## NPDES Compliance Inspection Manual

Appendix AJ



EPA Publication Number: 305-K-17-001 Interim Revised Version, January 2017

## Appendix AJ – Regional Inspections Checklists

## **REGIONAL INSPECTION CHECKLIST**

PROGRAM YI GEORGIA DEPARTMEN LIVESTOCK/POULTR AFO/CAFO INS	T OF AGRICULTURE			LAS	D S CL	
GENERAL INFORMATION:						
Inspector's Name:			Inspector's Nu	umber:		
GDA Est #:	Landowner's Name:			Da	ate:	
Landowner's Mailing Address:				County:		
City:	State:		Zip:	Phone#:		
Farm Name:		Person Po	ermit Issued to:			
Farm Physical Address:						
City:	Zip:	County:		Phone#:		
Landowner's E-mail:			Operator's E-ı	mail:		
Certified Animal Feeding Opera	ator:			Certificat	tion #:	
Operator's Mailing Address:						
Copy of Certificate on-site:	☐ Yes ☐	# Hours o	f Continuing Educ	ation Last Year:	:	
Documentation for Continuing Ec	lucation provided to G	DA:			Yes	□ *No
Comments:						
RECORDS:						
NPDES Permit #			Copy of Permi	t on-site	□Yes	□ *No
Has Permit been extended:	☐ Yes ☐ *No	Copy of P	ermit Extension o	n-Site:	☐ Yes	□ *No
NPDES Annual Report Submitted	letter on-site:	☐ Yes	□ *No	Date Sub	mitted:	
Size and Type of Operation:				3 Swine □ Da	iry 🗖 Commerc	ial Layer
Does this CAFO have an approved	MP?		☐ Yes ☐ *	No 🗆 Pending (	only if NMP is sub	omitted)
Date of NMP approval by EPD:		Copy of a	pproved NMP on-	-site:	☐ Yes 〔	□ *No
Has farm completed an annual as				☐ Yes □	⊒ *No	

f "yes" list changes that have been made to the operation since last inspection?
- Yes not share been made to the operation since has mapped on
Are Daily Rain Records on-Site:
The Daily Nail Records on-Site.
Weekly Log of Waste Water Impoundment Liquid Level on-Site? ☐ Yes ☐*No
Date of last recorded Liquid Level measurement: (NPDES weekly)
Are Records of Weekly Inspection & Maintenance of all manure storage & Yes *No nandling structures, and run off management on-site?
Liquid Application records on-site:   Yes   *No   COMPLETE PAGE 2A - before continuing
Does it appear the farm is over applying in regards to their NMP? $\Box$ Yes $\Box$ *No
Does liquid application records contain field, acres, date, rate, crop, crop yield, duration of
rrigation, number of sprinklers, total volume applied, and total nitrogen applied?   Yes  *No  *Partial
f farm has a solid separator how much is applied on the farm tons?
Does solid application records contain field, acres, date, rate, crop, crop yield,
otal volume applied, and total nitrogen applied, or total nitrogen per acre?
s Commercial Fertilizer applied to fields where any type of manure is applied? $\ \Box$ Yes $\ \Box$ No
f answer is "Yes" provide analysis of fertilizer and quantity applied per acre:
Does the approved NMP include commercial fertilizer in the nutient budget worksheet? $\square$ Yes $\square$ *No
Any Rental/Lease agreements for manure/waste water applied off farm? ☐ Yes ☐ No ☐ N/A
Are the agreements included in the NMP? $\;\square\;$ Yes $\;\square\;$ *No
Are all Application fields on map(s) included in NMP?   Yes   *No
What is the maximum liquid level in the NMP (measured downward from top of embankment):
Comments:
APPLICATION EQUIPMENT:
Specify Type of Liquid Manure Application Equipment:
s Equipment?

