OREGON DEPARTMENT OF AGRICULTURE

CONFINED ANIMAL FEEDING OPERATION APPLICATION TO REGISTER (ATR) TO THE OREGON CAFO GENERAL PERMIT

Instructions for filling out and mailing the ATR are attached. Please send the completed ATR to: Oregon Department of Agriculture, CAFO Program, 635 Capitol Street NE, Salem, Oregon 97301-2532. An application fee is required and must be mailed or faxed to ODA (see the Fee Payment Form for instructions). If you meet the definition of a new large CAFO (OAR 603-074-0010), you require a preliminary consultation and must fill out a declaration before you can submit an ATR.

SECTION I. CAFO PERMIT SELECTION

Please choose which permit you would like your operation to be registered to:

- ■ NPDES General Permit #01-2026 (5-year permit)
- ☐ WPCF General Permit #01-2026 (10-year permit)

SECTION II. CONTACT INFORMATION

A. Applicant: This must be the legal Oregon name (i.e., Acme Products, Inc.) or the legal *representative of the company if it operates under an assumed business name (i.e., John Smith, dba* Acme Products). The permit will be issued under the legal name of the applicant.

Name: Kevin Martin

Mailing address: 3451SW Hwy 87

City, State, Zip code: Madras, OR 97741

Phone number(s): 541-460-0521

Fax number:

E-mail address: martinlivestock22@gmail.com

Status of Applicant: P (P=Private; M=Public other than federal or state; F=Federal; S=State)

B. Landowner: (if different from applicant)

Name: Sam Stafford

Mailing address: 8600 SW Wiley Rd

City, State, Zip code: Powell Butte, OR 97753

Phone number(s): 541-879-8576

Fax number:

E-mail address:

Status of Landowner: P (P=Private; M=Public other than federal or state; F=Federal; S=State)

SECTION II. CONTACT INFORMATION, CONT.

*C. **Business Contact**: (if different from applicant)*

Name: Kevin Martin

Mailing address: 3451 SW Hwy 97

City, State, Zip code: Madras, OR 97741

Phone number(s): 541-460-0521

Fax number:

E-mail address: martinlivestock22@gmail.com

SECTION III. OPERATION INFORMATION

A. Operation:

Name: Martin Livestock, Stafford Lot

Physical address: 9950 SW Culver Hwy

City, State, Zip code: Culver, OR 97743

County: Jefferson

Phone number(s): 541-460-0521

Fax number:

E-mail address: martinlivestock22@gmail.com

Does the operation meet the definition of a new CAFO (ORS468B.215)? ☑ Yes ☐ No

B. Daily Operation/Onsite Contact:

Contact Name(s): Kevin Martin

Phone number(s): 541-460-0521

Email: martinlivestock22@gmail.com

C. Latitude/longitude of entrance to the production area: 44.586, 121.148

D. Closest water body or stream: Irrigation canal

E. Topographical map: A topographical map of the CAFO must be included with this application.

F. Diagram: A diagram of the CAFO must be included with this application, including the confinement area, all wastewaters and where they go, the storage facilities, and land application

area(s). This diagram must also show surface streams, lakes, and waterways in the vicinity of the manure collection, storage, and land application areas.

G. Land Use Compatibility Statement (LUCS): A LUCS must be included with this application that has been completed by the land use authority for all parcels associated with the CAFO.

H. Water Supply Plan (WSP): A WSP must be included with the application package to be reviewed by Oregon Water Resources Department (OWRD).

I. Construction Approval Package (CAP): For CAFOs that require construction, a CAP must be included with the application with site designs and engineering where appropriate.

* See page ATR Instructions for more information on elements E-I.

SECTION IV. DESCRIPTION OF OPERATION

A. Number of animals managed: *Give the maximum number of each type of animal that will* be held at this facility in open confinement or housed under roof (either partially or totally) in any 12-month period (i.e., the maximum capacity). Attach additional sheets if necessary.

