3. Attach narratives, supporting documentation and testing results identified below in the Construction Details Section.
- 4. This certification form must be completed, signed, dated, and submitted to IDEM within thirty (30) days of completing construction and prior to introduction of any manure.

INDIANA DEPARTMENT OF

ENVIRONMENTAL MANAGEMENT

Confined Feeding Section Office of Land Quality

100 North Senate Avenue

MC 65-45, IGCN 1101

Indianapolis, Indiana 46204 (800) 451-6027 extension 2-4473

- 5. An Indiana registered professional engineer must certify this form.
- 6. Please submit the Completed Construction Affidavit with this certification as required by 327 IAC 20-5-5(e).
- 7. Please send this form to the address listed above.
- 8. Please maintain a copy of these forms in your facility operating record.
- 9. For more information, contact IDEM's Office of Land Quality, Confined Feeding Permits Section, at (317) 232-4473.

| GENERAL FACILITY INFORMATION | | | |
|--|---|--------------------------------|----|
| Facility Name | SMSS Permit Number | | |
| Date of Approval (month, day, year) | | | |
| Permittee Name | | | |
| Location Address (number and street) | Telephone | | |
| City | ZIP Code | | |
| County of Operation | Facility Contact Email | | |
| Location of Operation (nearest crossroads or mailing address) | | | |
| | | | |
| | | | |
| GENERAL CONSTRUCTION INFORMATION | | | |
| Construction Start Date (month, day, year) | Construction Complete Date (month, day, year) | | |
| Name of Contractor (If Applicable) | Telephone Number of Contractor | | |
| Name(s) of Structure(s) (P1, P2, etc.) | I | | |
| CONSTRUCTION DETAILS: The following are the aspects of the earthen structure that must be reviewed by the certifying engineer or his representative for compliance with the approved plans and specifications, and the facility permit. Please attach narratives, supporting documentation and the testing results with this form. | | ls a Narrative Attached? | |
| LAGOON CONSTRUCTION: Please attach a narrative discussing the following construction activities. Does the attachment address the following? If not, provide an explanation of why it is not included or not needed. | | Yes | No |
| a. Earthwork | | | |
| j Describe the excavation, subgrade preparation, keyway and fill placement. Address the following: Was the subgrade prepared as required by the plans and specifications? Was the subgrade free of standing water, ice, or snow? Was the subgrade surface free from mud, dried ground, uncompacted fill and frozen ground? Was the subgrade inspected and approved by the certifying engineer? | | | |

| | Yes | No |
|--|-----|----|
| ii Identify Contractor(s) that performed the work. | | |
| iii Identify construction specifications, construction quality assurance (CQA) requirements and the CQA consultant(s). | | |
| iv Include daily inspection notes, results of CQA tests, map(s) showing testing locations, construction pictures, et cetera. | | |
| V Include PE's opinion that earthwork construction was performed in accordance with the approved plans, specifications and CQA. Include any additional information regarding the earthwork and site preparation. | | |
| Comments: | | |
| b. Perimeter Drain System (if applicable) | Yes | No |
| i Describe the excavation and the installation of the perimeter drain system. | | |
| ii Identify contractor(s) that performed the construction work. | | |
| iii Include inspection notes, construction pictures, et cetera. | | |
| iv Include PE's opinion that perimeter drain installation was performed in accordance with the approved plans and specifications. Address the following: Was the perimeter drain system installed as specified on the approved drawings? Was the observation/standpipe installed? Was a shutoff valve installed? Was the drain pipe installed within a granular fill? Were pump(s) installed (if applicable)? Were pump(s) connected to an electric supply? Provide any additional information on the perimeter drain system installation. | | |
| | | |
| c. Soil Liner System | Yes | No |
| i Describe the pre-qualification, selection, placement and compaction of the liner soils. | | |
| ii Identify contractor(s) that performed the work. | | |
| iii Identify the construction specifications, construction quality assurance (CQA) requirements and the CQA consultant(s). | | |
| iv Include daily inspection notes, results of CQA tests, map(s) showing locations of compaction tests, map(s) showing locations of hydraulic conductivity test, construction pictures, et cetera. | | |
| Include PE's opinion that liner installation was performed in accordance with the approved plans, specifications and CQA. | | |
| Comments: | | |
| 2. LINER SPECIFIC DISCHARGE | Yes | No |
| Provide hydraulic conductivity test results as required by the CQA and specific discharge calculations a. of the liner showing compliance with the maximum allowable specific discharge of 1/16 (0.0625) cubic inch per square inch per day. (327 IAC 20-5-3(a)) | | |