Date of last Calibration?	Attacl	n Copy of	Annual Calibra	ation
Specify Type of Dry Manure Application Equipmen	t:			□ N/A
Is Equipment? 🗆 Owned 🔲 Rented (	or Leased 🔲 (	Custom /	Applied	
Date of last Calibration?	Attacl	n Copy of	Annual Calibra	ntion
Solids Separator:		<b>-</b> 0	pen Area	☐ Under Shelter
Is storage pad area covered, bermed, curbed, an	d guttered, or buffere	d? Desc	ribe.	
Are record available showing maintenance of ag	pplication equipment?		☐ Yes □	□ *No
Comments:				
SOIL/WASTE WATER/MANURE/MONITORING WE	LL TESTING:			
Date, time, exact location, and name of person res soil sampling, and monitoring well sampling.	ponsible for most recer	nt manur	e and waste	water sampling,
Manure:			Testing	
Waste Water:			Testing	
Soil:			Testing	
Monitoring Well:			Testing	
Semiannual manure, separated solids, waste wate	r analysis.		□ Yes □ *	No
Records of annual soil sampling of each applicati	on field.		☐ Yes ☐ *	No
Does the annual soil sampling report include so	il pH and soil test?			
Phosphorus level measured by Mehlich-1 Extract	ion or Double Acid?		] Yes □ *	No
Are Records on-site showing date, name, and addr manure transferred to others?	•	ity of ma □ *No	nure and nu	trient analysis of
Comments:				
MONITORING WELLS:				
Are the monitoring wells shown on the NMP Maps	?	☐ Yes	s □ *No	
If no, has plan for installation of monitoring well be	een submitted?	☐ Yes	s □*No	
Does the facility have monitoring wells for each wa	aste water system?	☐ Yes	s □ *No	

Does the facility have a monitoring well down gradient of lagoon/storage pond?	☐ Yes	□ *No
Does monitoring well records show Nitrate Nitrogen level greater than 10ppm?	☐ Yes	□ *No
What were the results for last year? (2) and dates taken.	☐ Yes	□ *No
Describe any actions taken to reduce level of Nitrate Nitrogen.		
Comments:		
EMERGENCY ACTION PLAN:		
Does this operation have an Emergency Action Plan?	☐ Yes	□ *No
Is the plan included in the NMP?	☐ Yes	□ *No
Are Emergency numbers posted for all employees to attain?	☐ Yes	□ *No
Emergency Operations Center 24 Hour Spill Reporting should be contacted to repcases where EPD District Office personnel are not available. Spill Reporting Teleptare (800) 241-4113		
Comments:		
ANIMAL MORTALITY:		
Describe the animal mortality plan for this operation:		
Has a soil investigation been conducted for the disposal site? If "no", give the dat performed:	e that inve Ye	
Does this facility have a catastrophic mortality disposal plan?	☐ Ye	s 🗆 *No
Does facility have verification of approved burial site?	☐ Ye	s 🗆 *No
Comments:		
OUTSIDE INSPECTION		
MEDICAL/CHEMICAL BY-PRODUCT DISPOSAL:		
Does this operation have a disposal plan for disposing of medical and/or chemical introduction into manure or wastewater except when used in accordance with the	ne product	label?
If "yes" briefly describe method?	□ Y	es 🔲 No
Is there evidence of oil, petroleum based products, or chemical spills on-site?		Yes □ No