TYPE OF ANIMAL	NUMBER OF ANIMALS IN OPEN CONFINEMENT	NUMBER OF ANIMALS HOUSED UNDER ROOF
Mature dairy cows		
Dairy heifers		
Veal calves		
Cattle (not dairy or veal)	3000	
Swine (55 lbs. or over)		
Swine (under 55 lbs.)		
Horses		
Sheep or lamb		
Turkeys		
Chickens (broilers)		
Chickens (layers)		
Ducks		
Goats		
Other: _____		
Total Number of Animals	3000	

SECTION IV. DESCRIPTION OF OPERATION, CONT.

B. Estimated manure, litter, and/or wastewater produced and land applied by the CAFO:

a) How much manure, litter, and wastewater are generated annually by the operation? Provide units.

Liquid manure: 0 _____ (units)

Solid manure/litter: 0 _____ *(units)*

Wastewater: 0 _____ (units)

b) Is manure, litter, and/or process wastewater generated at the CAFO land applied?

☐ Yes ☑ No

b1) How many acres of land will be used for applying manure, litter, and/or wastewater?

unknown acres

c) Is manure, litter, and/or process wastewater generated at the CAFO transferred to any other entities/persons?

☑ Yes ☐ No

c1) How much manure, litter, and/or wastewater will be transferred annually to other entities/persons?

Liquid manure: 0 _____ (units)

Solid manure/litter: 1,028,522 CF _____ (units)

Wastewater: 0 _____ (units)

c2) If applicable, check all land application best management practices that are being/will be implemented.

☐ Buffers ☐ Infiltration field ☐ Setbacks ☐ Grass filter ☐ Conservation tillage
☐ Terrace ☐ Constructed wetlands ☐ Other (specify)

SECTION IV. DESCRIPTION OF OPERATION, CONT.

C. Type and capacity of waste storage:

TYPE OF WASTE STORAGE	TOTAL DAYS OF STORAGE	TOTAL CAPACITY (Specify units, ex: gallons, tons, cubic feet, acre feet, etc.)
Anaerobic lagoon		
Storage lagoon		
Evaporation pond	365	1,368,000 cu.ft.
Above ground liquid storage tanks		
Below ground liquid storage tanks		
Roofed storage shed (solid manure and/or compost)		
Concrete pad (solid manure and/or compost)		
Impervious/compacted soil pad (solid manure and/or compost)		
Other: _____		

a) Indicate the total number of acres drained and collected in the containment and storage structure(s) reported in the table above: 7.1

SECTION V. NUTRIENT MANAGEMENT PLAN (NMP)

A. **Is a nutrient management plan (NMP) attached that satisfies the requirements at 40 CFR 122.42(e) and, if applicable, the requirements at 40 CFR 412.4(c)?** Note: A permit application is not complete until a NMP is submitted to the ODA CAFO Program. ☒ Yes ☐ No

If not, explain why a NMP is not attached to the application and your estimated date for submitting the NMP.

_____

B. Date of the last review or revisions of the NMP: 11 (Month) / 2026 (Year)

C. If not land applying manure, litter, and/or process wastewater, how will they be used?

100% export

SECTION VI. CERTIFICATION

I understand that the NMP for the operation described in this ATR must be reviewed and approved by the agency before the operation has permit coverage. I further understand that any proposed facility construction or modification requiring agency approval must be reviewed and approved by the agency prior to the start of construction. I also understand that animals may not be brought onto the site, and operation of the CAFO may not begin, until construction is completed and the agency has provided approval to begin operations under the permit. I also understand that the permit applicant must be either an owner or operator that has a property interest in the permitted activity.

Signature (Applicant)	Print Name	Date
	Kevin Martin	8/4/26
Signature (Applicant)	*Print Name*	Date

Submission of ATR and Fees

Submission of this ATR to ODA constitutes notice that the parties/party identified in Section II of this form intend/s to be authorized by an Oregon CAFO General Permit to operate a CAFO. Becoming a permittee obligates a CAFO to comply with the terms and conditions of the permit. The CAFO General Permit is viewable/printable at: https://oda.direct/cafo.

ODA requires a nonrefundable application fee of $100.00 for a small, $150.00 for a medium, and $300.00 for a large CAFO with the submission of this ATR. Size designation table is available in OAR 603-074-0011: https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=317252. Please see the Application Payment Form for payment instructions. ODA will bill you for an additional Annual Permit Fee if the ATR and NMP are approvable. If you have questions, please call ODA at 503-986-4699.