

**ATTACHMENT A
ORDER R5-2016-0087**

**NOTICE OF INTENT
FOR
POULTRY OPERATIONS**

Instructions:

1. Complete and submit to the appropriate Central Valley Board Office. Submittal information is located at the end of the Form. **Please include a map with a scale showing the production and land application areas.**
2. Mail the appropriate fee to the State Water Resources Control Board at:

SWRCB Accounting Office
ATTN: Annual Fees
P.O. Box 1888
Sacramento, CA 95812-1888

FACILITY TYPE: _____

CONTACT INFORMATION

A. FACILITY NAME: _____

1. FACILITY ADDRESS: _____

Number and Street City Zip Code

STREET AND NEAREST CROSS STREET (IF NO ADDRESS) _____

2. COUNTY: _____

i. COUNTY ASSESSOR PARCEL NUMBER(S) FOR FACILITY (Production Area):

ii. IS THERE CROPLAND ASSOCIATED WITH THIS FACILITY THAT MAY RECEIVE WASTE OR OTHER MATERIAL FROM THE FACILITY?

NO

YES; IF YES, ACREAGE _____

IF YES, HOW MUCH CROPLAND IS ENROLLED UNDER ILRP?

ALL

SOME

NONE

iii. COUNTY ASSESSOR PARCEL NUMBERS FOR
CROPLAND: _____

B. OPERATOR NAME: _____

1. OPERATOR MAILING ADDRESS: _____

Number and Street City Zip Code

2. OPERATOR'S PHONE NUMBER: _____

3. EMAIL ADDRESS: _____

C. BUSINESS OWNER NAME: _____

1. OWNER MAILING ADDRESS: _____

Number and Street City Zip Code

2. OWNER'S PHONE NUMBER: _____

3. CONTACT PERSON, IF APPLICABLE _____

4. PHONE NUMBER: _____

5. EMAIL ADDRESS: _____

D. NAME OF LEGAL OWNER OF THE PROPERTY: _____

1. OWNER MAILING ADDRESS: _____

Number and Street City Zip Code

2. OWNER'S PHONE NUMBER: _____

3. CONTACT PERSON: _____

4. PHONE NUMBER: _____

5. EMAIL ADDRESS: _____

E. PERSON TO RECEIVE REGIONAL BOARD CORRESPONDENCE (OWNER OR OPERATOR OR BOTH)

1. OWNER: _____

2. OPERATOR: _____

3. BOTH: _____

TYPE OF BIRDS AND SIZE OF THE OPERATION
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Type of poultry	Maximum number of birds housed at the facility in one month between 12/2013 and 12/2016 or the maximum flock size identified in an approved CEQA document)	Current number of birds housed at the facility (specify date of information) Date _____
a. Broilers (Meat Birds)		
b. Laying Hens		
c. Turkeys		
d. Other		

A. HOUSING

- INDOOR, solid sided houses only
- INDOOR, solid-sided houses with access to fenced outdoor area or houses with features to limit the entrance of precipitation and animals do not spend more than an aggregate of twenty percent of the time outdoors (i.e., the time-weighted average number of animals outdoors per day divided by the total number of animals at the facility is less than 0.20);
- PASTURE, animals spend more than an aggregate of twenty percent of the time outdoors (i.e., the time-weighted average number of animals outdoors per day divided by the total number of animals at the facility is greater than 0.20

WASTEWATER AND MANURE/LITTER PRODUCTION
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A. NUMBER OF BIRD HOUSES: _____

B. NUMBER OF STORM WATER PONDS: _____

C. WASTEWATER GENERATION:

WASTEWATER GENERATED: _____ GALLONS/DAY

D. DO YOU HAVE A WASTEWATER STORAGE LAGOON?

YES

NO

IF YES, HOW MANY: _____

DESCRIBE CONSTRUCTION (e.g. EARTHEN, CONCRETE-LINED, SYNTHETIC LINER)

E. LAND APPLICATION:

1. DO YOU APPLY WASTEWATER TO CROPLAND THAT IS PART OF YOUR FACILITY

YES

NO

2. DO YOU APPLY SOLID MANURE/LITTER TO CROPLAND THAT IS PART OF YOUR FACILITY

YES

NO

IF YES, ACREAGE: _____

IF YES, DO YOU HAVE IRRIGATED LANDS REGULATORY COVERAGE?

YES

NO

F. MANURE STORED ON SITE?

NO

YES

IF YES,

COVERED

IN ROOFED STRUCTURE WITH WALLS

UNCOVERED

G. MANURE EXPORTED?

- WITHIN SEVENTY-TWO (72) HOURS AFTER REMOVAL FROM ROOFED STRUCTURE
- STAYS LONGER THAN SEVENTY-TWO (72) HOURS TO FOURTEEN (14) DAYS AFTER REMOVAL FROM ROOFED STRUCTURE
- STAYS LONGER THAN FOURTEEN (14) DAYS AFTER REMOVAL FROM ROOFED STRUCTURE
- DESCRIBE MANURE DESTINATION _____