Comments:				
MONITORING WELL:				
Are monitoring wells being maintained properly and kept free	e of grass, w	eeds, and anim	nal burrows?	)
			☐ Yes	□ No
Are the monitoring wells installed in location on maps?			□ Yes	□ No*
Comments:				
ANIMAL MORTALITY:				
Does it appear that animal mortality disposal through observ	ation meets	current Depar	tment of	
Agriculture Rules?				No
Comments:				
DIVERSION OF CLEAN WATER:				
Is storm water diverted from waste water impoundment?			☐ Yes	□ No
If "yes", are the diversion provisions being properly implem If "no", is the runoff being collected and is the storage volu			☐ Yes	□ No
impoundment designed to contain the runoff?			☐ Yes	□ No
Is runoff from open lots, holding pens, and loafing areas b	uffered or d	iverted into		
the waste water storage system?			☐ Yes	☐ No
	Yes 🗖 No	Is the facility r	ecycling?	l Yes □No
Do livestock have access to surface waters on the farm whi		ement? 🔲 *	Yes 🗆 1	No
Is all waste water diverted into the waste water impound	lment?			
(including hoof wash, parlor, holding areas, etc.).		□ Y	'es ⊔ '	<sup>k</sup> No
Comments:				
WASTE WATER IMPOUNDMENT STRUCTURE:	GPS:	N	W	
Is embankment(s) grassed, free of erosion, rodent tunnels,	cracks or ot	her damage?		∕es □ *No
lf "no" describe:				
Is embankment free of woody vegetation, briars, etc.		□ Y	'es □*No	)
Date of last brush and/or weed control (mowing, spraying	g, etc.) of the	e embankmen	t:	
Does waste water impoundment have a permanent deptl	h marker wi	th?		
maximum liquid level indicated?				]*No
Estimated number of inches between liquid level and lowest of inspection:	point on top	of berm/emba	ankment/da	m at the time
Is liquid level at time of inspection above or below maximu	m			
liquid level stated in NMP?			□*Above	□Below
Is this waste water storage structure a zero discharge struc	ture?			□ *No
Does it appear that the waste water storage structure has I	had a recent	overflow?	□ *Yes	□ No

If "yes", was the overflow the result of a chronic or catas	trophic even	t? ☐ Yes	☐ No			
Describe the event; include date, time and estimated ar						
If overflow resulted in a discharge, give test results of the	ne BODS and	TSS levels:				
Liquid level before overflow:	Liquid lev	el after overflow:				
If, for any reason, there is a discharge of pollutants to	a water of the	e US, the permittee is re	equired to make			
immediate oral notification within 24-hours to the local	al Division Dis	trict Office (or, if after o	office hours, the			
Georgia Department of Natural Resources Emergency	Operations C	Center, 1-800 -241-4113	) and notify the			
Division District Office in writing within five (5) working days of the discharge from the facility.						
Comments:						
APPICATION EQUIPMENT & LAND APPICATION SITE:						
ls Liquid Manure Application Equipment?	Owned	☐Rented/Leased	☐ Custom			
ls Dry Manure Application Equipment?	Owned	☐Rented/Leased	☐ Custom			
Is there a vegetated buffer between the application fiel	ds and down	?				
gradient surface waters, sinkholes, open tile line intake s	tructures, et	c.?	Yes 🔲 No			
Estimated width of the vegetated buffer in feet:						
Are ditches, grassed waterways, terraces, diversions, sw	ales or othe	r water conveyance in t	the application			
fields?		☐ Yes	☐ No			
Is land application of manure/waste water is being appli	ed at agrono	mic rates?	□ No			
Is there evidence of improper land application of manure						
drainage ditches, flooded areas, applying during a rainfall	event, on froz		=			
		☐ Yes	□ No			
lf "yes" describe:						
Comments:						

The Georgia Department of Agriculture's review of the animal feeding operation does not relieve the operator from adherence to provisions and requirements contained in the Land Application System (LAS) or National Pollution Discharge Elimination System (NPDES) permit issued for the feeding operation or to rules and regulations issued by the Georgia Department of Natural Resources (DNR), Environmental Protection Division (EPD) and/or US Environmental Protection Agency (EPA).

Any violation identified on this inspection report must be addressed immediately and a completion date agreed to by the producer. Any violation that results in a discharge or damage to the "Waters of the State" will be reported immediately to the Department of Natural Resources, Environmental Protection Division.

