

APPENDIX-V

TEMPORARY
CONCENTRATED ANIMAL FEEDING OPERATION APPLICATION
ALL CLASSES

FEE: \$200.00

Applicant Information:

Name of Applicant: _____
Address of Applicant: _____
Phone No(s): _____ (WORK) _____ (HOME) _____ (CELL)

Operation Information:

Name of Animal Feeding Operation: _____
Address of Operation: _____
Legal Description: _____
Operation is: _____ Proposed _____ Existing/New Ownership _____ Expanding Existing

Livestock Information:

Types of animals: _____ Avg. Weight: _____
Number of animals: _____

THE FOLLOWING MUST BE INCLUDED WITH CAFO APPLICATION

- A. A full written plan must be submitted to the Zoning Administrator at least one (1) month in advance of the public hearing for public inspection.
- B. Manure management plan along with a list of the owner's names and legal descriptions contracted to do manure land spreading.
- C. Nutrient management plan.
- D. Management plan for manure and fly and odor control.
- E. Site plan (not to scale) with measurements/distance in order to meet setbacks.
- F. Maps of the proposed site with information on soils, shallow aquifers, designated wellhead protection areas, and 100-year floodplain designation.
- G. Waiver from distance signed and notarized for each resident living within the setback area. (When applicable)
- H. Any other information as contained in the application and requested by the Spink County Zoning Board.

Applicant:

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this form and all attachments. Based on my inquiry of those persons immediately responsible for obtaining the information, I certify that the information is true, accurate and complete to the best of my knowledge and belief. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Further, I certify that, under the laws of the State of South Dakota, I have the authority to sign on behalf of the animal feeding operation for which this form is being submitted.

Owner's Signature _____ Date _____

~~~~~OFFICE USE ONLY~~~~~

Inspected by \_\_\_\_\_

Date inspected \_\_\_\_\_

Planning and Zoning Commission Action \_\_\_\_\_

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Conditions (if any) \_\_\_\_\_

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