



# North Coast Regional Water Quality Control Board

**ATTACHMENT A** 

# NOTICE OF INTENT

TO COMPLY WITH THE TERMS OF ORDER NO. R1-2019-0001

General Waste Discharge Requirements (GWDR) for Dairies

Check The Box That Applies to the Facility:
[] Existing Cow Dairies previously covered by a NCRWQCB dairy permit at the time of adoption of GWDR Order R1-2019-0001. Existing cow dairies with less than 25 milking cows are not required to complete or submit this NOI form.
[] Existing Dairy Facility - only currently operating dairies, such as goat, sheep, or water buffalo dairies, not previously covered by Waiver R1-2012-0003, GWDR R1-2012-0002, or Waiver Renewal R1-2016-0045. Existing goat or sheep dairies with less than 100 milking animals are not required to complete or submit this NOI form.
[] Re-Opening a Previously Inactive Dairy Facility - must have Water Quality Plan upon enrollment; and - must meet the CEQA certification (Attachment F) for this GWDR Order. - dairies with less than 25 milking cows or less than 100 milking goats or sheep are not required to complete or submit this NOI form.
[] New or Expanding Dairy Facility - must have Water Quality Plan upon enrollment; - must meet the CEQA certification (Attachment F) for the GWDR Order; and - must have Nutrient Management Plan for new or expanding dairy size upon enrollment. - dairies with less than 25 milking cows or less than 100 milking goats or sheep are not required to

complete or submit this NOI form.

Correspondence to: [] Facility Owner Address (Section I) [] Lessee/Operator Address (Section II) [] Facility Address (Section III)

#### SECTION I. FACILITY OWNER INFORMATION

Name:	Contact E-mail:
Mailing Address:	Zip Code :
City:	State :
Contact Person:	Contact Phone :

VALERIE L. QUINTO, CHAIR | MATTHIAS ST. JOHN, EXECUTIVE OFFICER

Is the facility currently leased and/or operated by someone other than owner? Yes \_\_\_\_\_ No \_\_\_\_\_ If the answer is no, proceed to section III.

Operator's Name:	Contact E-mail:
Operator's Mailing Address:	Zip Code :
City:	State :
Contact Person:	Contact Phone :

#### SECTION III. FACILITY INFORMATION

Facility Name:	Contact E-mail:
Former Facility Name (if applicable):	
- Physical Address:	State:
City:	Zip Code:
Contact Person:	Contact Phone:

Provide Assessor Parcel Number(s) for entire operation (including grazing/ cropland). Indicate if owned or leased (attach additional sheet if needed).

Parcels Owned:

Parcels Leased:

# Attachment A – Notice of Intent Order No. R1-2019-0001

Operation Type: (check all that apply)				
1. [ ] Cow Dairy 2. [ ] Goat Dairy 3. [ ] Sheep Dairy				
4. [ ] Water Buffalo 5. [ ] Other (list animal type)				
Start Date of Current Operations:				
//				
	luding: manure, litter, silage leachate, process waste or wastewater (including stormwater contac	ting:		
	tons/gallons/acre-feet/etc. (indicate units)			
-				
Maximum design capacity of current confined facility; Report in # of mature dairy animals (milking + dry):				
Dairy Cows:	Goats:			
Other:	Sheep:			
	Water Buffalo:			
The closest receiving water (stream) to the ope	eration facility is:			

# SECTION IV. IMPLEMENTATION OF ORDER PROVISIONS

STATEWIDE MINIMUM STANDARDS FOR CONFINED ANIMAL FACILITIES (check all true statements)

[] Facility is currently operating in compliance with Statewide Minimum Standards for Discharges of Animal Waste (Title 27, see GWDR Order Attachment B)

FACILITY / OPERATION MANAGEMENT (check all that apply to the dairy)