Re-	inspection D	ate: (If Needed)		
Farm Representativ	e/Title	Date	GDA Representat	ive
Inspection was reviewed for comp	leteness and	adequacy by:		Date :
Inspection was reviewed for comp	leteness and	adequacy by:		Date :
Inspection should have 2-A, Cal	libration Dod	cumentation and	Inspection Summary atta	ached.
Contacts:				
Environmental Management Di	istrict Office	s:		
Mountain District (Cartersville)	P.O. Box 32	250, Cartersville,	Ga 30120-1705	(770) 387-4900
West Central District (Macon)	2640 Shurl	ing Drive, Macon	31211-3576	(478) 751-6612
Costal District (Brunswick)	400 Comm	erce Center Dr, E	Brunswick 31523-8251	(912) 264-7284
Southwest District (Albany)	2024 Newt	on Road, Albany	31701-3576	229) 430-4144
Northwest District (Athens)	745 Gaines	School Rd, Athe	ns 30605-3129	706) 369-6376
Northeast District (Augusta)	1885-A Tol	oacco Road, Augi	usta 30906-8825	706) 792-7744
Mountain District (Atlanta)	4244 Interi	national Parkway	St 101, Atlanta, Ga 3035	4 404) 362-2671
A copy of this Report was m	nailed or e-r	mailed to the _		<del></del>
District Office of EPD by				
on (date)				

A. GENERAL INFO	ORMATION (Shaded box	es are for insp	ector t	o fill ir	inder	endently)		
FACILITY NAME ( proprietorship, e	LLC, Inc., Corp, Partnersletc. If facility representates arry of State's website to	hip, sole tive is unsure	look			ON DATE	ARRIVAL TIME	
ADDRESS					PECTC TIALS	PR(s)	DEPARTURE TIME	
CITY STATE		ZIP (	CODE	STA	ATE INS	SPECTOR (if p	resent)	
LEGAL DESCRIPTION (latitude and longitude)		de) COUI	NTY		TEMP	ERATURE	PRECIPITATION TYPE	
Facility Owner(s) (Ask for formal name and obtain a business card,	NAME	·				PHONE		
letter head or other documentation)	NAME					PHONE	ONE	
Facility Operators	NAME					PHONE		
(If different than the owner)	NAME					PHONE		
Is the Animal Facility a CAFO? YES NO	CAFO Classification? (Medium or Large?)	CAFO Designate (If a designate CAFO)		Desigi CAFO)		Reason (If a o	designated	
TYPE OF OPERATION (Circle all that apply)	NUMBER OF ANIMALS O		CAPA	CITY		TYPE OF CONFINEMENT (Open Lot, Partial or Total Confinement, Pasture)		
BEEF CATTLE								

and D SWIN	E RS/CALVES EYS CENS							
1.	What number of animals are stabled/confined and feed/maintained for 45 days or more during a twelve-month period?  Get documentation (computer records, daily records) for the past year that							
2,	provides the number of animals on facility each month.  What are the minimum number of animals that you have had at this facili the date of operation	ty since						
3.	What are the maximum number of animals that you have had at this facilithe date of operation	ity since						
4.	Do the animals have direct access to waters of the United States and/or it tributaries?	ts	YES	NO				
5.	Does the facility have the ability to discharge livestock waste to waters of via a manmade conveyance?	the US	YES	NO				
6.		ny crops, vegetation, forage growth, or post-harvest residues sustained in ormal growing season over any portion of the lot or facility where animals						
7.	What is the total area (acres) devoted to production? (Includes buildings, storage areas, feedlots, chemical buildings, and offices. If a large facility thincludes land application area. Not pasture.)							
8.	What is the total area (acres) devoted to pasture?							
9.	Is the facility currently operating under a National Pollution Discharge Elir System (NPDES) permit? If yes, indicate NPDES ID.	mination	YES	NO				
10.	(ILLINOIS ONLY) Are you a Certified Livestock Manager (300 or greater <i>animal units</i> )? (Should have a certificate that they were certified by the Dept. of Agriculture.) (Ask to see it if they have one.)	N/A	YES	NO				
11.		N/A	YES	NO				
12.		N/A	YES	NO				

