

# New York State Department of Environmental Conservation

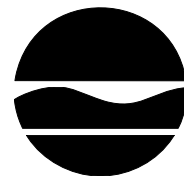
## Division of Water

Bureau of Water Permits, 4<sup>th</sup> Floor

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### Comprehensive Nutrient Management Plan Certification

#### GENERAL PERMIT (GP-0-09-001)

#### State Pollutant Discharge Elimination System (SPDES)

#### Medium Concentrated Animal Feeding Operations (CAFOs)

#### INSTRUCTIONS:

When the Comprehensive Nutrient Management Plan (CNMP) for this medium operation is complete, this *CNMP Certification form* must be signed by the owner or operator of this CAFO facility, and the Agricultural Environmental Management (AEM) certified planner who developed or reviewed the plan. The following submittal procedures must be followed:

1. Owners or operators of existing medium CAFOs eligible to be covered by general permit GP-0-09-001 shall submit a Notice of Intent and this CNMP Certification to the Department by March 31, 2010. **OR**
2. Owners or operators of existing medium CAFOs that are currently covered under the Clean Water Act SPDES general permit shall submit a Notice of Intent and this CNMP Certification to the Department prior to terminating coverage under that permit.
3. Owners or operators of new medium CAFOs eligible to be covered by general permit GP-0-09-001 shall submit a Notice of Intent and this CNMP Certification to the Department at least 15 days prior to commencing operation of the new facility.
4. Expanded facilities (AFO to medium CAFO) eligible to be covered by general permit GP-0-09-001 shall submit a Notice of Intent to the Department at least 15 days prior to the facility expansion. Expanded facilities shall submit this CNMP Certification within 6 months from the authorization date for that facility.

*15 days prior to* the implementation of a “major change” on a medium CAFO including increasing the number of animals 20% above the plan number specified in the existing CNMP or construction of a new or expanded liquid or semisolid waste storage facility greater than one million gallons, the facility must update the Comprehensive Nutrient Management Plan and send an amended CNMP Certification to the Department with a description of the change.

#### SECTION I: FACILITY INFORMATION

Name of CAFO Facility on NOI \_\_\_\_\_

Name of Owner/Operator on NOI \_\_\_\_\_

Address of Owner/Operator on NOI \_\_\_\_\_

Name and Address of Certified Planner \_\_\_\_\_

DEC Authorization No. (If Previously Assigned By DEC) \_\_\_\_\_

DEC SPDES No. (If Previously Assigned By DEC) \_\_\_\_\_

