Vidhec	All areas are	Agricultural Manu Please	plication Form for ure Applicators Permit Type or Print mpleted, if not applicable, write N/A					
Section 1 – FARM INFORMATION								
DATE		FACILITY PI	ERMIT NUMBER ND					
CHECK ONE: NEW	_ PERMIT RENEWAL	OPERATION IF REI	NEWAL, PERMIT ISSUANCE DATE					
FARM NAME			COUNTY					
LOCATION								
CONFINED ANIMAL MANUR	E MANAGER NAME							
CAMM NUMBER	IF NON	IE, PLANNED CASE DAT	E					
Section 2 – CONTACT INFORMATION								
PERMIT APPLICANT'S NAMI	Ξ							
ADDRESS								
			(CELL)					
ADDRESS								
			(CELL)					
			(CELL)					
			(CELL)					
			(CELL)					
	Section 3 – M	ANURE HANDLING & T	REATMENT					
Manure Handling: 🗆 Dr'	Y or 🗆 WET							
ARE YOU OBTAINING MANU	JRE FROM A BROKER?	□ YES or □ NO						
NAME AND PERMIT NUMBE	NAME AND PERMIT NUMBER OF BROKER							
ARE YOU CONSTRUCTING	ARE YOU CONSTRUCTING A STORAGE OR COMPOSTING FACILITY FOR THE MANURE?							
DO YOU OWN ALL OF THE MANURE UTILIZATION AREAS? I YES or INO								
TOTAL NUMBER OF ACRES	ADDED FOR MANURE							

Section 4 – MANURE UTILIZATION AREAS For more fields please make copies of this page and add as additional sheets.								
SEPARATION DISTANCES:	Tract #	s please make		s page and ac	do as addillion	ai sneets.		
	Field #							
POTABLE WELL	200 ft							
WATERS OF THE STATE	100 ft*							
(INCLUDING EPHEMERAL & INTERMITTENT STREAMS)	100 10							
DITCHES & SWALES TO WATERS OF STATE	50 ft*							
RESIDENCE	300 ft**							
PROPERTY OWNER OF REC					·			
						1)		
PHONE NUMBER (WORK)			_(HOME)		(CEL	L)		
TABLE #2								
SEPARATION DISTANCES:	Tract #							
	Field #							
POTABLE WELL	200 ft							
WATERS OF THE STATE (INCLUDING EPHEMERAL & INTERMITTENT STREAMS)	100 ft*							
DITCHES & SWALES TO WATERS OF STATE	50 ft*							
RESIDENCE	300 ft**							
PROPERTY OWNER OF REC								
						1.)		
PHONE NUMBER (WORK) _ TABLE #3			_(HOME)		(CEL	L)		
SEPARATION DISTANCES:	Tract #							
	Field #							
POTABLE WELL	200 ft							
WATERS OF THE STATE (INCLUDING EPHEMERAL & INTERMITTENT STREAMS)	100 ft*							
DITCHES & SWALES TO WATERS OF STATE	50 ft*							
RESIDENCE	300 ft**							
PROPERTY OWNER OF REC					•			
						1)		
PHONE NUMBER (WORK)	s spray applic a 24 hours. ajection or imr a reduced by c	ation or groun nediate incorp consent of the	nd surface apportion, then owner of the	olication. Reo manure may residence.	duced to 75 ft be spread to	for incorporat	ted manure, <i>a</i> ine.	

Section 5 – PERMIT APPLICATION SUBMITTAL REQUIREMENTS					
 SUBMITTAL PACKAGE SHOULD INCLUDE 2 COPIES OF THE FOLLOWING ITEMS: ORIGINAL APPLICATION (and 1 copy of the original) MANURE MANAGEMENT PLAN Animal Manure Management System Description Design Calculations and Construction Details for treatment/storage structure, including exact location and design information. Concentration of Manure Constituents Crop Management Plan (including contracts for each field not owned by the applicant, field owner's name and contact information) Type of Waste Transport/Spreading Equipment (if applicable) Manure Utilization Area Information and Maps Soils Information (maps & descriptions) Location maps (showing treatment/storage structure, and all fields) 100 year floodplain locations (treatment/storage structure may not be located in the 100-year floodplain) ODDR ABATEMENT PLAN SOIL MONITORING PLAN SOUL MONITORING PLAN COPY OF CONTRACT WITH PRODUCER(S) OR BROKER(S) TO OBTAIN MANURE COPY OF CONTRACT WITH PRODUCER(S) OR BROKER(S) TO OBTAIN MANURE COPY OF CONTRACT WITH LAND OWNER'S OF FIELDS TO RECEIVE MANURE APPLICATION (rented farmland) WRITTEN CONSENT FOR WAIVING OR REDUCING SETBACKS FOR TREATMENT/STORAGE STRUCTURE APPLICATION FEE: See instructions for amount (first year's fee must be submitted prior to permitting) 					
Section 6	ERTIFICATION				
I HEREBY CERTIFY THAT ALL OPERATIONS, MAINTENANCE AND ASSOCIATED ACTIVITY PERTAINING TO THIS SITE SHALL BE ACCOMPLISHED PURSUANT TO AND IN KEEPING WITH THE TERMS AND CONDITIONS OF THE APPROVED PLANS. I HAVE READ THIS APPLICATION AND AGREE TO THE REQUIREMENTS AND CON- DITIONS THAT ARE CONTAINED WITHIN. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I HEREBY GRANT AUTHORIZATION TO THE DEPART- MENT OF HEALTH AND ENVIRONMENTAL CONTROL THE RIGHT OF ACCESS TO THE SITE AT ALL REASON- ABLE HOURS FOR THE PURPOSE OF SAMPLING AND ON SITE INSPECTIONS.					
Printed Name/Manure Applicator	Signature/Manure Applicator				
I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE DESIGN IS CONSISTENT WITH THE REQUIREMENTS OF TITLE 48, CHAPTER 1 OF THE 1987 SC CODE OF LAWS, AND PURSUANT REGULATION 61-43 AND APPROPRIATE NRCS STANDARDS.					
Printed Name/Plan Preparer	Signature/Plan Preparer				
"Personal Information provided on this docu	ument is subject to public scrutiny or release."				

