



WINTER PLAN FOR LAND APPLICATION OF SEPTAGE WASTE

This information is required by authority of Part 117, 1994 PA 451, as amended.

Failure to submit this information is a felony.

Business Name: _____ **Septage License No.:** _____ **Cropping Year:** _____

Land Site Address: _____ **Site I.D. No.:** _____

City: _____ **Twp:** _____ **County:** _____ **Section:** _____

Number of Acres for Use During Winter Months: _____	Site Plan (<i>Attach plan showing field to be used in winter</i>): <input type="checkbox"/> Yes <input type="checkbox"/> No								
Method of Septage Waste Application: <input type="checkbox"/> Injection* (Recommended) <input type="checkbox"/> Surface*									
Percent of Slope:	<table style="width:100%; border:none;"> <tr> <td>Surface (Maximum)</td> <td><input type="checkbox"/> 2%</td> <td><input type="checkbox"/> 2-6%</td> <td></td> </tr> <tr> <td>Injection (Maximum)</td> <td><input type="checkbox"/> 2%</td> <td><input type="checkbox"/> 2-6%</td> <td><input type="checkbox"/> 6.1 - 12%</td> </tr> </table>	Surface (Maximum)	<input type="checkbox"/> 2%	<input type="checkbox"/> 2-6%		Injection (Maximum)	<input type="checkbox"/> 2%	<input type="checkbox"/> 2-6%	<input type="checkbox"/> 6.1 - 12%
Surface (Maximum)	<input type="checkbox"/> 2%	<input type="checkbox"/> 2-6%							
Injection (Maximum)	<input type="checkbox"/> 2%	<input type="checkbox"/> 2-6%	<input type="checkbox"/> 6.1 - 12%						
Maximum Application Rate* (gallons per acre during winter months): 10,000 gallons									
Depth of Injection/Incorporation: <input type="checkbox"/> 0 - 8 inches <input type="checkbox"/> 0 - 12 inches									
Dominant Soil Class (Within Depth of Injection or Incorporation) <i>e.g. sandy loam</i> :									
Land Management Practice that will Follow after Winter application at this site: <input type="checkbox"/> Crops <input type="checkbox"/> Septage Waste Application <input type="checkbox"/> Other _____									
Pathogen Reduction and Vector Attraction Reduction Method: (<i>Check all that apply</i>) <input type="checkbox"/> Lime stabilization <input type="checkbox"/> Injection <input type="checkbox"/> Incorporation within 6 hours <input type="checkbox"/> Other _____									
Equipment to be used for injection or proper soil incorporation (<i>Surface application</i>):									
Erosion Control Plan: <input type="checkbox"/> Border Strip (winter crop) <input type="checkbox"/> Cover Crop (winter crop) (<i>Check all that apply</i>) <input type="checkbox"/> Tillage Across Slope <input type="checkbox"/> Flat Land (< 2% slope) <input type="checkbox"/> Other _____									
Other Winter Disposal Plan: <input type="checkbox"/> Wastewater Treatment Plant <input type="checkbox"/> Septage Waste Storage Facility (<i>Check all that apply</i>)									
<i>Note: * Surface applied septage waste or septage waste that bubbles to soil surface after injection must be incorporated within 6 hours or 48 hours if lime-stabilized.</i>									
Isolation Distances: Make sure that isolation distances are met with regard to the winter disposal area.									
Name of Septage Business Owner (Print): _____									
Signature of Septage Business Owner: _____ Date: _____									
Reminder: The land application of septage waste when soil is frozen is not permitted.									
Winter Period: December 21 – March 21									
EGLE OFFICIAL USE									
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved									
EGLE Signature: _____ Date: _____									
Comments: (Use additional sheet, if necessary)									