



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 WATER PROTECTION PROGRAM
**FORM F- APPLICATION FOR CONSTRUCTION PERMIT FOR
 CONCENTRATED ANIMAL FEEDING OPERATION (CAFO)**

FOR OFFICE USE ONLY	
CHECK NUMBER:	
DATE RECEIVED	FEE SUBMITTED

FOR OFFICE USE ONLY		
PERMIT NUMBER	APPLICATION NUMBER	TRACKING NUMBER

PART 1 – PERMIT ACTION

1.1 PERMIT ACTION
 NEW OPERATION SYSTEM MODIFICATION IRRIGATION PIPELINE OTHER

2.0 REQUIRED INFORMATION (If any questions below are answered NO, this application may be considered incomplete and returned)

2.1	Is the appropriate fee included with the application?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.2	Facility layout drawings on aerial and topographic maps?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.3	Construction plan drawings?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.4	Technical Specifications?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.5	Engineering report includes:		
2.5.1	Narrative project summary?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.5.2	Project location map?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.5.3	Operation and Maintenance Plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.5.4	Soils Report for production area?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NA
2.5.5	Technical information and design data and calculations?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.6	Geohydrological Evaluation by the Division of Geology and Land Survey (Earthen Manure Storage Basin)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NA
2.7	Neighbor notice documentation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NA
2.8	Emergency response plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NA
2.9	Nutrient Management Plan that meets the requirements of 10 CSR 20-6.300 (5)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NA
2.10	Has an engineer sealed the engineering documents?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2.11	Has a Form W – CAFO Operating Permit Application with fee been included in the submittal?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NA

PART 3.0 – APPLICANT INFORMATION

3.1 OPERATION NAME	OPERATING PERMIT NUMBER IF CURRENTLY PERMITTED MO-	EXPIRATION DATE
PHYSICAL ADDRESS	TELEPHONE NUMBER WITH AREA CODE	
CITY	STATE	ZIP CODE
LOCATION ¼, ¼, Sec. , TWP , RGE	COUNTY	
3.2 OWNER (PROVIDE LEGAL NAME)	E-MAIL ADDRESS	
MAILING ADDRESS	TELEPHONE NUMBER WITH AREA CODE	
CITY	STATE	ZIP CODE
3.3 CONTINUING AUTHORITY (IF DIFFERENT THAN THE OWNER)		
MAILING ADDRESS	TELEPHONE NUMBER WITH AREA CODE	
CITY	STATE	ZIP CODE

PART 4.0 – OPERATIONAL INFORMATION

4.1 BRIEF DESCRIPTION OF OPERATION

4.2.1 IF CURRENTLY PERMITTED, HAVE THERE BEEN ANY CHANGES TO THE SYSTEM SINCE THE CURRENT PERMIT? Yes No

4.2.2 ATTACH PERTINENT INFORMATION (SEE INSTRUCTIONS)

4.3 OPERATIONAL INFORMATION (SEE INSTRUCTIONS)
 SIC Code(s) Class Size

4.4 WILL THIS BE OR IS THIS AN "EXPORT ONLY" OPERATION? Yes No

PART 5.0 – SIGNATURE

NAME	TITLE
SIGNATURE	DATE

Required Information for Construction Permit

Refer to 10 CSR 20-6.300 and 10 CSR 20-8.300.

INSTRUCTIONS

PART 1.0 – PERMIT TYPE AND ACTION

Complete PARTS 1-5 for permit applications.

- 1.1 Check which type of construction permit is required.

PART 2.0 – APPLICATION INFORMATION – This information required for a complete application. Regulatory citations are listed below for each item. Check the appropriate box for each item as requested.

- 2.1 10 CSR 20-6.011 Appendix A.
2.2 10 CSR 20-8.300(3)(A)2.
2.3 10 CSR 20-8.300(3)(A)3.
2.4 10 CSR 20-8.300(3)(A)4.
2.5 10 CSR 20-8.300(3)(A)1.
2.5.1 10 CSR 20-8.300(3)(A)1.E.
2.5.2 10 CSR 20-8.300(3)(A)1.C.
2.5.3 10 CSR 20-8.300(3)(A)1.H.
2.5.4 10 CSR 20-8.300(3)(A)1.G, 8.300(7)(B), (8)(A), and (9).
2.5.5 10 CSR 20-8.300(3)(A)1.F.
2.6 10 CSR 20-8.300(3)(B)2. and (7)(A).
2.7 10 CSR 20-6.300(3)(C) and 8.300(3)(B)1.
2.8 10 CSR 20-8.300(3)(B)3.
2.9 10 CSR 20-8.300(3)(C).
2.10 10 CSR 20-6.300(2)(F)3. and 8.300(3)(A).
2.11 10 CSR 20-6.300(2)(F)1.

PART 3.0 - PERMIT OWNERSHIP AND CONTACT INFORMATION

- 3.1 General location and contact information for the operation. Operation name is name you wish to have the operation permitted listed as or as it is listed on the current operating permit. Do not use P.O Box or RR for physical address of the operation.
3.2 Provide the name of the legal entity that owns or operates the CAFO facility.
3.3 List the Continuing Authority, if it is the same as the Owner enter "Same as above". The Continuing Authority is the permanent organization or party, responsible for operation and maintenance of the CAFO. All corporate entities are to be registered with the Secretary of State's office.

PART 4.0 – OPERATIONAL INFORMATION

- 4.1 Provide a brief description of the operation, including the total number of animals, buildings, and the manure and mortality management systems. If the operation currently is permitted, describe the changes that are to be implemented during the new construction.
4.2.1 If the operation is currently permitted and changes been made that are not covered in the new application, check yes; otherwise check no.
4.2.2 If you answered yes to 4.2.1, provide details about the changes.
4.3 Enter SIC codes in decreasing order by animal units, for each animal type in confinement.

Animal Type	SIC Code	Animal Type	SIC Code	Animal Type	SIC Code
Beef cattle feedlots	0211	Dairy cows	0241	Turkey/turkey layers	0253
Hogs	0213	Broilers	0251	Poultry hatcheries	0254
Sheep/goats	0214	Chicken layers/pullets	0252	Horses	0272

CAFO Class Size. Enter CAFO Class Size based on AU. Class IB 3000-6999, Class IC 1000-2999, Class II 300-999.

(NOTE: To meet the definition of a Class I operation you must have 1000 Animal Units of one animal category. Once an operation is Class I, animal units from all animal categories are added together to determine Class IA, IB or IC.)

- 4.4 Indicate whether "all" the manure, litter, and process wastewater at this CAFO is "exported" off the farm (exported means sold or transferred to another party). If any amount of manure litter, and process wastewater is land applied on land owned, leased or controlled by the CAFO's owner, then it is not an "export only" operation.

PART 5.0 - SIGNATURE

Sign and date the application.

Mail complete application to:

Missouri Department of Natural Resources
Water Protection Program
P.O. Box 176
Jefferson City, MO 65102

If there are any questions concerning this form, please contact the Department of Natural Resources, Water Protection Program at 573-751-1300 or by email at waterag@dnr.mo.gov.