

**Annual Reporting Form
Concentrated Animal Feeding Operation (CAFO)**

The Environmental Protection Agency's National Pollutant Discharge Elimination System Permit Regulations (40 CFR Part 122.42) effective April 14, 2003, requires that all CAFOs must submit an annual report to the Permitting Authority. This report requires basic information needed to document the performance of the CAFO relative to permit requirements.

I. GENERAL INFORMATION

A. PERMIT NUMBER: _____

B. REPORTING PERIOD: _____ TO _____

C. FACILITY INFORMATION

Facility Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

County: _____ Latitude: _____ Longitude: _____

Telephone: (_____) _____ Fax: (_____) _____

If contract operation:

Name of Integrator: _____

Address of Integrator: _____

D. CONTACT INFORMATION

Owner/Operator Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (_____) _____ Fax: (_____) _____

I. CAFO CHARACTERISTICS

A. TYPE AND NUMBER OF ANIMALS

1. Animal Type	2. Number of Animals	
	Number Housed Under Roof	Number in Open Confinement
<input type="checkbox"/> Chickens (Broilers)		
<input type="checkbox"/> Chickens (Layers)		
<input type="checkbox"/> Swine (55 lb. or over)		
<input type="checkbox"/> Swine (under 55 lb.)		
<input type="checkbox"/> Mature Dairy Cows		
<input type="checkbox"/> Dairy Heifers		
<input type="checkbox"/> Cattle		
<input type="checkbox"/> Other: Specify _____		

B. MANURE, LITTER, AND/OR WASTEWATER PRODUCTION AND USE

- How much manure, litter, and/or wastewater was generated in the previous 12 months by the facility? _____ Tons; _____ Gallons
- If land applied, how many acres of land under the control of the owner/operator were used for land application of manure, litter, and/or wastewater in the previous 12 months? _____ Acres
- How many acres of land are covered by the nutrient management plan for land application use? _____ Acres
- How much manure, litter, and/or wastewater was transferred to other persons in the previous 12 months? _____ Tons; _____ Gallons

C. DISCHARGE SUMMARY

1. Describe all discharges of litter, manure, and/or wastewater from the production area that have occurred in the previous 12 months. (___ No discharges occurred)

a. Date:_____ Time:_____ Approx. Volume:_____

Reason:_____

b. Date:_____ Time:_____ Approx. Volume:_____

Reason:_____

Use separate sheet if further explanation is necessary.

E. NUTRIENT MANAGEMENT PLAN

1. Was facility's current nutrient management plan developed or approved by a certified nutrient management planner? (Yes/No) _____

F. CONTINUING EDUCATION

1. Has the facility Owner/Operator completed the recommended hours of annual MDEQ approved technical training? (Yes/No) _____

2. Indicate the number of hours completed in past 12-month period. _____

Attach all certificates of training.

II. OWNER/OPERATOR 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 this 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.

Print Name:_____

Signature:_____ Date:_____

Permittee intends to continue operations into the next reporting period: (Yes/No) _____

Submit completed form by January 15, 2006, to: Mississippi Department of Environmental Quality
Chief, Environmental Permits Division
PO Box 10385
Jackson, MS 39289-0385