		Agency Use			
		Permit No.:			
		Date Rec'd			
DE(	WATER	Amount Rec'd			
	DDOTECTION				
	Incitention	Check No.			
Montana Department of Environmental Quality	BUREAU	Rec'd By			
of Environmental Quality					
FORM	Annual Report F				
<b>AR-CAFO</b> General Permit		eeding Operations (CAFO GP)			
	MTG010000				
This form is to be completed by all Concer Pollutant Discharge Elimination System (M					
Montana Department of Environmental Quali					
MPDES discharge coverage. Please read the at	ttached instructions before completing	g this form. You must print of type legibly;			
forms that are not legible or are not complete and 'NA' in the space provided. If additional s					
to the section of the form being elaborated of					
records.	4° от				
Section A - Facility or Operation Informa					
Permit Authorization Number: MTG01					
Facility or Operation Name					
Physical Location, Mailing address, or dire	ections to location				
Nearest City or Town					
Latitude	_Longitude				
Township/Range /Section (optional)					
<b>Operation Contact Person/Position</b>					
Name and Title, or Position Title					
Company Name (if different than the facili	ty or operation				
Mailing Address					
City, State, and Zip Code					
Phone Number () E-mail					
Authorized Representative 🔲 Same as facility contact					
Name and Title					
Company Name (if different than the applicant)					
Mailing Address					
City, State, and Zip Code					
Phone Number ()					

Section	B – S	Summary	of	<b>Findings</b>
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#### **Type and Number or Animals:**

Report the maximum number of each type of animal confined at this facility at any one time during the 12 month reporting period.

ТҮРЕ	NUMBER IN OPEN CONFINEMENT	NUMBER HOUSED UNDER ROOF
Mature Dairy Cows		
Veal Calves		
Cattle including dairy Heifers		
Swine (55 lb. or over)		
Swine (55 lb. or under)		
Horses		
Sheep or Lambs		
Turkeys		
Chicken broilers -includes		
juveniles		
Chickens layers – includes		
juveniles		
Ducks		
Other (specify)		
Other (specify)		

## Manure, Litter and Process Wastewater

#### Waste Production:

Estimate the amount of manure, litter and process wastewater generated by your facility during the last calendar year

- a. Liquid/Slurry manure, litter and process wastewater Gallons.
- Tons. b. Dry manure and litter

#### Waste Transfer

Estimate the amount of manure, litter and process wastewater transferred from your facility, to other persons, during the last calendar year.

- Gallons.
- b. Dry manure and litter

#### Land Application

- a. Report the total number of acres of land that are covered by this facility's Nutrient Management Plan (NMP), developed in accordance with the applicable technical standards. Include all land application acres covered by the NMP, whether or not they were used for land application during the calendar year covered by this report. Acres.
- b. Report the total number of acres, under the control of the CAFO, that were actually used for land application of manure, litter, or process wastewater in the past calendar year covered by this report. Acres

#### **Discharge Summary**

#### Summary of Manure, Litter, and Process Wastewater Discharges from the Production Area

Provide a summary of each discharge of manure, litter, and/or process wastewater from the production area that occurred in the past year covered by this report. Attach additional sheets, if needed.

Date	Time	Volume

#### Land Application Summary

A. Report the nitrogen (N) and phosphorus (P) content of manure, litter, and process wastewater using the results of the most recent representative manure, litter and process wastewater tests for N and P. Report the form of N and P used for nutrient management plan used for nutrient management planning purposes in the Nutrient form column

*Note: Large CAFO using the linear approach and all CAFOs using the narrative rate approach must present results taken within 12 months of the date of land application of the manure, liter and processes wastewater.* Nutrient form

lbs/ton	as
lbs/ton	as
lbs/ton	as
lbs/ton	as
lbs/1,000 gal.	as
lbs/1,000 gal.	as
	lbs/ton lbs/ton

B. For each field, report the actual crop(s) planted, the season (for multiple crops planted in one field), the actual crop yield, and the amount of manure, litter, process wastewater, and supplemental fertilizer applied to each field during the previous 12-month period. Attach additional sheets if necessary.

