

INSTRUCTIONS
For Completion of the

NOTICE OF INTENT TO OBTAIN PERMIT COVERAGE

GENERAL PERMIT (GP-0-09-001)
State Pollutant Discharge Elimination System (SPDES)
Concentrated Animal Feeding Operations (CAFOs)

This Notice of Intent (NOI) must be completed by the owner or operator of any “Concentrated Animal Feeding Operation” (CAFO). An “Animal Feeding Operation” (AFO) is any lot or facility where animals have been, are, or will be stabled or confined and fed or maintained for a total of 45 days or more in any 12-month period, and the animal confinement areas do not sustain crops, vegetation, forage growth, or post-harvest residues in the normal growing season.

Concentrated Animal Feeding Operation (CAFO) means an Animal Feeding Operation (AFO) that is defined as a Large CAFO or as a Medium CAFO, or that is designated by the Department as a CAFO. Two or more AFOs under common ownership are considered to be a single AFO for the purposes of determining the number of animals of an operation, if they adjoin each other or if they use a common area or system for the disposal of wastes.

Large Concentrated Animal Feeding Operation (Large CAFO) means an Animal Feeding Operation (AFO) that stables or confines as many as or more than the numbers of animals specified in any of the following categories:

- a. 700 Mature Dairy Cows, whether milked or dry
- b. 1,000 Veal Calves
- c. 1,000 Cattle, other than mature dairy cows or veal calves (Cattle includes but is not limited to heifers, steers, bulls and cow/calf pairs)
- d. 2,500 Swine, each weighing 55 pounds or more
- e. 10,000 Swine, each weighing less than 55 pounds
- f. 500 Horses
- g. 10,000 Sheep or Lambs
- h. 55,000 Turkeys
- i. 30,000 Laying Hens or Broilers, if the AFO uses a liquid manure handling system
- j. 125,000 Chickens (other than laying hens), if the AFO uses other than a liquid manure handling system
- k. 82,000 Laying Hens, if the AFO uses other than a liquid manure handling system
- l. 30,000 Ducks, if the AFO uses other than a liquid manure handling system
- m. 5,000 Ducks, if the AFO uses a liquid manure handling system

Medium Concentrated Animal Feeding Operation (Medium CAFO) means an Animal Feeding Operation (AFO) that stables or confines the type and number of animals that fall within any of the following ranges:

- a. 200-699 Mature Dairy Cows, whether milked or dry
- b. 300-999 Veal Calves
- c. 300-999 Cattle, other than mature dairy cows or veal calves (Cattle includes but is not limited to heifers, steers, bulls and cow/calf pairs)
- d. 750-2,499 Swine, each weighing 55 pounds or more
- e. 3,000-9,999 Swine each weighing less than 55 pounds
- f. 150-499 Horses
- g. 3,000-9,999 Sheep or Lambs
- h. 16,500-54,999 Turkeys
- i. 9,000-29,999 Laying Hens or Broilers, if the AFO uses a liquid manure handling system
- j. 37,500-124,999 Chickens (other than laying hens), if the AFO uses other than a liquid manure handling system
- k. 25,000-81,999 Laying Hens, if the AFO uses other than liquid manure handling systems
- l. 10,000-29,999 Ducks, if the AFO uses other than a liquid manure handling system
- m. 1,500-4,999 Ducks, if the AFO uses a liquid manure handling system

Large CAFOs that do not discharge or propose to discharge, have fully implemented all practices identified in the CNMP and are complying with the requirements in the General Permit are eligible for coverage under this permit. **Medium CAFOs** that do not discharge or propose to discharge, are complying with the implementation schedule requirements in the General Permit and are appropriately operating and maintaining all implemented practices are eligible for coverage under this permit. All CAFOs must submit this form in its entirety to request authorization under the General Permit (GP-00-09-001).

Sections I - VII must be completed in their entirety. ***Incomplete information may result in a delay in the processing of this NOI.***

After completion of the NOI, the owner or operator of the CAFO and the certified Agricultural Environmental Management (AEM) planner must sign *Sections VI and VII* and submit the completed form to the New York State Department of Environmental Conservation (Department) at the above address.

When the Comprehensive Nutrient Management Plan (CNMP) for this operation is complete, the CNMP Certification form (Medium CAFOs) or Annual Nutrient Management Plan submittal (Large CAFOs) must also be signed by the owner or operator of this facility and the certified Agricultural Environmental Management (AEM) planner who developed or reviewed the plan.

Upon receipt of a complete NOI, the Department will mail a letter acknowledging receipt of the NOI. This letter will include the *Permit Authorization Number* assigned by the Department. This *Permit Authorization Number* must be referenced in all future documentation and correspondence provided by you to the Department.

For all other facilities, date of coverage under this General Permit begins thirty (30) calendar days from the date of Department receipt of a complete NOI, unless otherwise notified by the Department. A copy of the NOI, the general permit, and the CNMP, must be retained at the CAFO site in accordance with the General Permit.

Coverage under this permit is transferable to a new owner or operator. The permittee and the new owner or operator must submit a complete ***Change of Status Form***. When the ownership or operation is transferred, if the nature of the operation is changed, or the facility is expanded beyond the contingencies specified in the CNMP, the new permittee shall amend the CNMP in accordance with the General Permit.

Questions on the completion of this NOI should be directed to the Department at (518) 402-9029 or 402-8118.

New York State Department of Environmental Conservation

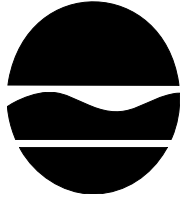
Division of Water

Bureau of Water Permits, 4th Floor

625 Broadway, Albany, New York 12233-3505

Phone: (518) 402-8111 • **FAX:** (518) 402-9029

Website: www.dec.state.ny.us



NOTICE OF INTENT TO OBTAIN PERMIT COVERAGE

GENERAL PERMIT (GP-0-09-001)

State Pollutant Discharge Elimination System (SPDES)

Concentrated Animal Feeding Operations (CAFOs)

Modified 10/19/2009

DEC AUTHORIZATION No. (DEC Use Only): _____

SPDES No. (DEC Use Only): _____

SECTION I: LOCATION AND CONTACT INFORMATION

FACILITY LOCATION INFORMATION

OWNER/OPERATOR CONTACT INFORMATION

Facility Name: _____

Owner/Operator Name: _____

Street or P.O. Box: _____

Street or P.O. Box: _____

City/Town/Village: _____

City/Town/Village: _____

State: _____

State: _____

Zip Code: _____

Zip Code: _____

County: _____

Telephone No.: _____

Telephone No.: _____

Fax No.: _____

Fax No.: _____

E-Mail (optional): _____

E-Mail (optional): _____

SECTION II: REASON FOR SUBMITTAL - CHECK THE BOX THAT APPLIES TO YOUR OPERATION

- Existing Facility** means a CAFO, Large or Medium, permitted in accordance with SPDES General Permit Number GP-04-02 on June 30, 2009 that is requesting a change in coverage or facilities that met the definition of CAFO as of July 1, 2009.
- Expanded Facility, AFO to Medium CAFO** means an AFO with less than required animals for a CAFO that, after July 1, 2009, constructs and operates an expansion physically contiguous to the existing AFO that, in conjunction with the existing AFO, meets the definition of a Medium CAFO specified in this Section.

New Facility means those operations that are defined as CAFOs as of July 1, 2009, but were not defined as CAFOs prior to that date.

- New Small CAFOs** means those operations that are designated by the Department as CAFOs after July 1, 2009, but were not defined as CAFOs prior to that date.
- New Medium CAFOs** means those operations that meet the definition of Medium CAFO and are constructed and operated after July 1, 2009.
- New Large CAFOs** means those operations that are constructed and operated after July 1, 2009. Such operations include Large CAFOs that are constructed on an existing farm site(s) where that site was not defined as a CAFO(s) prior to July 1, 2009.

SECTION III: GEOGRAPHIC COORDINATES OF CAFO OPERATION

Please provide the geographic coordinates of your CAFO operation. You may obtain this information from various sources; however data must be entered on the form in New York Transverse Mercator (NYTM as easting/northing). Please note NYTM is defined as UTM, Zone 18, meters, extended east and west to cover all of New York State. You may choose to look up this information from DEC's Stormwater Interactive Map, Global Positioning System (GPS) or Geographical Information System Software.

