

Livestock Site Selection Application

Applicant Information

Owner Name:	Mailing Address		
Farm Name:	City	State	Zip
Phone Number	Alternative Contact		
Phone Number	Phone Number		
Email	Phone Number		

Proposed Project Location

Technical Service Provider

Site Address				Business Name	
City		State	Zip	Primary Contact	
County	Township		Section	Phone Number	Phone Number
Crossroads	Latitude		Longitude	Email	

Siting Request Letter: Attachment 1

Included <input type="checkbox"/>	Letter from responsible party requesting siting review with an overview of the proposed project, including where the project is being proposed
Included <input type="checkbox"/>	Letter is signed

Project Time Table

Construction Start	Construction Finish
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Proposed Animal Additions

Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
			Total Animal Units

Existing Livestock

Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
Livestock Type	Average Weight	Number	Animal Units
			Total Animal Units

New or Expanding Facility

	Total Animal Units
Check if Yes <input type="checkbox"/>	Greater than 100% holding capacity increase and total AU is greater than 749
Check if Yes <input type="checkbox"/>	Expansion within 3 years of a previous MDARD final conformance of a New Livestock Production Facility and total AU is greater than 749.
Check if Yes <input type="checkbox"/>	Expansion within 3 years of a previous MDARD final conformance of an Expanded Livestock Production Facility, with both expansions totaling greater than 100% holding capacity, and total AU is greater than 749.
Check if Yes <input type="checkbox"/>	No preexisting livestock on site or more than 1,000 ft from another site under common ownership
If any of the above boxes are checked yes, then this is a new facility	
Check if Yes <input type="checkbox"/>	New Facility
Check if Yes <input type="checkbox"/>	Expanding Facility

Proposed Housing Type

Facility Type	Design	Size
Facility Type	Design	Size
Facility Type	Design	Size
Facility Type	Design	Size
Facility Type	Design	Size

Existing Housing Type

Facility Type	Design	Size	Year Built
Facility Type	Design	Size	Year Built
Facility Type	Design	Size	Year Built
Facility Type	Design	Size	Year Built
Facility Type	Design	Size	Year Built

Proposed Manure Storage Type

Storage Type	Design	Size
Storage Type	Design	Size
Storage Type	Design	Size
Storage Type	Design	Size
Storage Type	Design	Size

Existing Manure Storage Type

Storage Type	Design	Size	Year Built
Storage Type	Design	Size	Year Built
Storage Type	Design	Size	Year Built
Storage Type	Design	Size	Year Built
Storage Type	Design	Size	Year Built

50-749 Animal Units; Attachment 2

	Number of non-farm residences w/in 1/4 mile
Included <input type="checkbox"/>	Attach list including, name, address, and phone number – identifying how they were notified of the proposed project (See Appendix A)

750 or More Animal Units; Attachment 2

	Number of non-farm residences w/in 1/2 mile
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Included <input type="checkbox"/>	Attach list including, name, address, and phone number – identifying how they were notified of the proposed project (See Appendix A)
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Site Category – Property Lines

	Siting Category (Consult Tables 2-5 of the Site Selection GAAMPs)			
	GAAMPs Property Line Setback			
	Minimum Property Line Setback			
Proposed Setback	North	East	South	West
Signed Variance Included	Included <input type="checkbox"/> NA <input type="checkbox"/>	Included <input type="checkbox"/> NA <input type="checkbox"/>	Included <input type="checkbox"/> NA <input type="checkbox"/>	Included <input type="checkbox"/> NA <input type="checkbox"/>
Reduction Request	Included <input type="checkbox"/> NA <input type="checkbox"/>	Included <input type="checkbox"/> NA <input type="checkbox"/>	Included <input type="checkbox"/> NA <input type="checkbox"/>	Included <input type="checkbox"/> NA <input type="checkbox"/>

Offset Model: Attachment 3

Included <input type="checkbox"/>	MI OFFSET 2018 Centroid Worksheet with source centers	
Included <input type="checkbox"/>	Odor Print	
Factor	Odor Emission Factor	
Included <input type="checkbox"/>	Odor reduction factors include documentation of justification	
Centroid Location	Latitude	Longitude