- [] Liquid waste retention ponds and/or manure storage facilities are designed to accommodate the wastewater flow and stormwater contacting confined manured areas that are likely to accumulate up to and during a 25-year, 24hour storm event.
- [] Liquid waste retention ponds and manure storage facilities are managed in accordance with the waste discharge specifications for the GWDR.
- [] All non-manure wastes and/or wastewater such as silage leachate, dead animals, waste milk, veterinary medical waste, spoiled feed, bedding, animal wash water, etc., are contained and managed in accordance with the waste discharge specifications for the GWDR.
- [] All direct and indirect discharges of waste and/or manure, including stormwater contacting waste and/or manure from the animal confinement areas are contained and prevented from entering any surface water or tributary thereof.

or

- [] Existing goat, sheep, and water buffalo dairy operators are aware that they must certify that their facility is structurally and operationally in compliance with all terms and conditions of this GWDR within two years of submittal of enrollment by the Regional Water Board. See GWDR Findings on page 3, paragraphs 8 and 10.
- [] The dairy representative for new, expanding, or reopening of previously inactive dairies is aware that the project must comply with the GWDR including pages 14 to 15, paragraph 50 which states that:
  - a. Any potential impacts to wetlands and vernal pools have been addressed in permits pursuant to CWA sections 401 or 404;
  - b. All dischargers must comply with Fish and Game Code Section 1600 et seq. Lake and Streambed Alteration requirements;
  - c. The Discharger has obtained coverage under the State Water Board's Construction General Stormwater Permit, if necessary;
  - d. The Discharger has obtained a Timberland Conversion Permit, if necessary;
  - e. The development of the dairy is in compliance with any applicable county regulations and ordinances, including grading, construction, building ordinances, and groundwater regulations and ordinances;
  - f. All impacts to special-status species must be fully mitigated; and
  - g. That all potential impacts to cultural resources will be appropriately addressed and mitigated consistent with the Mitigated Negative Declaration (GWDR Attachment F).

#### SECTION V. MONITORING PROGRAM

[] The Monitoring and Reporting Program will be reviewed and all tasks will be conducted as required including surface water and groundwater monitoring.

Please check one regarding required surface water sampling:

- [] The facility will participate in a group surface water monitoring plan approved by the Executive Officer. Name of Group:\_\_\_\_\_\_
- [] The facility will perform individual surface water monitoring.

#### SECTION VI. SUBMITTAL OF THIS NOI FORM:

This NOI must be completed for applicable dairies of the minimum size and submitted to the Regional Water Board no later than <u>November 30, 2019</u>, by existing cow, goat, sheep, or water buffalo dairies, or, prior to enrollment by new, expanding, or reopening previously inactive dairies. Photos of manure ponds must be attached. Please submit this completed NOI form and appropriate enrollment fee (when applicable) to:

North Coast Regional Water Quality Control Board ATTN: Dairy Program 5550 Skylane Blvd., Suite A Santa Rosa, CA 95403

Or email the NOI to: NorthCoast@waterboards.ca.gov

Fees:

Existing cow dairies should not attach payment because they will be billed in December of each year as part of the existing dairy program. New, expanding, re-opening of a previously inactive dairy, or goat/sheep/water buffalo dairies of the minimum herd size, must attach payment with the NOI application. Confined Animal Facilities Fee information can be found at: <u>https://www.waterboards.ca.gov/resources/fees/water\_quality/#animal</u>. Checks should be made out to SWRCB. Other payment type information can be found on the waterboards fees website: <u>https://www.waterboards.ca.gov/make\_a\_payment</u>/

# SECTION VII. LANDOWNER NOTIFICATION AND CERTIFICATION

If the facility is currently leased or operated by someone other than the owner, this section must be signed by the operator. I certify that the owner of the facility has been notified of these General Waste Discharger Requirements and that I have been designated by the owner as the 'authorized representative''.			
Operator's Printed Name:	Signature:		
Title:	Date:		

### SECTION VIII. CERTIFICATION

"I certify under penalty of law that this document and all attachments were prepared under my direction and 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. In addition, I certify that the provisions of the Order, including the implementation of a Monitoring Program Plan, will be complied with."
Owner or Authorized Representative Printed Name*:
Owner or Authorized Representative Signature:
Date:
Telephone Number:
Email:
* A duly authorized person designated by the owner of the confined animal facility, as having responsibility for the overall operation of the regulated facility. The authorized representative may be the confined animal facility operator or operator's

duly authorized designee.