Field ID				
Season				
Crop Planted				
Crop Yield (specify units)				
Amount to be applied as calculated according to the NMP methodology				
Manure (tons)				
Litter (tons)				
Process wastewater (gallons)				
Actual amount supplied				
Manure (tons)				
Litter (tons)				
Process wastewater (gallons)				

C. Comments (Eg., "Actual amounts of manure applied are greater than the planned amounts due to a drop in the amount of N analyzed in the manure test")

D. CAFOs with NMPs developed using *the narrative rate approach only*: For each field used for land application, report the results of the most recent soil nutrient analyses for any soil test taken in the last 12 months.

	Most recent soil test results				Supplemental		
Field ID	ni	trogen	Phosphorus		fertilizer (lbs/acre)		
						Ν	Р
	ppm	N form	ppm	p form	method	applied	applied
		as		as			
		as		as			
		as		as			
		as		as			
		as		as			
		as		as			
		as		as			

## Section C - Certification

Authorized Signatories: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

## All Applicants Must Complete the Following 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 gather and evaluate the information submitted. Based on my inquiry of the 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 a fine and imprisonment for knowing violations.

## Name (Type or Print)

Title (Type or Print)	Phone Number
Signature	Date Signed

# **INSTRUCTION FOR Form AR2-CAFO – Annual Report Form for General Permit for Concentrated Animal Feeding Operations.**

You may need the following items in order to complete this form:

- A copy of your most recently submitted NOI and NMP-CAFO:
- Results of you most recent manure test and if doing narrative rate approach;
- If doing narrative rate approach, the results of your most recent soil test for nitrogen and phosphorus.

Please type or print legibly; forms that are not legible will be considered incomplete.

## **SPECIFIC ITEM INSTRUCTIONS**

## Section A – Facility or Operation Information.

Enter your permit Authorization number. Enter the most current information about the facility. Please note this is not the place where a permit transfer would be completed. If permit transfer please refer to the 2018 CAFO General Permit. Enter the current Operation Contact Person and/or the current Authorized Representative.

## Section B – Summary of Findings

## Type and number of Animals.

Enter the maximum number of animals confined at this facility. Please note this is not the total number of animals but the one-day max held in the facility in the past year.

## Manure, Litter and Process Wastewater

Estimate the amount of manure, liter and process wastewater generated at your facility in the last year. This value is not based on what is transferred and/or what was spread on fields but what the facility generated as a whole.

## Waste Transfer

Estimate the amount of liquid and dry manure that you transferred to others from the facility.

## Land Application

If the facility does not land apply then you can skip the section. For "a" you will need to add up all of the area that you have submitted in your NMP as location in which you plan on submitting manure for the permit cycle. For "b" enter the number of acres in which you apply manure, litter or process wastewater in the past year.

## **Discharge Summary**

This is where you enter any discharges that you had in the previous year. These discharges should already be documented using the CAFO Area Discharge Event Form.

## Land Application Summary

For "A" take the information directly from the sampling results of your most recent manure, litter and/or process wastewater. For "B" you may need several pages because you applied to more than one field in the past year. Use the field id that you reported in your most recent NMP. If the crop has not be harvested like winter wheat you still need to fill out a table you will just enter Fall in the "Season" row and enter "not yet harvested" in the "Crop Yield" row. If the crop is planted in the fall please make sure to keep a record of the harvest from the following year.

For "D" this table is only used for those that used the Narrative Rate Approach in your NMP. If you used the Linear Approach you will skip this section. Enter the information for each field, reported in your most recent NMP, in which you have taken soil samples from in the past year whether you applied manure, litter and/or process wastewater to them or not. If you applied manure, litter or process wastewater you must include manure analysis in the supplemental fertilizer total.

## Section C- Certification

If Form AR2-CAFO is filled out by one person and signed by another, the person signing the document should read it thoroughly. Always retain a copy of all of the documents that you send to the Department of Environmental Quality.

If you have any questions concerning how to fill out this form, or other forms related to the Concentrated Animal Feeding Operations permitting program, please contact the Department's Water Protection Bureau at:

Phone: (406) 444-5546 Fax: (406) 444-1374 1520 East Sixth Avenue P.O. Box 200901 Helena, MT 59620-0901