



Standard Application Form for Agricultural Manure Applicators

Please Type or Print

Section 1 – FARM INFORMATION

DATE _____ OPERATION NUMBER ND _____

NEW _____ OR EXPANDING _____ OPERATION

IF EXPANDING: PERMIT NUMBER _____ DATE ISSUED _____

FARM NAME _____

COUNTY _____ COMMUNITY _____

LOCATION _____

Section 2 – CONTACT INFORMATION

PERMIT APPLICANT'S NAME _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

PERMIT APPLICANT'S EMAIL ADDRESS _____

MANURE APPLICATOR'S NAME (if different) _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

MANURE APPLICATOR'S EMAIL ADDRESS _____

MANURE HAULER'S NAME (if different) _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

MANURE HAULER'S EMAIL ADDRESS _____

PLAN PREPARER _____

TITLE/SC REGISTRATION NUMBER _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (FAX) _____ (CELL/BEEPER) _____

PLAN PREPARER'S EMAIL ADDRESS _____

Section 3 – MANURE HANDLING & TREATMENT

MANURE HANDLING: DRY or WET

ARE YOU OBTAINING MANURE FROM A BROKER? YES or NO

NAME OF BROKER _____

TRAINED MANURE MANAGER? YES or NO TRAINING DATE _____

ARE YOU CONSTRUCTING A STORAGE OR COMPOSTING FACILITY FOR THE MANURE? _____

DO YOU OWN ALL OF THE MANURE UTILIZATION AREAS? YES or NO

TOTAL NUMBER OF ACRES ADDED FOR MANURE UTILIZATION? _____

Section 4 – MANURE UTILIZATION AREAS

For more fields please make copies of this page and add as additional sheets.

SEPARATION DISTANCES:	Tract #→								
	Field #→								
POTABLE WELL	100 ft								
WATERS OF THE STATE LOCATED DOWNSLOPE	100 ft								
EPHEMERAL & INTERMIT. STREAMS DOWNSLOPE	100 ft*								
DITCHES DOWNSLOPE	50 ft								
RESIDENCE	300 ft**								

PROPERTY OWNER OF RECORD _____
 ADDRESS _____
 PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

TABLE #2

SEPARATION DISTANCES:	Tract #→								
	Field #→								
POTABLE WELL	100 ft								
WATERS OF THE STATE LOCATED DOWNSLOPE	100 ft								
EPHEMERAL & INTERMIT. STREAMS DOWNSLOPE	100 ft*								
DITCHES DOWNSLOPE	50 ft								
RESIDENCE	300 ft**								

PROPERTY OWNER OF RECORD _____
 ADDRESS _____
 PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

TABLE #3

SEPARATION DISTANCES:	Tract #→								
	Field #→								
POTABLE WELL	100 ft								
WATERS OF THE STATE LOCATED DOWNSLOPE	100 ft								
EPHEMERAL & INTERMIT. STREAMS DOWNSLOPE	100 ft*								
DITCHES DOWNSLOPE	50 ft								
RESIDENCE	300 ft**								

PROPERTY OWNER OF RECORD _____
 ADDRESS _____
 PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

- * If the method of application is spray application or ground surface application. Reduced to 75 ft for incorporated manure, and 50 ft for injection or incorporation within 24 hours.
 - ** If method of application is injection or immediate incorporation, then manure may be spread to the property line. All residence setbacks may be reduced by consent of the owner of the residence.
- IDENTIFY THE PROPERTY OWNER FOR EACH TRACT OF LAND UTILIZED FOR MANURE APPLICATION

Section 5 – PERMIT APPLICATION SUBMITTAL REQUIREMENTS

SUBMITTAL PACKAGE SHOULD INCLUDE 2 COPIES OF THE FOLLOWING ITEMS:

- _____ 1. ORIGINAL APPLICATION (and 1 copy of the original)
- _____ 2. MANURE MANAGEMENT PLAN
 - a. Animal Manure Management System Description
 - b. Design Calculations and Construction Details for treatment/storage structure, including exact location and design information.
 - c. Concentration of Manure Constituents
 - d. Crop Management Plan (including contracts for each field not owned by the applicant, field owner's name and contact information)
 - e. Type of Waste Transport/Spreading Equipment (if applicable)
 - f. Manure Utilization Area Information and Maps
 - g. Soils Information (maps & descriptions)
 - h. Location maps (showing treatment/storage structure, and all fields)
 - i. 100 year floodplain locations (treatment/storage structure may not be located in the 100-year floodplain)
- _____ 3. ODOR ABATEMENT PLAN
- _____ 4. VECTOR ABATEMENT PLAN
- _____ 5. SOIL MONITORING PLAN
- _____ 6. COPY OF CONTRACT WITH PRODUCER(S) OR BROKER(S) TO OBTAIN MANURE
- _____ 7. COPY OF CONTRACT WITH LAND OWNER'S OF FIELDS TO RECEIVE MANURE APPLICATION (rented farmland)
- _____ 8. WRITTEN CONSENT FOR WAIVING OR REDUCING SETBACKS FOR TREATMENT/STORAGE STRUCTURE
- _____ 9. APPLICATION FEE: See instructions on the back of this page for amount.
- _____ 10. ANNUAL OPERATING FEE: See instructions for amount (first year's fee must be submitted prior to permitting)

