

~~NEBRASKA DEPARTMENT OF WATER, ENERGY, AND ENVIRONMENTAL QUALITY~~

~~LIVESTOCK & AGRICULTURE SECTION * 245 FALLBROOK BLVD 1200 N STREET, SUITE 1400 * LINCOLN, NE 68521-0989~~

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~~TITLE 130 - FORM C~~
~~APPLICANT DISCLOSURE~~

~~This Applicant Disclosure is required from all applicants for construction and operating permits, major modifications, transfer requests, National Pollutant Discharge Elimination System (NPDES) individual permits, or requests for coverage under a NPDES General Permit. If additional space is needed for any section, please print, "See Attached," in that section and attach the required information on a separate sheet of paper.~~

~~LEGAL NAME OF APPLICANT: _____~~

~~(Legal name of permittee, i.e.: Legal name of sole proprietor, partnership, limited liability company, corporation, or government entity)~~

~~NAME OF ANIMAL FEEDING OPERATION (AFO): (May be different than Applicant Name given above.)~~

~~AFO LOCATION _____ N, _____ E or _____ W _____ County~~
~~_____ Qtr. _____ Qtr. _____ Section _____ Township _____ Range~~

~~TYPE OF BUSINESS (check one): Sole Proprietor Partnership Limited Liability Company~~
 ~~Corporation Government Entity~~

~~SECTION I - Owner or Authorized Representative Information~~

~~in the space provided below, disclose the name, title, address, phone number and email address (email optional) of the applicant, partners, owners, members, authorized representative(s), and all corporate officers, directors, and stockholders.~~

Name	Title or Association with Operation	Address & Phone No. (Email Optional)
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_____	Street Address: _____ City/State/Zip: _____ Phone No.: _____ Email: _____	_____ _____ _____ _____
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_____	Street Address: _____ City/State/Zip: _____ Phone No.: _____ Email: _____	_____ _____ _____ _____
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_____	Street Address: _____ City/State/Zip: _____ Phone No.: _____ Email: _____	_____ _____ _____ _____
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SECTION II – Participation in Other AFOs

In the space below, list the location of all animal feeding operations in Nebraska and other states wholly or partially owned or operated in the past 5 years by the applicant or individual(s) listed in Section I.

Name	Name of Operation	Legal Location of Operation <i>(Qtr, Section, Township, Range, County, State)</i>
<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/> <hr/>
<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/> <hr/>
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SECTION III – Livestock Waste Discharges

In the space below, list any livestock waste discharges within the past five years that were not in compliance with permit conditions from any operation in Nebraska wholly or partially owned or operated by the applicant or individuals listed in Section I.

Name of Operation	Location & Legal Description of Operation	Date(s) of Discharge
<hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/>
<hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/>
<hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/>
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SECTION IV – Previous Violations of Environmental Laws

In the space below, list all criminal convictions for a violation of §81-1506 of the Nebraska Environmental Protection Act or all felony criminal convictions for violation of the environmental laws of any jurisdiction by any of the individuals listed in Section I. Include the name of the individual, name of the operation, date(s) of violation, and describe the violation. If additional space is needed, please attach a separate sheet of paper.

CERTIFICATION

As authorized representative for the animal feeding operation described above, I hereby certify the following:

A. Neither I, nor any of the persons named in Section I, have:

- 1) Allowed three or more livestock waste discharges to Waters of the State within the past five years that were not in compliance with permit conditions from any operation in Nebraska wholly or partially owned or operated by the applicant and individuals listed in Section I;
- 2) A criminal conviction for violation of §81-1506 of the Nebraska Environmental Protection Act, or a felony criminal conviction for violation of environmental laws in any jurisdiction.

B. That to the best of my knowledge and belief, I have the authority under the laws of the State of Nebraska to sign this applicant disclosure.

C. Under penalty of law, that the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that significant penalties exist for submitting false information, including the possibilities of a fine and imprisonment for knowing violations. I have completely and accurately disclosed all information required by this form.

D. I understand any misrepresentation or withholding of information may result in rejection of the application or revocation of a permit once issued. I also understand that any misrepresentation on this form may result in civil or criminal penalties provided for by law.

Printed or Typed Name of Authorized Representative

Signature of Authorized Representative

Date of Signature

"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

NOTE: Applicant is responsible for compliance with all local laws and for obtaining applicable local, county, and other permits.

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