



## **Permit Renewal**

### **Livestock Waste Management Program**

**Instructions: PLEASE PRINT.** Complete all blank lines.  
If you need assistance with completing this form please call  
(785) 296-6432 or your local KDHE District Office.  
Mail completed permit renewal form to:

**LIVESTOCK WASTE MANAGEMENT SECTION  
KDHE - BUREAU OF WATER  
1000 SW JACKSON STREET, SUITE 420  
TOPEKA, KS 66612-1367**

<b>Department Use Only</b> Permit No. _____ Date of Last Inspection _____ Annual Permit Fee Paid: Yes          No
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### **FACILITY IDENTIFICATION**

1. Name of Permittee: \_\_\_\_\_ Date: \_\_\_\_\_

2. Name of Facility: \_\_\_\_\_

3. Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Telephone No. \_\_\_\_\_ Home Telephone No. \_\_\_\_\_

Fax No. \_\_\_\_\_ Cellular Telephone No. \_\_\_\_\_

4. Name of Property owner(s) (if different than Permittee): \_\_\_\_\_

Property owner(s) address (if different than Permittee): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. Person, designated by the permittee, to be contacted by KDHE for additional information or in an emergency:

Name and Title: \_\_\_\_\_ Business Telephone No.: \_\_\_\_\_

Home Telephone No.: \_\_\_\_\_ Cellular Telephone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_ E-Mail address: \_\_\_\_\_

**FACILITY DESCRIPTION**

**6. Legal description of property where facility is located:**

_____	_____	_____	_____	_____	_____	_____
Facility ID	Quarter(s)	Section	Township	South	Range	County
				Circle: E or W		
_____	_____	_____	_____	_____	_____	_____
Facility ID	Quarter(s)	Section	Township	South	Range	County
				Circle: E or W		
_____	_____	_____	_____	_____	_____	_____
Facility ID	Quarter(s)	Section	Township	South	Range	County
				Circle: E or W		

Directions from nearest city or town \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7. The existing livestock operation consists of:**

\_\_\_\_\_ Open Lots or Pens    \_\_\_\_\_ Housed Facilities    \_\_\_\_\_ Both Open/Housed    \_\_\_\_\_ Truck Wash

Other explain: \_\_\_\_\_

\_\_\_\_\_

**8. Have any physical or operational changes been made to the facility that are not described in your current permit?** For example: Added or modified a process or animal waste lagoon, pit, stockpile, etc. Growing an additional or different type of animal(s) than stated on permit (e.g. turkeys instead of chickens, cattle instead of sheep, etc.), or growing different size animals than permitted (e.g. more or less: swine weighing more than 55 pounds or cattle weighing more than 700 pounds).

Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IF YOU HAVE MADE CHANGES, THEN PLEASE CONTACT KDHE AT EITHER THE DISTRICT OR TOPEKA OFFICE.**

**9. Waste Management Equipment:** Indicate the type and size of equipment available for: 1) land application, and 2) transportation of process waste (in any form: liquid, slurry, or solid). And for each piece of equipment whether it is owned, leased, or contractor provided:

<b>Equipment Description</b> (55 hp tractor, high lift, pto driven pump, manure wagon, honey wagon, center pivot, traveling gun, etc.)	<b>Equipment Purpose</b> (transportation, collection, land application, agitate manure in basin, etc.)	<b>Capacity</b> (gallons per minute, gallons, bushels, acres, cubic yards, etc.)	Owned (O), Leased (L), or Contractor=s (C)

**PUBLIC NOTICE REQUIREMENTS**

In order for KDHE to provide adequate public notice of permitting actions, it is strongly recommended you provide: 1) a list of the land owners (with the land owner’s mailing address) with all or a portion of their property within one mile of your facility, and 2) if the land owner’s property has a habitable structure located within one mile of your facility on it, then also provide the mailing address of the habitable structure.

KDHE is required to provide public notice of permit renewal information to the Kansas Register. If addressees are provided with this renewal application, then KDHE will mail notification to the addresses also. The notification will inform the owners of KDHE’s intent to reissue your permit.

You should update your list each time you apply for renewal of your permit to ensure adequate public notice will be provided by KDHE. Attached to this application is a Habitable Structure/Property Owners List form for your use.

## ANIMAL UNITS VERIFICATION

Please complete the table below. Be certain to identify all the types of animals that you have at your facility. Each pig, weaned or unweaned, weighing 55 pounds or less must be counted as 0.1 animal units. Similarly, for permitting purposes, dairy facilities must count calves and heifers weighing less than 700 pounds as 0.5 animal units and bulls, and heifers weighing more than 700 pounds as 1.0 animal unit. Lactating and dry dairy cows should be counted as 1.4 animal units, etc.