13.	Does the facility have a current NMP or CN		YES	NO
	but facility representative may need to be		-	
14.	Does the facility have any other locations u	• •	YES	NO
	equipment and/or manure is shared, or wh			
	application sites? If so, put names and add			
15.	Number of Employees (not counting imme			
B. M	ANURE, LITTER, AND PROCESSED WASTEW	ATER STORAGE TYPE		
Туре	of Storage	Storage Capacity		ys of orage
	ge Lagoon			
	ng Pond			
Abov	e Ground Storage Tanks			
Belov	v Ground Storage Tanks			
Roof	ed Storage Shed			
Conc	rete Pad			
Impe	rvious Soil Pad			
Unde	rflow Pits			
Anae	robic Digester			
Outd	oor Piles			
None				
Othe	r			
C. LI\	<b>YESTOCK WASTE MANAGEMENT AND MOR</b>	TALITIES		
1.	Does the facility have any existing livestocl	k waste management systems?	YES	NO
	If yes, continue filling out Section C.			
	If no, then proceed to Section D.			
2.	Provide a detailed description of the waste	management system. (Include structui	e types	,
	capacity and condition. Include solid and lic		,,	•
3.	Does the system have a managed outfall or	r discharge point?	YES	NO
If Yes	, please provide a detailed description. (Rise	er pipe, spill way, etc. Include a descrip	tion the	area
	ving the discharge.)			
4.	Are there any portions of the production a	rea where runoff is not controlled?	YES	NO
	, provide a detailed description of the area(		1	1
	, provide a detailed description of the area(	s) of concern.		
5.	Who designed the storage structures?			
6.	Did you receive help from any organization	(like NRCS) in the design of the storage	structı	ıre? If
7.	so, who?			
	In what year were the storage structures co			
8.	Does the facility have the As-Built for the siponds/lagoons in gallons.)	torage structures? (Ask to see them and	l note s	izes of
9.	What type of lining is used for the storage s	structures? (Example: clay, concrete, pl	astic, et	c.)
10.	Do the storage structures have depth mark		YES	NO
11.	Are levels of manure in the storage structu	res recorded and records kept?	YES	NO
	(If YES, ask to see records. Photograph ther	n or get copies.)		

12.	Total number of acres available for land application?		
13.	When was the last time the storage structure was pumped down?		
	(If within the past two months, fill out section I.)		
13.	Are land application records kept?	YES	NO
	(If YES, ask to see records. Photograph them or get copies.)		
14.	Is manure transferred off-site to another party?	YES	NO
15.	Are records of manure transfers kept?	YES	NO
	(If YES, ask to see records. Photograph them or get copies.)		
16.	Do the facility personnel perform routine visual inspections of the production area?	YES	NO
17.	Are the routine visual inspections documented?	YES	NO
	(If YES, ask to see records. Photograph them or get copies.)		
18.	How are mortalities managed? (Composted, buried, burned, rendering service, other	r)	
	(Get name of rendering service if rendered.)		
19.	Are mortalities documented and are records kept?	YES	NO
	(If YES, ask to see records. Photograph them or get copies.)		
Wate	r Sources that Need to be Contained		
20.	What type of method is used to provide drinking water for the animals? (Circle one)		
	Overflow waters		
	Tip Tanks		
	Nipple waters (if nipple waters are used for swine, is backflow prevention installed	?)	
	Other (describe)		
21.	How is the water for animals contained?		
22.	Is a mist cooling system used?	YES	NO
If YES	, describe how mist water is contained?		
23.	Is this a dairy operation?	YES	NO
	If yes, answer the following questions in this section.		
	If no, go on to the Bedding section.		
24.	How many times per day are cows milked?		
25.	Describe how non-contact cooling water (or also called plate-cooler water) is contain	ned?	
	(Example: It is reused for drinking water for the animals.)		
26.	Describe how the milking parlor is cleaned (hose or flush) and where the process wa	stewa	ter
	goes and how it is contained.		
27.	Describe how the tank(s) are washed and where the process wastewater goes and h contained.	ow it i	S
28.	Describe where teat dip containers and waste barrels are located.		
29.	Describe where the Copper Sulfate or Formaldehyde (for the foot baths) is located (l	both u	nused
	and used).		
Bedd	ing		
30.	Describe what type of bedding is used for the animals. (Is a different type of bedding young animals?)	g used	for
31.	Describe how bedding is collected and how often.		

