

# ADEQ

ARKANSAS  
Department of Environmental Quality

**FEB 07 2014**

Jason Henson  
C&H Hog Farms, Inc.  
HC 72 Box 10  
Mount Judea, AR 72655

RE: Response to NMP Revision, Land Application Method  
Permit Tracking Number ARG590001, AFIN 51-00164

Dear Mr. Henson,

The Department received your request to revise the Nutrient Management Plan (NMP) for the above-referenced permit on 1/31/2014. In accordance with Part 3.2.6.2 of ARG590000, the Department has determined that this is a necessary and substantial change to the terms of your NMP. The following must be submitted to the Department to process the revisions as a major modification to the NMP:

1. A full copy of the revised NMP with changes identified from the current version (Required in Part 3.2.6.1)
2. Completed Notice of Intent (NOI) (Required in Part 5.1)

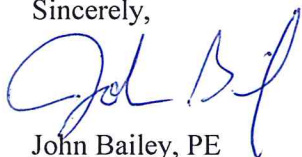
For your convenience, the Department is enclosing a blank copy of the NOI form.

Upon receipt of the requested documents and Departmental review for completeness, the NOI and NMP will be placed on the Department's website for a 30 day public review and comment period, as required for NMP modifications under Part 5.3 of ARG590000.

Please provide the documents requested above within 10 business days of the date on this letter. If additional time is needed, please request an extension in writing to the Department prior to the expiration of the deadline. Until the revisions to the NMP have been approved, the facility must continue to operate under the current version of the NMP.

If you have any questions concerning this matter or need additional information, please feel free to contact Katherine Yarberry, PE of my staff at (501) 682-0647 or [yarberryk@adeq.state.ar.us](mailto:yarberryk@adeq.state.ar.us).

Sincerely,



John Bailey, PE  
Permits Branch Manager  
Water Division

JB:kay

Attachment: Blank Notice of Intent for ARG590000

cc: Electronic Files (ARG590001 AFIN 51-00164)



<input type="checkbox"/> Sheep or Lambs			
<input type="checkbox"/> Turkeys			
<input type="checkbox"/> Chickens (Broilers)			
<input type="checkbox"/> Chickens (Layers)			
<input type="checkbox"/> Ducks			
<input type="checkbox"/> Other Specify .....			
3. TOTAL ANIMALS			

C.  TOPOGRAPHIC MAP

D. TYPE OF CONTAINMENT, STORAGE AND CAPACITY

1. Type of Containment	Total Capacity (in gallons)	
<input type="checkbox"/> Lagoon		
<input type="checkbox"/> Holding Pond		
<input type="checkbox"/> Evaporation Pond		
<input type="checkbox"/> Other: Specify _____		

2. Report the total number of acres contributing drainage: \_\_\_\_\_ acres

3. Type of Storage	Total Number of Days	Total Capacity (gallons/tons)	
<input type="checkbox"/> Anaerobic Lagoon			
<input type="checkbox"/> Storage Lagoon			
<input type="checkbox"/> Evaporation Pond			
<input type="checkbox"/> Aboveground Storage Tanks			
<input type="checkbox"/> Belowground Storage Tanks			
<input type="checkbox"/> Roofed Storage Shed			
<input type="checkbox"/> Concrete Pad			
<input type="checkbox"/> Impervious Soil Pad			
<input type="checkbox"/> Other: Specify _____			

