

**ATTACHMENT A-1
ORDER R5-2017-0000**

**NOTICE OF INTENT (NOI)
FOR
COMPOSTING OPERATIONS AT
CONFINED BOVINE FEEDING OPERATIONS**

Owners and operators of Bovine Operations (Dischargers) who have individual waste discharge requirements, a waiver of waste discharge requirements, or separate coverage under the General Waste Discharge Requirements Composting Operations (WQ 2015-0121-DWQ) for their composting operations do not need to prepare this form.

1. DISCHARGER INFORMATION:

Operator's Name: (if other than operator of the Confined Bovine Feeding Operation):				
Street Address:				
City/Locale:	County	State	Zip	Telephone Number:
Facsimile Number:			Email Address:	

2. COMPOSTING OPERATION INFORMATION:

Type (Check one):	Facility Acreage (acres):
<input type="checkbox"/> Existing Composting Operation	Total Facility Capacity (cubic yards):
<input type="checkbox"/> New Composting Operation	Average Weekly Throughput (cubic yards per week):

3. REASONS FOR FILING:

<input type="checkbox"/> New Discharge	<input type="checkbox"/> Existing Discharge	<input type="checkbox"/> Expansion or Change in Operations
Changes in Owner/Operator:		<input type="checkbox"/> Other:

4. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA):

Has a CEQA determination been made by an Agency? <input type="checkbox"/> YES <input type="checkbox"/> NO	Name of Agency:
Type and Date of Determination	State Clearinghouse Number:

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5. PROCESS

Allowable Materials (Check all that apply, and specify the largest quantity at any time over past 3 years):	
Manure and used bedding cu. yards:	Other material (describe) cu. yards:
Current Processing Capacity:	
Months during which compostable materials will be on-site:	
Additives/Amendments and maximum dry weight percentage used (list):	

6. SITE CONDITIONS FOR TIER 1 COMPOSTING OPERATIONS

For earthen-surfaced composting areas, anticipated highest groundwater elevation (feet relative to mean sea level): _____
Average ground surface material percolation rate (minutes per inch) or attach results of percolation testing: _____
<p>Is composting area roofed?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>Is composting area walled?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>Is composting area on concrete or similar flooring?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>

7. TECHNICAL REPORT

Unless the composting operation meets the exemption criteria under Section F of the Bovine General Order, provide a Technical Report for the composting operation containing the information specified in **Attachment D** to the Composting General Order, State Water Board Order WQ 2015-0121-DWQ.

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8. CERTIFICATION

“I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.”

Signature (Owner or Authorized Representative)	Date
Print Name	Time
Telephone number	Email