Section 6 - CERTIFICATION

I HEREBY CERTIFY THAT ALL OPERATIONS, MAINTENANCE AND ASSOCIATED ACTIVITY PERTAINING TO THIS SITE SHALL BE ACCOMPLISHED PURSUANT TO AND IN KEEPING WITH THE TERMS AND CONDITIONS OF THE APPROVED PLANS. I HAVE READ THIS APPLICATION AND AGREE TO THE REQUIREMENTS AND CONDITIONS THAT ARE CONTAINED WITHIN. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I HEREBY GRANT AUTHORIZATION TO THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL THE RIGHT OF ACCESS TO THE SITE AT ALL REASONABLE HOURS FOR THE PURPOSE OF SAMPLING AND ON SITE INSPECTIONS.

Printed Name /Manure Applicator

Signature/Manure Applicator

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE DESIGN IS CONSISTENT WITH THE REQUIREMENTS OF TITLE 48, CHAPTER 1 OF THE 1987 SC CODE OF LAWS, AND PURSUANT REGULATION 61-43 AND APPROPRIATE NRCS STANDARDS.

Printed Name/Plan Preparer

Signature/Plan Preparer

APPLICATION INSTRUCTIONS - Agricultural Manure Applicator's Permit

Purpose:

This form must be completed as part of an application package submitted for DHEC approval of proposed agricultural manure application operations. The required items should be checked to ensure that a complete administrative package has been submitted. If a complete administrative package is not submitted, the entire project may be returned.

Item by Item Instructions:

Section 1 - Farm Information. *Date:* Enter the date of application. *Facility Number:* The Department will assign this number, leave blank. *New or Expanding Operation:* If this application is for an existing manure application operation that has previously obtained a agricultural permit from DHEC, then indicate by checking EXPANDING or NEW for new operations. *Permit Number:* Provide the permit number for the permitted operation and the date on which DHEC issued that permit. *Farm Name:* Give the name of the proposed agricultural manure application operation. *County:* Give the county in which the proposed operation is to be located. *Community:* Give the name of the community in which the proposed operation is to be located. *Location:* Give directions to the proposed operation from the nearest town or state road.

Section 2 - Contact Information. *Permit Applicant:* Enter the name, address and phone number of the person who legally owns the property on which the proposed agricultural manure application operation is to be located. *Manure Applicator's Name, Address, Phone Number:* Enter the name, address and phone number of the person who will be responsible for the manure application. *Manure Hauler's Name, Address, Phone Number:* Enter the name, address and phone number of the person who will be responsible for transporting the manure. *Plan Preparer:* Enter the name of the plan preparer. *Title/SC Registration Number:* Enter the title and SC registration number (if applicable) of the person responsible for the design of the Animal Facility Management plan. *Address, Phone Number:* Enter the business address and phone number for the plan preparer.

Section 3 – Manure Handling & Treatment. *Manure Handling:* Circle DRY or WET to indicate the type of manure handling for this operation. *Manure Broker:* Circle YES or NO to indicate whether a manure broker will be used for contract disposal of the manure from this facility and provide the name of the broker to be used (if applicable). *Exceptional Quality Compost:* Circle YES or NO to indicate whether you are applying for the manure treated at your facility to qualify as exceptional quality compost (must meet product quality standards outlined in Part 300 of R.61-43). *Trained Manure Manager:* Circle YES or NO to indicate whether the manure applicator has attended the certified manure manager's training and certification class conducted by Clemson Extension Service. Indicate the date on which the certification or training was obtained.

Section 4 – Manure Utilization Area Information. This table outlines the required setbacks for manure utilization areas. Enter a tract number and field number for each field; and the actual separation distance for each manure application field in the appropriate spaces. Make copies of this page if you need additional tables for the field information.

Agricultural Permit Application Fees

Facility Type	DHEC Time	Fee
Agricultural Manure Application Operations	90 days	\$165

Section 5 – Permit Application Submittal Requirements. Please check each item that is being submitted as a part of this application. All items under Section 5 should be submitted to DHEC for review. In accordance with the **Environmental Protection Fee Reg. 61-30**, an application fee is required for submitting an Application for agricultural animal facilities. There is a requirement that DHEC meet certain time frames when processing permit applications. The "DHEC Time" is not the total time but rather it is generally the time that DHEC spends working on an application after a complete package is received. "DHEC Time" does not include the time an applicant takes to supply any information that may be requested by DHEC. The fees and time frames are as follows:

Note: Make **CHECKS** payable to SC DHEC/Bureau of Finance.

Regulation R61-30 also authorizes DHEC to assess annual environmental operating permit fees for certain permits. All new facilities must submit payment for the first years operating fee before the permit to construct is issued. The operating fee is \$75 per year for agricultural manure application operations.

Section 6 – Certification. For this section, please read the certification statements and have the appropriate person(s) sign the certification.

DHEC Processing Procedures:

Two (2) copies of the submittal package are submitted to DHEC. After Permitting, DHEC files the original in the main project file, located in DHEC's central office. DHEC sends a copy of the approved package to the appropriate EQC District Office.