APPLICATION INSTRUCTIONS - Agricultural Manure Applicator's Permit

Purpose:

This form must be completed as part of an application package submitted for DHEC approval of proposed agricultural manure application operations. The required items should be checked to ensure that a complete administrative package has been submitted. If a complete administrative package is not submitted, the entire project may be returned.

Item by Item Instructions:

Section 1 - Farm Information. Date: Enter the date of application. Facility Number: The Department will assign this number, leave blank. New or Expanding Operation: If this application is for an existing manure application operation that has previously obtained a agricultural permit from DHEC, then indicate by checking EXPANDING or NEW for new operations. Permit Number: Provide the permit number for the permitted operation and the date on which DHEC issued that permit. Farm Name: Give the name of the proposed agri- cultural manure application operation. County: Give the county in which the proposed operation is to be located. Location: Give directions to the proposed operation from the nearest town or state road. Confined Animal Manure Manager (CAMM): Has a representative for the farm operation completed the CAMM class conducted by Clemson Extension Service? If so, please include the name and CAMM certification number of the farm representative. If not, include the date for the class that a representative has registered.

Section 2 - Contact Information. Permit Applicant: Enter the name, address, phone number, and e-mail address of the person who legally owns the property on which the proposed agricultural manure application operation is to be located. Manure Applicator's Name, Address, Phone Number, e-mail: Enter the name, address, phone number, and e-mail address of the person who will be responsible for the manure application. Manure Hauler's Name, Address, Phone Number, e-mail: Enter the name, address, phone number, and e-mail address of the person who will be responsible for the manure application. Manure Hauler's Name, Address, Phone Number, e-mail: Enter the name, address, phone number, and e-mail address of the person who will be responsible for transporting the manure. Plan Preparer: Enter the name of the plan preparer. Title/SC Registration Number: Enter the title and SC registration number (if applicable) of the person responsible for the design of the Animal Facility Management plan. Address, Phone Number, and e-mail address: Enter the business address and phone number for the plan preparer.

Section 3 – Manure Handling & Treatment. Manure Handling: Circle DRY or WET to indicate the type of manure handling for this operation. Manure Broker: Circle YES or NO to indicate whether a manure broker will be used for contract disposal of the manure from this facility and provide the name and permit number of the broker to be used (if applicable).

Section 4 – Manure Utilization Area Information. This table outlines the required setbacks for manure utilization areas. Enter a tract number and field number for each field; and the actual separation distance for each manure application field in the appropriate spaces. Make copies of this page if you need additional tables for the field information.

Agricultural Permit Application Fees

Facility Type	DHEC Time	Fee
Agricultural Manure Application Operations	90 days	\$165

Section 5 – Permit Application Submittal Requirements. Please check each item that is being submitted as a part of this applition. All items under Section 5 should be submitted to DHEC for review. In accordance with the Environmental Protection Fee Reg. 61-30, an application fee is required for submitting an Application for agricultural animal facilities. There is a requirement that DHEC meet certain time frames when processing permit applications. The "DHEC Time" is not the total time but rather it is generally the time that DHEC spends working on an application after a complete package is received. "DHEC Time" does not include the time an applicant takes to supply any information that may be requested by DHEC. The fees and time frames are as follows: Note: Make CHECKS payable to SC DHEC/Bureau of Finance.

Regulation R61-30 also authorizes DHEC to assess annual environmental operating permit fees for certain permits. All new facilities must submit payment for the first years operating fee before the permit to construct is issued. The operating fee is \$75 per year for agricultural manure application operations.

Section 6 – Certification. For this section, please read the certification statements and have the appropriate person(s) sign the certification.

Retention Schedule# 1647

DHEC Processing Procedures:

All submittal packages shall be submitted to DHEC through the ePermitting portal https://scdhec.gov/environment/ePermitting. After permitting, submitted files will be available on the facilities eSite.