32.	What is done with the used bedding? REUSED LAND APPLIED					
Manu	re Collection					
33.	How is manure collected? (Circle one)  Scraped: Automatically Manually  Scrape/Gravity (Scraped to middle or end of barn to a pipe that gravity feeds to stor structure)  Scrape/Flush (Barns flushed with water after scraping)  Flush (Cleans out barns with clean or reused water)  Vacuum (Solids are separated by a vacuum before entering storage pond)  Other (Describe this)	age				
34.	Amount of manure generated annually? Liquids: Solids:					
35.	If manure collection system uses either clean or reused water to flush, describe where this water comes from. (Storage pond, well water, city water, etc.)					
36.	If manure collection system uses either clean or reused water to flush, describe where this water goes and how it is contained.					
Manu	ire Storage					
37.	Is manure stored for the short term? (Daily haul, small pits/storage)	YES	NO			
If YES	, indicate for how long manure is stored for the short term.	1				
How i	s the short term storage drained? GRAVITY AUTOMATICALLY PLUG					
If Aut	omatically, is there a backup power system in place?	YES	NO			
If YES	, describe the backup power system.					
38.	Where is manure stored for long term and for how long (Also asked in Section B)?  Concrete pit under floor (how long stored here?)					
	Concrete storage structure outdoors					
	Earthen storage structure outdoors					
	Slurry storage structure					
	Other (Describe this)					

Safe	ty		
1.	Are there barriers guarding the end of any manure push-off platforms?	YES	NO
2.	Is there fencing around earthen manure storage structures?	YES	NO
3.	Are facility personnel trained for safety with large farm animals and safe work practices?	YES	NO
4.	Are facility personnel trained in skid steer operations?	YES	NO
5.	Are facility personnel trained in tractor operations?	YES	NO
6.	Are facility personnel trained in or kept out of confined spaces?	YES	NO
7.	Are facility personnel trained in safety procedures during the maintenance of equipment?	YES	NO
8.	Are belts, pulleys, chains and sprocket guards intact on farm machinery?	YES	NO
9.	Are MSDSs maintained on-site for all chemicals used on the facility?	YES	NO
10.	Does farm equipment have roll over protective devices (ROPS)	YES	NO
11.	Have facility personnel been trained in hazard communications?	YES	NO
Feed	Storage Containment		
38.	Describe how feed is contained, including type of storage structure, capacity and type of feed.		
39.	Describe how feed runoff is contained.		
D. RI	ECEIVING SURFACE WATERS		
1.	Provide a detailed description of the flow path from the facility to the nearest name water. (Include detailed descriptions of all unnamed tributaries, ditches, and/or oth i.e., depth, width, color, odor, slope, amount of water present, soil type, erosivity, elocal name of ditches/streams.)	er flow	paths
2.	Are there any man-made features not associated with the production area that can affect runoff?	YES	NO