Surrounding Property Owners; Attachment 4; 5; 6; 7

Included <input type="checkbox"/> NA <input type="checkbox"/>	Appendix A: Certification of Notification of Non-Farm Residences
Included <input type="checkbox"/> NA <input type="checkbox"/>	Appendix B: Facility Site Selection and Odor Variance Agreement
Included <input type="checkbox"/> NA <input type="checkbox"/>	Appendix C: Facility Site Selection and Setback Variance Agreement
Included <input type="checkbox"/> NA <input type="checkbox"/>	Appendix D: Manure Application Agreement

Construction Details – Required for Construction Approval; Attachment 8; 9

Included <input type="checkbox"/> NA <input type="checkbox"/>	Signed and Stamped Preconstruction Drawings
Included <input type="checkbox"/> NA <input type="checkbox"/>	Subsurface Investigation

Manure Management System Plan Components: Attachment 10;

Included <input type="checkbox"/> or NA <input type="checkbox"/>					Production - amount or volume of manure and other agricultural by-products produced and milk house wastewater.																									
Animal Type	Housing:	Weight (lbs):	# Head	A.U.	Days/Year	Storage Type	Tons/Year	Ft3/Year	Gal/Year	N (lb/gal)	P ₂ O ₅ (lb/gal)	K ₂ O (lb/gal)																		
Totals:			XX				XX	XX	XX	xx	xx	xx																		
Included <input type="checkbox"/> or NA <input type="checkbox"/>					Collection - how manure and other by-products are gathered for management																									
Included <input type="checkbox"/> or NA <input type="checkbox"/>					Storage - type, size, capacity, location, and estimated storage time																									
					<table border="1" style="width:100%; border-collapse: collapse; margin-left: 40px;"> <thead> <tr> <th style="width: 15%;">Storage ID</th> <th style="width: 20%;">Storage type</th> <th style="width: 15%;">Capacity</th> <th style="width: 10%;">Units</th> <th style="width: 20%;">Annual Collected</th> <th style="width: 20%;">Days Storage</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>								Storage ID	Storage type	Capacity	Units	Annual Collected	Days Storage												
Storage ID	Storage type	Capacity	Units	Annual Collected	Days Storage																									
Included <input type="checkbox"/> or NA <input type="checkbox"/>					Transfer - movement between production, collection, storage, treatment, or land application																									
Included <input type="checkbox"/> or NA <input type="checkbox"/>					Treatment - before, during, or after storage - physical, biological, chemical, solid/liquid separation, composting																									
Included <input type="checkbox"/> or NA <input type="checkbox"/>					Utilization - end use of the manure nutrients analysis, crops to be grown with realistic yield goals, application scheduling (If additional acres are needed for manure utilization, See Appendix D to																									

Crop	Bray P1 (ppm) soil P	Avg. Yield	Unit per acre	Spreadable Acres	N/Ac Removed (lb)	Total N Lb	P ₂ O ₅ /Ac Removed (lb)	Total P ₂ O ₅ Lb	K ₂ O/Ac Removed (lb)	Total K ₂ O Lb
				Totals:	XX			XX	XX	XX
					Nitrogen	P ₂ O ₅	K ₂ O			
				Available from manure						
				Needed by Crops						
				Balance						
Included <input type="checkbox"/> or NA <input type="checkbox"/>				Recordkeeping - documentation of activities related to manure handling and utilization						
Included <input type="checkbox"/> or NA <input type="checkbox"/>				Odor Management - practices to be followed to achieve effective odor control. Includes detailed information related to any OFFSET model reduction technologies or practices, as well as description of operation and maintenance of these.						

Digital Mapped File (KMZ File Preferred); Attachment 11

If attached file is not a .kmz; the file(s) must include an accurate scale.