<b>E. NUTRIENT MANAGEMENT PLAN</b>  <b>Note: A permit application is not <u>complete</u> until a nutrient management plan (NMP) is submitted with NOI.</b>  1. Please indicate whether a nutrient management plan has been included with this permit application. <input type="checkbox"/> Yes <input type="checkbox"/> No (STOP)  2. Is a nutrient management plan being implemented for the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No  3. The date of the last review or revision of the nutrient management plan. Date: _____  4. If not land applying, describe alternative use(s) of manure, litter, and or wastewater: _____ _____	
<b>F. LAND APPLICATION BEST MANAGEMENT PRACTICES</b> Please check any of the following best management practices that are being implemented at the facility to control runoff and protect water quality:  <input type="checkbox"/> Buffers <input type="checkbox"/> Setbacks <input type="checkbox"/> Conservation tillage <input type="checkbox"/> Constructed wetlands <input type="checkbox"/> Infiltration field <input type="checkbox"/> Grass filter <input type="checkbox"/> Terrace	
<b>III. CERTIFICATION</b>	
<i>I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.</i>	
A. Name and Official Title ( <i>print or type</i> )	B. Phone No. (    )
C. Signature	D. Date Signed

## INSTRUCTIONS

<p><b>GENERAL</b></p> <p><b>This form must be completed by all applicants</b> Exclusions are based on size and whether or not the facility discharges proposed to discharge. See the description of these exclusions in the CAFO permit and regulations at 40 CFR 122.23.</p> <p><b>Item I-A</b></p> <p>See the note above to be sure that your facility is a “concentrated animal feeding operation” (CAFO).</p> <p><b>Item I-B</b></p> <p>Use this space to give owner/operator contact information.</p> <p><b>Item I-C</b></p> <p>Check “proposed” if your facility is not now in operation or is expanding to meet the definition of a CAFO in accordance with the CAFO regulations at 40 CFR 122.23.</p> <p><b>Item I-D</b></p> <p>Use this space to give a complete legal description of your facility’s location including name, address, and latitude/longitude. Also, if a contract grower, the name and address of the integrator.</p> <p><b>Item II</b></p> <p>Supply all information in item II</p> <p><b>Item II-A</b></p> <p>Give the maximum number of each type of animal in open confinement or housed under roof (either partially or totally) which are held at your facility for a total of 45 days or more in any 12 month period. Provide the total number of animals confined at the facility.</p> <p><b>Item II-B</b></p> <p>Provide the total amount of manure, litter, and wastewater generated annually by the facility. Identify if manure, litter, and wastewater generated by the facility is to be land applied and the number of acres, under the control of the CAFO operator, suitable for land application. If the answer to question 3 is yes, provide the estimated annual quantity of manure, litter, and wastewater that the applicant plans to transfer off-site.</p> <p><b>Item II-C</b></p> <p>Check this box if you have submitted a topographic map of the entire operation, including the production area and land under the operational control of the CAFO operator where manure, litter, and/or wastewater are applied with Form 1.</p>	<p><b>Item II-D</b></p> <ol style="list-style-type: none"><li>1. Provide information on the type of containment and the capacity of the containment structure (s).</li><li>2. The number of acres that are drained and collected in the containment structure (s).</li><li>3. Identify the type of storage for the manure, litter, and/or wastewater. Give the capacity of this storage in days.</li></ol> <p><b>Item II-E</b></p> <p>Provide information concerning the status of submitting a nutrient management plan for the facility to complete the application. In those cases where the nutrient management plan has not been submitted, provide an explanation. If not land applying, describe the alternative uses of the manure, litter, and wastewater (e.g., composting, pelletizing, energy generation, etc.).</p> <p><b>Item II-F</b></p> <p>Check any of the identified conservation practices that are being implemented at the facility to control runoff and protect water quality.</p> <p><b>Item III</b></p> <p>The Clean Water Act provides for severe penalties for submitting false information on this application form.</p> <p>Section 309(C)(2) of the Clean Water Act provides that “Any person who knowingly makes any false statement, representation, or certification in any application. shall upon conviction, be punished by a fine of no more than \$10,000 or by imprisonment for not more than six months, or both.”</p> <p><b>Federal regulations require the certification to be signed as follows:</b></p> <ol style="list-style-type: none"><li>A. For corporation, by a principal executive officer of at least the level of vice president.</li><li>B. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or</li><li>C. For a municipality, State, federal, or other public facility, by either a principal executive officer or ranking elected official.</li></ol>
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