If Yes	s, provide a detailed description.			
3.	Are there any storm water pathways entering the facility?	YES	NO	
4.	Are there any clean water/storm water ponds on-site?	YES	NO	
5.	What is the name of the receiving stream and the names of next streams or rivers in flow path?			
6.	How many months out of the year does the receiving stream/ditch have flow in it?			
7.	What is the name of the first navigable water?			
8.	Status of the named surface water? Intermittent Perennial			
Wha	t was the State's designation for this Surface water? (if –applicable)			
	is surface water or subsequent tributary listed as an impaired water on the current e 303(d) list?	YES	NO	
If YES	S, what is the impairment?			
E. D	ISCHARGES			
1.	What is the 25-year, 24-hour rainfall amount for this location? You can find out this information from the Precipitation Frequency Data Server: http://hdsc.nws.noaa.gov/hdsc/pfds/index.html			
2.	Have there been any documented discharges of livestock waste to surface water <i>in the past year</i> ?	YES	NO	
	If YES, answer parts a – i below. If NO, go to part F.			
а	Court the data (A)	.1	•	
b	). What was the reason for the discharge?			
c. What was the duration?				
d. What was the volume?				
е	e. Was the discharge the result of a 25 year, 24-hour rainfall event?	YES	NO	
f.	. What was the precipitation amount? (if applicable)	1	<u>I</u>	
g	. Were EPA and/or the State notified?	YES	NO	

h	<ul> <li>Provide a detailed description of the flow pathway and the area(s) receiving the dis (include Photographs)</li> </ul>	charge	(s).
i.	Has the facility taken corrective action to remedy the situation which caused the discharge(s)?	YES	NO
If	YES, describe actions taken:	•	
3.	Is the facility currently discharging livestock waste from the production area? (This can be seen during the walk-through of the facility.)	YES	NO
Wha	t is the reason for the discharge?		
4.	Is the discharge the result of a 25 year, 24-hour rainfall event?	YES	NO
5.	What was the precipitation amount immediately before this discharge? (if applicable	)	
6.	Was a sample taken? If YES, then fill out Section G.		NO
Prov	ide a detailed description of the flow pathway and the area(s) receiving the discharge	s).	•
F. N	PDES PERMIT INFORMATION (If no NPDES Permit, skip this section)		
1.	What type of NPDES permit has been issued? (Circle one.) Individual NPDES Permit General NPDES Permit	NPDES #	
2.	What date was the NPDES permit issued?		
3.	What date does the NPDES permit expire?		
4.	Is a copy of the NPDES permit onsite?	YES	NO
5.	Permitted number of animal units?		
6.	Does the NPDES Permit contain a compliance schedule?	YES	NO
If YES	5, provide a detailed description of the requirements in the compliance schedule and t	heir sta	atus.
7.	Have there been any changes made to the production area since the permit was issued?	YES	NO

If YE	S, provide a detailed description of those changes.		
8.	Does each open surface liquid impoundment have an adequate depth marker (e.g., staff gauge)?	YES	NO
9.	Are liquid levels recorded in accordance with the NPDES permit?	YES	NO
10.	Is the facility maintaining adequate storage capacity in each manure or litter storage structures?	YES	NO
11.	When storage capacity is not available, are all structures dewatered/emptied in accordance with the NPDES permit?	YES	NO
12.	Are manure solids stored onsite in accordance with the NPDES permit?	YES	NO
13.	Is manure transferred off-site in accordance with the NPDES permit?	YES	NO
14.	Are records of off-site manure disposal being maintained in accordance with NPDES permit?	YES	NO
15.	Is the facility performing routine visual inspections of the production area in accordance with the NPDES Permit?	YES	NO
16.	Are the visual inspections documented?	YES	NO
17.	Are mortalities managed and disposed of in accordance with the NPDES Permit?	YES	NO
18.	Is mortality management documented?	YES	NO
19.	. If you answered NO for any of the questions 6-18, then provide a detailed description of the potential permit violation(s).		<u>_</u>
3. N	UTRIENT MANAGEMENT PLAN (If no NMP, skip this section)		
1.	Does the facility maintain a copy of the nutrient management plan (NMP) onsite?	YES	NO
2.	Date that the NMP (or CNMP) was developed?	1	
3.	Date that the NMP (or CNMP) was last updated?		
4.	Does the NMP reflect the current operational characteristics (number of animals, cropping, etc.)?	YES	NO
5.	Are the numbers of acres owned/acres leased consistent with those in the NMP?	YES	NC
6.	Is manure and wastewater being applied in accordance with set-back/buffer requirements of the NMP?	YES	NO
7.	Are all of the records identified in the NMP being maintained and kept current?	YES	NO
8.	Are records being maintained at the required frequency?	YES	NO
9.	Are records being maintained onsite for the period required by NMP and/or NPDES permit?	YES	NO