| | Yes | No | | |
|--|-----|----|--|--|
| Provide documentation supporting that the liner was constructed according to the approved b. specifications. (Indiana NRCS Conservation Practice Standard Code 521A, 521B or 521C 327 IAC 20-5-3(b)) | | | | |
| c. Discuss the in-situ soil and constructed liner thickness. (327 IAC 20-5-3) | | | | |
| Comments: | | | | |
| 3. SUMMARY CONCLUSION | Yes | No | | |
| Provide a brief narrative summarizing the results of the construction of the lagoon. The a. documentation should include test procedures, sampling details, analytical methods, laboratory data, field data, et cetera. | | | | |
| 4. RECORD / AS-BUILT DRAWINGS | Yes | No | | |
| | res | NO | | |
| a. Provide a set of record/as-built drawings of the lagoon that include a plan(s), cross section(s), detail(s), et cetera. Do the drawings show the following? If not, please provide an explanation. | | | | |
| i The lagoon system dimensions. | | | | |
| ii The depth of the lagoon. | | | | |
| iii The thickness of clay liner. | | | | |
| iv The top width of the earthen berm(s). | | | | |
| The elevations at; the top of berm(s), the bottom of lagoon (top of clay liner) and the operating level (elevation of the bottom of the two feet of freeboard). | | | | |
| vi The operating volume of the lagoon(s), (volume excluding the freeboard volume). | | | | |
| vii The slope of the lagoon's interior and exterior side (H/V). | | | | |
| viii Dimensions of berm's cutoff trench. | | | | |
| ix Inlets, access ramps, agitation pads, spillways, splash pads, staff gauges, et cetera. | | | | |
| x The location of perimeter drain around the lagoon. | | | | |
| xi The location of the perimeter drain's discharge point. | | | | |
| 5. MODIFICATION APPROVAL Provide an explanation for any items answered "NO". Any deviation from the approved plans and specifications must have received modification (327 IAC 20-4-4) approval from IDEM prior to construction. Construction of manure structures not meeting the approved plans, specifications, and the facility permit may result in an enforcement action against the facility. | | | | |

| 6. PROFESSIONAL ENGINEER'S CERTIFICATION STATEMENT | | | | | |
|---|----------------------------------|--|--|--|--|
| I, (your name), being a Registered Profes | sional Engineer in the State of | | | | |
| Indiana, do hereby state that, to the best of my knowledge, the information on and attached with this construction report | | | | | |
| certification form for (type of | of structure), constructed at | | | | |
| (facility name), is true and accurate | e, and contains all information | | | | |
| required by the permit and appropriate regulations. The construction inspection acti | vities, either directly overseen | | | | |
| by or as documented by independent parties, other than the construction contractors, have | | | | | |
| been reported to me to have been performed in compliance the permit for the facility. | | | | | |
| The information contained within this report is provided from various sources. This information includes direct observation | | | | | |
| by personnel, personnel directly supervised by | , independent | | | | |
| off-site testing laboratories, construction contractors and survey firms. | | | | | |
| Name: | | | | | |
| | Date: | | | | |
| Signature: By signing this form, I attest that the information provided above is true and accurate. | (month, day, year) | | | | |
| License Number | | | | | |
| | | | | | |
| Expiration Date (month, day, year) | | | | | |
| "SEAL" | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |