

**APPENDIX E
EXAMPLE
LARGE CAFO “NO POTENTIAL TO DISCHARGE” DETERMINATION
REQUEST FORM**

LARGE CAFO¹ “NO POTENTIAL TO DISCHARGE” DETERMINATION REQUEST

Instructions: Use this form to request a “No Potential to Discharge” determination from *[insert name of permitting authority]*. Your completed request must include all of the information specified at 40 CFR 122.21(f) and (i)(1)(i) through (ix) plus any additional information you determine necessary to demonstrate that there will not be, under any circumstances, any discharge from either the production or land application areas of your operation. Use extra sheets and attach documents where needed.

¹See definition of a Large CAFO at 40 CFR 122.23(b)(4)

I. OWNER/OPERATOR INFORMATION

A. CONTACT INFORMATION	B. FACILITY STATUS
Owner/or Operator Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: (____) _____ Facsimile: (____) _____	Check one: <input type="checkbox"/> 1. Existing Facility <input type="checkbox"/> 2. Proposed Facility

II. FACILITY INFORMATION

A. GENERAL INFORMATION

Name: _____ Telephone: (____) _____
 Address: _____ Facsimile: (____) _____
 City: _____ State: _____ Zip Code: _____
 County: _____ Latitude: ____° ____' ____" Longitude: ____° ____' ____" ”
 Average Annual Rainfall _____”

1. Check to indicate that you have attached a topographic map that clearly shows the location of your production area(s).

2. Have any other permits been issued for this operation? No Yes
 If yes:

Permit Type	Issuing Agency	Permit Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Has this operation had a discharge of manure, litter, or process wastewater to waters of the United States in the past 5 years? No Yes

4. Has there ever been a discharge at this operation? No Yes
 If yes, explain the circumstances of the discharge and the actions that have been taken to ensure that no future discharges will occur at this operation.

B. ANIMALS IN CONFINEMENT

Complete the following table to show the maximum number of each type of animal confined at any one time and the type of confinement structure used for each (e.g., open feedlot, under roof, etc.).

Type	No. of Animals	Type of Confinement
Mature Dairy Cows		
Dairy Heifers		
Veal Calves		
Other Cattle		
Swine (55 lb. or more)		
Swine (under 55 lb.)		
Horses		
Sheep or Lambs		
Turkeys		
Chickens (broilers)		
Chickens (layers)		
Ducks		
Other: (specify) _____		

C. MANURE, LITTER, AND WASTEWATER GENERATION, CONTAINMENT AND STORAGE

1. How much manure and/or litter is generated at this facility each year? _____ tons

2. How much process wastewater is generated at this facility each year? _____ gallons

D. MANURE, LITTER, AND WASTEWATER STORAGE

Check the box and provide the capacity in both days and tons or gallons for each type of storage structure present at this facility.

Type of Storage	Capacity (Days)	Capacity (tons or gallons)	
<input type="checkbox"/> Treatment Lagoon			
<input type="checkbox"/> Storage Pond			
<input type="checkbox"/> Evaporation Pond			
<input type="checkbox"/> Aboveground Storage Tanks			
<input type="checkbox"/> Underground Storage Tanks			
<input type="checkbox"/> Underhouse Pit			
<input type="checkbox"/> Roofed Storage Shed			
<input type="checkbox"/> Concrete Pad ^a			
<input type="checkbox"/> Impervious Soil Pad ^a			

^a Attach documentation of the methods used to prevent runoff

Other: (specify) _____			
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E. STORM WATER AND RUNOFF CONTAINMENT

1. Check the box and give the total design basis including total capacity for each type of storm water and runoff containment structure present at this facility.

Type of Containment	Total Capacity (gallons)	
Other: (specify) _____		
Treatment Lagoon		
Storage Pond		
Holding Pond		
Evaporation Pond		
Other: (specify) _____		

2. What is the total amount of land (in acres) that contributes storm water runoff to these containment structures? _____ acres

F. MANURE, LITTER, AND WASTEWATER USE, TRANSFER, AND DISPOSAL

1. How much manure and litter is applied to land under the control of this CAFO each year? _____ tons
2. How much wastewater is applied to land under the control of this CAFO each year? _____ gallons
3. What is the total number of acres used at this CAFO to land apply manure, litter, or process wastewater each year? (Do not include land that is not under the control of this CAFO.) _____ acres
4. How much manure and litter is transferred from this CAFO to other persons each year? _____ tons
5. How much wastewater is transferred from this CAFO to other persons each year? _____ gallons
6. Describe any other manure, litter, or wastewater use or disposal method employed at this CAFO:

G. NUTRIENT MANAGEMENT PLAN*

1. Has a nutrient management plan been developed for this CAFO? ' Yes ' No
 - a. If yes, is the plan currently being implemented? ' Yes ' No
 - b. If no, when will a nutrient management plan be developed? ____/____ (mm/yyyy)
2. Was (or will) this CAFO's nutrient management plan prepared or reviewed by a certified nutrient management planner? ' Yes ' No

* The development and implementation of a nutrient management plan is not a basis for granting a no potential to discharge determination. In general, land application activities will result in a facility not being granted a determination of no potential to discharge.

III. ADDITIONAL INFORMATION

Provide a statement describing the conditions and/or practices at this CAFO that eliminate the potential to discharge pollutants to waters of the United States. (Such information might include precipitation data and/or maps, soil conditions, soil maps, hydrologic conditions, distance to waters of the U.S., or site-specific management or waste treatment practices.) Attach additional sheets, if needed.

Please identify all documentation provided with this “no potential to discharge” determination request.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

IV. CERTIFICATION

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

Signature: _____ Date: _____

Print Name: _____

Submit to *[permitting authority and address]*