

This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.

00-049 November, 2016

NOTIFICATION OF DISCHARGE OF LIVESTOCK WASTE

(Please print legibly)
AME OF OPERATION:
WNER:
DDRESS:
P.O. Box, Street Address
City, State and Zip Code
EGAL DESCRIPTION OF OPERATION: , of, of,N,N, © E or © W,County
you have an NPDES Permit? • No • Yes If yes, Permit No
OMPLETE THE FOLLOWING INFORMATION AND SUBMIT A MAP OR DRAWING OF HE OPERATION, LIVESTOCK WASTE CONTROL FACILITY (LWCF), DISCHARGE LOW PATTERN AND STREAM:
List reason(s) for discharge:
The discharge flowed into and
(ditch, drainage way, stream name)
(name of primary stream)

3. Did the discharge: • flow directly into surface water? • flow over crop land prior to discharging to surface water?

	(width in feet);		(depth in feet)
. Discharge started on		at	
	Date (mm/dd/yy)	Time (indicat	e a.m. or p.m.)
. Discharge ended on _			
	Date (mm/dd/yy)	Time (indicate	e a.m. or p.m.)
. Was the start time: •	Actual start time? •	When discharge v	vas discovered?
Average flow of the di	scharge was:		(gallons/minute)
Estimated total volume	e of discharge:		(gallons or cu. feet)
0. Was LWCF damage	d? • Yes • No If yes	s, describe damaç	ge to the LWCF:
	nditions helped minim		s to the environment from the
3. Describe any obviou	s or known impacts to	the environment	from the discharge:

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CERTIFICATION

I certify that, to the best of my knowledge and belief, I have the authority under the laws of the State of Nebraska to sign this form. I also certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations

X		
Signature of Authorized Representative	Date	

Title 130, "Livestock Waste Control Regulations," requires verbal notification to the Department within **24 hours** of becoming aware of a discharge or an anticipated discharge, at (402) 471-4239; or after business hours or weekends, at (402) 471-4700.

A written notification and report of the discharge must be submitted to the Department within **5 days** of the discharge. The written report should be submitted to the address at the bottom of this page.

If you observe dead fish that could have resulted from the discharge, contact the Nebraska Game and Parks Commission immediately at (402) 471-0641. After hours, call (402) 471-4545.

"Authorized Representative" means, for:

A Corporation: a principal executive officer in charge of a principal business

function and of at least the level of vice president; or A Limited Liability Company: a manager or principal executive officer; or

A Partnership: a general partner; or A Sole Proprietorship: the proprietor; or

A Municipal, state or other public entity: a principal executive officer or ranking elected official

Questions? Contact: Nebraska Department of Environmental Quality, Agriculture Section, P.O. Box 98922, Lincoln, NE 68509-8922; phone (402)471-4239. Visit our web site at **deq.ne.gov**