H. COMPOSTING: - DO YOU HAVE ON SITE COMPOSTING?

- NO
- YES, IF YES, COMPLETE ATTACHMENT A-1

I. BACKFLOW PREVENTION - DO ALL CONNECTIONS TO WELLS HAVE BACK FLOW PREVENTION?

- YES
- NO
- UNDETERMINED

J. IS THERE ONSITE SLAUGHTER OF BIRDS?

- YES
- NO

K. DO YOU USE A WATER TREATMENT SYSTEM ONSITE (EXAMPLE: REVERSE OSMOSIS, WATER SOFTENER, etc.)?

- NO
- YES, TYPE: _____
- IF YES, DESCRIBE HOW BRINE IS HANDLED _____

POULTRY OPERATION TIER

A. DO YOU MEET THE LOW THREAT OPERATIONS TIER IDENTIFIED IN FINDING 4.a.i-vi OF THE POULTRY GENERAL ORDER?

- NO
- YES

IF YES, RESPOND TO THE FOLLOWING:

4.a.i

- ALL MANURE/LITTER IS EXPORTED

OR

- CROPLAND THAT HAS MANURE/LITTER APPLIED IS COVERED UNDER THE IRRIGATED LANDS REGULATORY PROGRAM

4.a.ii

- THE ONLY WASTEWATER GENERATED BY THE FACILITY CONSISTS OF STORM WATER THAT MAY HAVE CONTACTED MANURE AND THE WASTEWATER IS RETAINED IN A POND IN CONFORMANCE TO THE REQUIREMENTS OF POND SPECIFICATIONS C.1 AND C.10.b

4.a.iii

- BIRDS ARE HOUSED INSIDE ROOFED STRUCTURES WITH FEATURES TO LIMIT THE ENTRANCE OF PRECIPITATION INTO THE POULTRY HOUSE

4.a.iv

- ALL WASTE IS STORED IN A ROOFED STRUCTURE WITH FEATURES TO LIMIT THE ENTRANCE OF PRECIPITATION

OR

- THROUGHOUT THE YEAR ALL WASTE IS REMOVED WITHIN 14 DAYS OF REMOVAL FROM A ROOFED STRUCTURE; DURING THE WET SEASON, OCTOBER THROUGH MAY, WASTE STORED OUTSIDE SUCH A ROOFED STRUCTURE MUST EITHER BE REMOVED FROM THE FACILITY WITHIN 72 HOURS OR COVERED WITH A WEATHERPROOF COVERING, EXCEPT FOR TIMES WHEN WIND EVENTS REMOVE THE COVERING, NOT TO EXCEED 24 HOURS PER EVENT

4.a.v

- COMPOSTING OF MANURE, LITTER, OR POULTRY CARCASSES IS CONDUCTED UNDER A COVERED STRUCTURE AND ON CONCRETE OR AN EQUIVALENT LOW PERMEABILITY SURFACE AND FREE LIQUIDS ARE NOT RELEASED DURING THE COMPOSTING PROCESS

4.a.vi

- ANIMALS DO NOT SPEND MORE THAN AN AGGREGATE OF TWENTY PERCENT OF THE TIME OUTDOORS (I.E., THE TIME-WEIGHTED AVERAGE NUMBER OF ANIMALS OUTDOORS PER DAY DIVIDED BY THE TOTAL NUMBER OF ANIMALS AT THE FACILITY MUST BE EQUAL TO OR LESS THAN 0.20) ; ANY OUTDOOR ANIMAL ACCESS AREAS HAVE RUNON/RUNOFF CONTROLS IN PLACE; ANY OUTDOOR WATERING EQUIPMENT MUST BE MAINTAINED TO MINIMIZE SPILLAGE OR LEAKAGE; AND ANY OUTDOOR FEEDING AREA MUST BE MAINTAINED TO REGULARLY REMOVE SPILLED OR WET FEED. MAINTENANCE SCHEDULES MUST BE DESIGNED TO MINIMIZE IMPACTS OF WATER LEAKAGE OR SPILLED FEED ON WATER QUALITY.

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 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 FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

SIGNATURE OF THE OWNER
OF THE FACILITY

SIGNATURE OF OPERATOR
OF THE FACILITY

PRINT OR TYPE NAME

PRINT OR TYPE NAME

DATE:

DATE:

NOI SUBMISSION INSTRUCTIONS

The NOI for facilities in Fresno, Kern, Kings, Madera, Mariposa, and Tulare counties should be submitted to the California Regional Water Quality Control Board, either as a *.pdf by email to:

centralvalleyfresno@waterboards.ca.gov

or by mail to:

California Regional Water Quality Control Board
Central Valley Region
1685 E Street
Fresno, CA 93706
Attention: Confined Animal Regulatory Unit

The NOI for facilities in all other counties should be submitted either as a *.pdf by email to:

centralvalleysacramento@waterboards.ca.gov

or by mail to:

Attachment A
Waste Discharge Requirements General Order No. R5-2016-0087
Poultry Operations

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California Regional Water Quality Control Board
Central Valley Region
11020 Sun Center Drive #200
Rancho Cordova, CA 95670
Attention: Confined Animal Regulatory Unit

When you submit the NOI to the Central Valley Water Board, please be sure to **include a copy of the check** that you send to the State Water Resources Control Board for the fee. A link to the fee schedule can be found here:

https://www.waterboards.ca.gov/resources/fees/water_quality/

Mail the appropriate fee to the State Water Resources Control Board at:
SWRCB Accounting Office
ATTN: Annual Fees
P.O. Box 1888
Sacramento, CA 95812-1888