



BIOSOLIDS LAND APPLICATION SITE IDENTIFICATION FORM

*Authorized under 1994 PA 451, as amended. Completion of form is required.
Applicant may be subject to civil and/or criminal penalties for providing false information.*

Complete the following information and provide the attachments listed on the second page for each new or updated biosolids land application site. Please amend any previous Site Identification Forms when it becomes known that any of the information requested below has changed (i.e., new landowner).

For additional information, Biosolids Program Staff are listed at: https://www.michigan.gov/documents/deq/wrd-biosolids-staff_402800_7.pdf.

Facility Name		NPDES Permit or COC Number		Request: New Site / Site Update / Site transfer	
Site ID Name (ex T/R/S – Owner (05N08E03-LB01))			Site location description (street name, nearest crossroad)		
County			Township		
(ex: NW, NE, SW, SE) 1/4		(ex: NW, NE, SW, SE) 1/4		Township (ex: 05N)	Range (ex: 08E)
Latitude (ex: N 42.09651)		Longitude (ex: -81.09651)		Method Used (i.e., GPS, topo)	
Name of Owner				Phone	
Street or P.O. Box			City or Town		State
Zip					
Is there a written agreement from the owner to land apply? <input type="checkbox"/> Yes <input type="checkbox"/> No (written agreement is required)					
Previous Landowner's Name (if site update)				Property Purchase Date	
Name of Lessee/Farmer (if different)				Phone	
Street or P.O. Box			City or Town		State
Zip					
Site Type					
<input type="checkbox"/> Agricultural <input type="checkbox"/> Forest <input type="checkbox"/> *Reclamation Site (separate approval is required) <input type="checkbox"/> Lawn/Home Garden (requires EQ Biosolids)					
Soils Information			Percent slope		
Date of last soils analysis _____			Highest percent slope of the site?		
*Phosphorous _____ units _____			<input type="checkbox"/> 0-6%		
Potassium _____ units _____			<input type="checkbox"/> 6-12%		
pH _____ Soil type(s) _____			<input type="checkbox"/> *Higher (Requires an approved site reclamation plan)		
*300 lb/ac (or 150 ppm) Bray P1 maximum limit					
Expected Crops/Vegetation to be grown					
Crop/Vegetation: _____			Nitrogen Requirement: _____ lbs. N/acre		
Crop/Vegetation: _____			Nitrogen Requirement: _____ lbs. N/acre		
Crop/Vegetation: _____			Nitrogen Requirement: _____ lbs. N/acre		
Total acreage of site		Acreage used for crops		Acreage used for land application	
Does this site have a high potential for public exposure?			If agricultural, is the site tilled?		
<input type="checkbox"/> Yes			<input type="checkbox"/> Yes		
<input type="checkbox"/> No			<input type="checkbox"/> No		
			<input type="checkbox"/> NA		

Provide copies of the following as attachments:

- USDA Soil Survey Map of the application site with soils information, property boundaries, surface waters, and location of field tiles when present.
- Most recent biosolids analytical data.
- Soil fertility analysis (no older than 2 years old at the time of land application).
- Plat map (or other map showing property dimensions) with the location of the land application site and street names clearly highlighted.
- Signed landowner / farmer agreements.
- Township / County Health Department notification.

For information or assistance on this publication, please contact the Biosolids Program, through EGLE's Environmental Assistance Center at 800-662-9278. This publication is available in alternative formats upon request.

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This form and its contents are subject to the Freedom of Information Act and may be released to the public.