

Oregon Department of Agriculture (ODA)
Oregon Confined Animal Feeding Operation (CAFO) National Pollutant Discharge
Elimination System (NPDES) General Permit ANNUAL REPORT
For Large Concentrated CAFOs

Your Oregon CAFO NPDES General Permit requires you to submit an annual report to ODA by March 15 each year. Please complete and sign this report for calendar year 2011 and return it by **March 15, 2012**.

Calendar Year: 2011 **Reporting period:** January 1 through December 31, 2011

County:																									
Name: , ,																									
Business Name:																									
Mailing Address: , ,																									
Facility Address: , ,																									
Telephone No.:	Cell Phone #:																								
E-mail Address:	Office Use Only: MA#																								
<p>1. Maximum number of permitted animals approved by ODA _____.</p> <p>2. Actual number of animals by type at the CAFO averaged over the year</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Beef: _____</td> <td><input type="checkbox"/> Sheep: _____</td> <td><input type="checkbox"/> Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Dairy: _____</td> <td><input type="checkbox"/> Lambs: _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Heifers: _____</td> <td><input type="checkbox"/> Ducks: _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Veal calves: _____</td> <td><input type="checkbox"/> Turkeys: _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Horses: _____</td> <td><input type="checkbox"/> Chickens _____</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Swine</td> <td><input type="checkbox"/> Broilers: _____</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">< 55 pounds: _____</td> <td><input type="checkbox"/> Layers: _____</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">> 55 pounds: _____</td> <td><input type="checkbox"/> Mink: _____</td> <td></td> </tr> </table>		<input type="checkbox"/> Beef: _____	<input type="checkbox"/> Sheep: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Dairy: _____	<input type="checkbox"/> Lambs: _____		<input type="checkbox"/> Heifers: _____	<input type="checkbox"/> Ducks: _____		<input type="checkbox"/> Veal calves: _____	<input type="checkbox"/> Turkeys: _____		<input type="checkbox"/> Horses: _____	<input type="checkbox"/> Chickens _____		<input type="checkbox"/> Swine	<input type="checkbox"/> Broilers: _____		< 55 pounds: _____	<input type="checkbox"/> Layers: _____		> 55 pounds: _____	<input type="checkbox"/> Mink: _____	
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<p>3. Animal Waste Management Plan (AWMP) approval date:</p> <p>Does the plan reflect current operations? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Plan developed by: <input type="checkbox"/> NRCS certified planner <input type="checkbox"/> Private certified planner <input type="checkbox"/> Other</p> <p>Frozen soil application guidance included in plan? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Did you apply manure to frozen soil in the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																									
<p>4. Generated by CAFO? <input type="checkbox"/> Manure; estimated amount:</p> <p style="padding-left: 100px;"><input type="checkbox"/> Litter; estimated amount:</p> <p style="padding-left: 100px;"><input type="checkbox"/> Process wastewater; estimated amount:</p>																									

100% Exporter

5. Exported from CAFO?

Manure; estimated amount:

Litter; estimated amount:

Process wastewater; estimated amount:

Done in accordance with the AWMP?

Yes No

If no, please explain why:

6. Estimated amount of manure applied to land: _____

Please specify the unit of measurement used (tons, gallons, or cubic feet).

7. Acres of land under operator control used for manure nutrient application:

8. Acres of land for land application covered by the AWMP:

9. Did any manure, litter, and / or process wastewater discharge to surface water from your production area this past year? Yes No

If yes, please provide a summary of the approximate volume, date, and time of each discharge:

10. As required by 40 CFR §122.42(e)(4)(viii), the concentrated animal feeding operation that discharges or proposes to discharge to waters of the U.S. must also report the following (a concentrated animal feeding operation proposes to discharge if it is designed, constructed, operated, or maintained such that a discharge will occur): (Please attach additional paper if necessary.)

Please see the back page of this report for help filling in the following questions.

(1) Actual crop(s) planted and actual yield(s) for each field.

(2) Actual nitrogen and phosphorus content of the manure, litter, and process wastewater (sample test results).

(3) Data used and results of calculations based on protocol in the ODA-approved AWMP.

(4) Amount of manure, litter, and process wastewater applied to each field during the previous 12 months.

(5) Results of soil testing for nitrogen and phosphorus from samples taken during the previous 12 months.

(6) Amount of any supplemental fertilizer applied during the previous 12 months.

You may want to review the discharge, production area, and pollutant definitions in the CAFO permit.

If you have questions about the annual report, please contact your area CAFO Livestock Water Quality Specialist or call CAFO Program support staff in Salem at (503) 986-4699.

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 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 fines and imprisonment for knowing violations.

Signature of Legally Authorized Representative: _____

Print Name: _____ Date: _____

Once completed and signed please mail your report to:

**Oregon Department of Agriculture
Natural Resources Division
635 Capitol Street NE
Salem, OR 97301**

You may also fax the report to ODA in addition to sending the report to ODA via surface mail. Please fax the report to fax no. **(503) 986-4730**.