The Stormwater Interactive Map on DEC's web site provides a tool for locating the coordinates of the site, which returns the data in NYTM format. The data provided in NYTM form must be entered in 6 digits for X (easting) and 7 digits for Y (northing) (example 586130, 4884956). To do this you must go to the Stormwater Interactive Map on the DEC's web site at:

<http://www.dec.ny.gov/imsmaps/stormwater/Run.htm>

Zoom into your location so that you can accurately click on the centroid of your site. Once you have located your CAFO site, go to the dropdown menu on the left and choose "Get Coordinates". Click on the center of your site and a small window containing the X, Y coordinates in UTM will pop up. For problems with the interactive map use the help function.

If you are using a Global Positioning System (GPS) or Geographical Information System Software, please enter the X and Y coordinate data in the format explained above.

Site Location: X Coordinates: _____

Y Coordinates: _____

SECTION IV: DESCRIPTION OF ANIMALS MANAGED

Give the maximum number of each type of animal in open confinement or housed under roof (either partially or totally) which are held at your facility for a total of 45 days or more in any 12-month period:

Type	Number in Confinement
Mature Dairy Cattle (milked or dry)	
Dairy Heifers	
Veal Calves	
Other Cattle	
Swine (55 lbs. or more)	
Swine (under 55 lbs.)	
Horses	
Sheep or Lambs	
Turkeys	
Chickens (broilers)	
Chickens (layers)	
Ducks	
Other (specify)	

SECTION V: CAFO FACILITY INFORMATION

1. Total production area (specify square feet or acres) in which animals are *confined or fed*. **Do not** include pasture land (areas used for grazing) or areas for growing crops: _____

2. Has a Comprehensive Nutrient Management Plan, developed in accordance with “**NRCS Conservation Practice Standard No. NY312**” been prepared for this facility by a certified Agricultural Environmental Management (AEM) Planner?

_____ Yes _____ No

3. Has the facility fully implemented all practices required in the Comprehensive Nutrient Management Plan?

_____ Yes _____ No

If no, when will full implementation be reached? _____

If no and the facility is a medium CAFO, has the facility fully implemented all non-structural practices required in the Comprehensive Nutrient Management Plan?

_____ Yes _____ No

4. Does this facility have one or more waste storage structures? (excluding underbarn storages)

_____ Yes _____ No

If yes, for **each** structure describe the following (for multiple storages, attach additional copies of this page for each additional waste storage structure):

a. Was the structured designed and constructed in accordance with all applicable NRCS standards?

_____ Yes _____ No

b. If no, has the structured been evaluated by a Professional Engineer currently licensed to practice in New York State in accordance with the “AEM Tool for the Evaluation of Undesigned Waste Storage Facilities”?

_____ Yes _____ No

c. Is the structure being maintained to store the volume of runoff from a 25-year, 24-hour storm event?

_____ Yes _____ No

d. If no, explain.

e. Describe the location and dimensions of the structure:

f. Describe the nearest, down-gradient waterbody that would likely receive any potential discharge from the structure (stream, pond, lake, wetland), give the name of receiving stream(s) or lake(s) to which the facility would discharge during an excessive storm event, and the distance from the storage facility to the surface water:

5. Description of any recent (within last 5 years) compliance actions by the Department against this facility. (ECO ticket, notice of violation, consent order, etc.) List case or ticket number if available.

6. List any other DEC permit(s) required or issued for this facility, *if any*: NY _____ NY _____
(ex: individual SPDES, Part 360, gravel pit, etc.)

SECTION VI: OWNER/OPERATOR CERTIFICATION

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

Name (please print or type) Signature Date

SECTION VII: PLANNER CERTIFICATION

I hereby certify that:

I am an Agricultural Environmental Management (AEM) Planner certified to develop and review Comprehensive Nutrient Management Plans (CNMPs) for Concentrated Animal Feeding Operations (CAFOs) in New York State. As such, I am working with this facility to develop, implement and maintain a site-specific Comprehensive Nutrient Management Plan (CNMP).

Name (please print or type) Signature Date