Included <input type="checkbox"/>	NA <input type="checkbox"/>	Farm animal housing or manure storages that contribute to Odor Plume using Red polygon outline, labeled with placemark
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Created ½ or ¼ mile radius (as appropriate) from the edges of the facility in Red circle measures . Edges of the facility are defined as corners of the smallest polygon encompassing all of the animal housing and manure storages of a livestock facility.
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Farm Facilities that do not contribute to Odor Plume, Green polygon outline, labeled with placemark
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Plotted non-farm residences in WHITE and numbered (1/2 mile or 1/4 mile, as appropriate). Farm residence plotted as Green placemarks . Names and addresses provided in description of each point.
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Property lines, easements, right-of-way and any deed restrictions in Tan polygon outline . Took linear measures from edges of the facility in Yellow .
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Wetlands, floodplains, lakes, streams, public drains and other bodies of water within 500 ft. of the edges of the facility in Dark blue polygon outline . Tile lines, septic fields or surface drains within 100 ft. of the edges of the facility as Dark blue lines, polygons, or points respectively. Provide detail in description.
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Wells within 2,000 ft. of the production facility. Denoted in Light blue placemark, labeled by type. Took linear measures from edges of the facility in Yellow .
Yes <input type="checkbox"/>	No <input type="checkbox"/>	No well meets the following criteria: Type IIA w/in 2,000, Type IIB or Type III w/in 800 or Private Well w/in 75'.
Included <input type="checkbox"/>	NA <input type="checkbox"/>	For wells with a variance, Health Department or EGLE Variance. Wells with a variance should be indicated with a yellow star icon
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Outlined all high public use areas: Purple polygon outline, include name and address provided in description . Took linear measures from edges of the facility in Yellow .
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Confirmed the location of migrant labor housing camps in the area, mapped in Olive polygon outline . Took linear measurements in Yellow , greater than 500 ft.
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Overlay any EGLE wellhead protection areas in Pink polygon outline .
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Submitted image overlays of soil types and topography of the site and surrounding 1/4 mile radius.
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Confirmed an accurate 100-year flood plain as Dark blue polygon .
Included <input type="checkbox"/>	NA <input type="checkbox"/>	Mapped the MI OFFSET 95% annoyance boundary and centroid for the facility as an Orange polygon outline , with the centroid denoted as a Black point labeled with total emission factor.

Acknowledged

To the best of my knowledge, all submitted information is accurate. I understand that Inaccuracies or omissions in my application materials may invalidate any determination made by MDARD.

Appendix B

Facility Site Selection and Odor Variance Agreement

I, _____, do not object to _____ of _____, constructing a _____ facility approximately _____ feet from my property. I understand that the recommended setback distance is _____ feet from my property listed in the Generally Accepted Agricultural and Management Practices for Site Selection and Odor Control for New and Expanding Livestock Facilities provided by the Michigan Department of Agriculture and Rural Development (MDARD). I also understand that I may experience excessive odors from the _____ livestock facility, once constructed and operated, more than 5% of the time. MDARD recommends excessive odor annoyance to be 5% or less.

Signed: _____

Name: (please print) _____

Address: _____

Date: _____

Appendix C

Facility Site Selection and Setback Variance Agreement

I, _____, do not object to _____ of _____, constructing a _____ facility approximately _____ feet from my property. I also understand that the recommending setback distance is _____ feet from my property as listed in the Generally Accepted Agricultural and Management Practices for Site Selection and Odor Control for new and Expanding Livestock Facilities provided by the Michigan Department of Agriculture and Rural Development (MDARD).

Signed: _____

Name: (please print) _____

Address: _____

Date: _____

Appendix D

MANURE APPLICATION AGREEMENT

I, _____, (crop producer) agree to accept manure from the
_____ farm located at
_____ (address) for application to
my cropland. I agree to manage the manure in accordance with the Generally Accepted
Agricultural and Management Practices for Manure Management and Utilization (provided)
developed under the Right to Farm Act (PA 93 of 1981, as amended). I currently own/farm
_____ acres of cropland in a _____, _____,
_____, and _____ rotation. The duration of this
agreement will be ____ (number) years from date of signing below.

Signature: _____

Address: _____

Date: _____