

# **GENERAL INSTRUCTIONS**

## **FOR COMPLETING THE KDHE LAND APPLICATION WORK PLAN**

These instructions will assist the preparer to complete the KDHE Land Application Work Plan for land application of contaminated soil and/or water. The Work Plan is to be typed, or legibly printed in ink.

### **1. FACILITY OR INCIDENT INFORMATION:**

In section one, provide the name of the facility, or business from which the soil or water is to be removed and land applied. If the contaminated material is not located at a facility, for example the spill occurred in the field, the KDHE spill report number for the incident is to be provided. Provide the street address or location of the facility or incident, the mailing address of the owner of the property, the name of the contact person who will be responsible for communication with KDHE and that contact person's title within the company controlling the facility, and the telephone number where the contact person can be reached.

Provide the KDHE identified sites list number, spill incident number, the Consent Order (CO) number, or the Voluntary Cleanup and Property Redevelopment Program (VCPRP) Agreement number for the site.

### **2. PROPOSED LAND APPLICATION SITE:**

Provide the name, mailing address, county, and telephone number of the owner, or contact person for the property (if different from owner), on whose property the contaminated soil or water will be land applied. Give the legal description to the nearest 1/64<sup>th</sup> of the section of the location where the material will be land applied, (i.e. NW<sup>1</sup>/<sub>4</sub>, NW<sup>1</sup>/<sub>4</sub>, NW<sup>1</sup>/<sub>4</sub> of Section 12, Township 4, Range 18W). Provide printed or typed directions to the land application location from the nearest town, including miles and significant landmarks, along with a detailed map of the proposed land application location.

### **3. PROPOSED DESCRIPTION OF WORK:**

Indicate the type of material (soil, water) and contaminants of concern to be land applied by checking the appropriate boxes. Indicate the proposed start and completion dates of the land application. Note that land application of soil will not be permitted during periods when the land application site is frozen and the applied material cannot be incorporated.

Indicate the total proposed quantity of material to be land applied (if soil, cubic yards; if groundwater, gallons), along with the maximum concentration of the contaminant detected and the crop or land use of the proposed land application site.

An application rate for the contaminated material must be determined by a certified agronomist or crop advisor. In addition, the Kansas State Extension Agronomy or NRCS offices may also determine application rates; however, the determined rates must be signed off on by a certified agronomist/crop advisor.

**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT  
BUREAU OF ENVIRONMENTAL REMEDIATION**

**LAND APPLICATION WORK PLAN FOR SOIL OR WATER FROM  
AGRICULTURAL CHEMICAL INCIDENTS OR SITES**

***REFER TO THE GENERAL INSTRUCTIONS PRIOR TO COMPLETING THIS WORK PLAN***

**1. FACILITY OR INCIDENT INFORMATION:**

Facility or Incident Name:	KDHE Identifier or Agreement Number:
Street Address or Location:	Mailing Address (if different from street address):
City/Zip:	Contact Person:
Title of Contact Person:	Telephone: (    )

**2. PROPOSED LAND APPLICATION SITE:**

Property owner/contact person:	
Legal description of property:    Section _____    Township _____    Range _____	
Directions to land application site:	
Mailing address:	City / Zip:
County:	Telephone Number: (    )
<input type="checkbox"/> <b>Map, or aerial photograph must be provided with specific identification of proposed land application site</b>	

### 3. PROPOSED DESCRIPTION OF WORK

Media to be land applied: <input type="checkbox"/> Soil <input type="checkbox"/> Water	Contaminants of Concern: <input type="checkbox"/> Fertilizers <input type="checkbox"/> Pesticides <input type="checkbox"/> Herbicides
Proposed land application start date: ___/___/___	Proposed land application completion date: ___/___/___
Total Cubic Yards of Soil to be Land Applied: _____ Yd <sup>3</sup>	Total Gallons of Water to be Land Applied: _____ Gals
Maximum concentration of contaminant to be Land Applied: _____	Crop/Use of proposed land application site: _____
Application rate: _____	Acres for land application: _____
Application rates and necessary acreage determined by: <input type="checkbox"/> Certified Professional Agronomist*** <input type="checkbox"/> Certified Crop Advisor*** <input type="checkbox"/> Kansas State Extension Office <input type="checkbox"/> <b>NRCS Office</b>	

#### DISCLAIMERS

\*Development of this land application work plan must account for all Applicable or Relevant and Appropriate Requirements (ARARs). These ARARs include, but are not limited to, proper permitting through KDHE Bureau of Water (BOW), compliance with restrictions mandated by state and federal pesticide laws as regulated by Kansas Department of Agriculture (KDA) Pesticide and Fertilizer Program, and proper permitting by KDHE Division of Water Resources (DWR) for extraction of groundwater.

\*\*A BOW discharge permit is not required for Bureau of Environmental Remediation (BER) land applications, provided the land application work plan is consistent with BOW regulations. These regulations include: no earthen groundwater containment ponds, no application during runoff conditions (e.g. frozen/saturated ground, snow, etc.), no exceedance of application rate as determined by the certified agronomist/crop advisor, and a minimum of annual reporting to BER.

\*\*\*“certified crop adviser” or “certified professional agronomist” must be certified through either the American Society of Agronomy or through the Kansas Certified Crop adviser program. If you would like to be more information regarding the certification program for certified crop advisers or certified agronomists that will sign off on the land application forms, consult the links explaining these certification programs:

- a) <https://www.certifiedcropadviser.org/about-program>
- b) <http://www.ksagretailers.org/mx/hm.asp?id=CCAProgram>