10.			NO
	and wastewater to prevent discharges to waters of the U.S.?		
11.	If you answered NO for any of the questions 1-8, then provide a detailed description of the potential permit violation(s) (optional).		
H. SA	MPLING		
1.	Were samples taken during the inspection?	YES	NO
2.	Provide a detailed description of the sampling methods and protocols used, including		
	representative samples, background, holding times, and preservation techniques. (OK to		
	reference the QAPP.)		
3.	Provide a detailed description of where the samples were collected. Include photos and maps of		
	sampling locations. (OK to reference the aerial photo, or logbook where notes on samples were		
	taken.)		
4.	Provide a detailed description of the weather conditions at the time the sample was collected.		
5.	Classify the odors present on-site and locations where malodorous conditions were present.		
	(Scale of 1-10, with 10 being the worst thing you have ever smelled.)		
I. LAN	ND APPLICATION SITES		
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ATTACHMENTS INCLUDED WITH THIS CHECKLIST		
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INSPECTORS SIGNATURE AND DATE		
SIZE DESIGNATIONS BY ANIMAL TYPE		
LARGE		
DAIRY COWS (Mature, dry or milking) 700		
CATTLE (Heifers, steers, bulls, and cow/calf pairs)  1,000		
VEAL CALVES 1,000		
SWINE (Greater than or equal to 55 pounds)2,500SWINE (Less than 55 pounds)10,000		
HORSES 500		

SHEEP OR LAMBS	10,000
TURKEYS	55,000
LAYING HENS OR BROILERS (Liquid manure handling system)	30,000
LAYING HENS (Other than liquid manure handling system)	82,000
CHICKENS (Other than laying hens and other than liquid manure)	125,000
DUCKS (Liquid manure handling system)	5,000
<b>DUCKS</b> (Other than liquid manure handling system)	30,000
MEDIUM	
DAIRY COWS (Mature, dry or milking)	200-699
CATTLE (Heifers, steers, bulls, and cow/calf pairs)	300-999
VEAL CALVES	300-999
SWINE (Greater than or equal to 55 pounds)	750-2,499
SWINE (Less than 55 pounds)	3,000-9,999
HORSES	150-499
SHEEP OR LAMBS	3,000-9,999
TURKEYS	16,000-54,999
LAYING HENS OR BROILERS (Liquid manure handling system)	9,000-29,999
LAYING HENS (Other than liquid manure handling system)	25,000-81,999
CHICKENS (Other than laying hens and other than liquid manure)	37,500-124,999
<b>DUCKS</b> (Liquid manure handling system)	1,500-4,999
<b>DUCKS</b> (Other than liquid manure handling system)	10,000-29,999
SMALL	
DAIRY COWS (Mature, dry or milking)	<200
CATTLE (Heifers, steers, bulls, and cow/calf pairs)	<300
VEAL CALVES	<300
SWINE (Greater than or equal to 55 pounds)	<750
SWINE (Less than 55 pounds)	<3,000
HORSES	<150
SHEEP OR LAMBS	<3,000
TURKEYS	<16,000
LAYING HENS OR BROILERS (Liquid manure handling system)	<9,000
LAYING HENS (Other than liquid manure handling system)	<25,000
CHICKENS (Other than laying hens and other than liquid manure)	<37,500
DUCKS (Liquid manure handling system)	<1,500
<b>DUCKS</b> (Other than liquid manure handling system)	<10,000