**Note: Fees will be based upon maximum permitted capacity of the facility or facilities covered under this application, not animal units present. The permit fee must be paid annually in order for you to maintain a valid permit.**

Type of Facility*	(A) Maximum Number of Head	(B) Animal Unit Conversion Factor	(C) Maximum Animal Units (A x B)
Swine weighing more than 55 pounds		0.4	
Swine weighing 55 pounds or less		0.1	
Cattle weighing more than 700 pounds		1.0	
Cattle weighing less than 700 pounds		0.5	
Mature Dairy Cows (Lactating and Dry)		1.4	
Sheep/Lambs/Goats		0.1	
Turkeys		0.018	
Laying Hens/Broilers w/ continuous overflow watering		0.01	
Laying Hens/Broilers w/ liquid manure system		0.033	
Chickens (other than Laying Hens) w/ other than liquid manure system <sup>1</sup>		0.008	
Laying Hens w/ other than liquid manure system <sup>1</sup>		0.0122	
Horses		2.0	
Ducks w/ liquid manure system		0.2	
Ducks w/ other than liquid manure system		---	
Other- <i>specify species</i> _____			
<b>TOTAL NUMBER OF ANIMAL UNITS (AU) (Sum of all numbers in Column C)</b>			

\*Minimum EPA thresholds requiring an NPDES permit are: 700 head of mature dairy cows (lactating or dry), 1,000 head of veal calves, 1,000 head of cattle other than mature dairy cows or veal calves, 2,500 head of swine weighing greater than 55 pounds, 10,000 head of swine weighing 55 pounds or less, 500 horses, 10,000 sheep or lambs, 55,000 turkeys, 30,000 laying hens/broilers w/ liquid manure system, 125,000 chickens other than laying hens w/ other than liquid manure system, and 82,000 laying hens w/ other than liquid manure system.

<sup>1</sup> Use a 0.033 AU conversion factor if the manure from chicken facilities that only use dry litter systems is exposed to precipitation during collection, when stored in stockpiles, or land applied without incorporation into the soil within 24 hours.

**PERMIT FEE**

Permit Fee Calculation Table

Facility Capacity in Animal Units (AU) or Type	Annual Permit Fee
999 AU or less	\$25
1,000 to 4,999 AU	\$100
5,000 to 9,999 AU	\$200
10,000 AU or more	\$400
Private Truck Washing Facility (two or fewer owned trucks)	\$25
Private Truck Washing Facility (three or more owned trucks)	\$200
Commercial Truck Washing Facility	\$320

Please make check payable to:  
**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT**

**PLANS REQUIRED FOR RENEWAL**

- **Waste Management Plan** for facilities that are less than the EPA thresholds listed on the bottom of page 4
- **Nutrient Management Plan** for facilities that meet or exceed the EPA thresholds listed on the bottom of page 4
- **Nutrient Utilization Plan and Odor Control Plan** for swine facilities with 1,000 AU or more
- **Closure Plan** for swine facilities with 3,725 AU or more

**Reminder - Financial Assurance for facility and waste retention lagoon or pond closure is due annually for swine facilities with 3,725 AU or more**

**SIGNATURE/CERTIFICATION**

I hereby certify that the information submitted and/or attached is true and correct to the best of my knowledge and belief.

I hereby make application to the Kansas Department of Health and Environment for the renewal of the water pollution control permit for the facility described in this application in conformance with K.S.A. 65-171d et seq. and K.A.R. 28-18-1 through 17 and/or K.A.R. 28-18a-1 through 33.

Signature \_\_\_\_\_

\_\_\_\_\_ Date Signed

\_\_\_\_\_  
(Print Name and Title)

This application is to be signed by the following: a) In the case of a corporation, by the principal executive officer of at least the level of Vice President; b) in the case of a partnership, by a general partner; and c) in the case of a sole proprietorship, by the proprietor.

## Habitable Structure/Property Owners List

Using the format provided please record the name, address, city, state, zip code of the owner, distance from the facility, and direction from the facility, of **all property owners and habitable structures within 1 mile of the facility<sup>1</sup>**. Habitable structures means any of the following structures which is occupied or maintained in a condition which may be occupied and which is owned by a person other than the operator/owner of such facility: a dwelling, church, school, adult care home, medical care service, child care facility, library, community center, public building, office building, licensed food service, lodging establishment, parks, and wildlife refuge.

Name	Mailing Address (address, city, state, zip)	Direction	Distance*
1.			
2.			
3.			
4.			
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6.			
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9.			
10.			
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20.			

\*Only required if an expansion or modification has been done or proposed. As measured from the current or approved proposed maximum extent of the facility structures such as building or wastewater lagoons.

<sup>1</sup>New and expanding **swine** facilities with 1,000 or more AU of swine should also provide this information **for habitable structures within 1,000 feet of any land application area.**