



**Standard Application Form for
Agricultural Permit Modifications
(for existing facilities)**

Please Type or Print

Section 1 – FACILITY INFORMATION

DATE _____ FACILITY NUMBER ND _____

PERMIT NUMBER _____ DATE ISSUED _____

FARM NAME _____

COUNTY _____ COMMUNITY _____

LOCATION _____

PERMIT MODIFICATION REQUESTED _____

IS THIS AN UPDATED ANIMAL FACILITY MANAGEMENT PLAN? YES or NO

Section 2 – CONTACT INFORMATION

APPLICANT _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

APPLICANT'S EMAIL ADDRESS _____

ARE YOU THE PROPERTY OWNER OF RECORD? YES or NO IF NO, PROVIDE INFORMATION:

PROPERTY OWNER OF RECORD _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

OPERATOR'S NAME _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (HOME) _____ (CELL/BEEPER) _____

OPERATOR'S EMAIL ADDRESS _____

PLAN PREPARER _____

TITLE/SC REGISTRATION NUMBER _____

ADDRESS _____

PHONE NUMBER (WORK) _____ (FAX) _____ (CELL/BEEPER) _____

PLAN PREPARER'S EMAIL ADDRESS _____

Section 3 - CERTIFICATION

I HEREBY CERTIFY THAT ALL OPERATIONS, MAINTENANCE AND ASSOCIATED ACTIVITY PERTAINING TO THIS SITE SHALL BE ACCOMPLISHED PURSUANT TO AND IN KEEPING WITH THE TERMS AND CONDITIONS OF THE APPROVED PLANS. I HAVE READ THIS APPLICATION AND AGREE TO THE REQUIREMENTS AND CONDITIONS THAT ARE CONTAINED WITHIN. THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I HEREBY GRANT AUTHORIZATION TO THE DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL THE RIGHT OF ACCESS TO THE SITE AT ALL REASONABLE HOURS FOR THE PURPOSE OF SAMPLING AND ON SITE INSPECTIONS.

Printed Name /Owner or Leasee

Signature/Owner or Leasee

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE DESIGN IS CONSISTENT WITH THE REQUIREMENTS OF TITLE 48, CHAPTER 1 OF THE 1987 SC CODE OF LAWS, AND PURSUANT REGULATION 61-43 AND APPROPRIATE NRCS STANDARDS.

Printed Name/Plan Preparer

Signature/Plan Preparer

APPLICATION INSTRUCTIONS - Agricultural Animal Facility Permit Modification

Purpose:

This form must be completed and submitted for DHEC approval for agricultural animal facility permit modifications.

Item-by-Item Instructions:

Section 1 - Facility Information.

Date: Enter the date of application.

Facility Number: Leave blank if this is a new facility

Permit Number: Provide the permit number for the permitted facility.

Date Issued: Provide the date on which DHEC issued the permit.

Farm Name: Give the name of the agricultural animal facility.

County: Give the county in which the facility is located.

Community: Give the name of the community in which the facility is located.

Location: Give directions to the facility from the nearest town or state road.

Permit Modification Requested: Describe the modifications that you are proposing to make to the facility (such as increase in the number of animals, change in manure handling, add new waste utilization areas, etc...).

Updated Management Plan: Circle YES or NO to indicate whether this application also includes or is for an updated animal facility management plan.

Section 2 - Contact Information.

Permit Applicant: Enter the name, address and phone numbers for the person who is applying for the permit modification.

Property Owner of Record: Circle YES or NO to indicate whether the permit applicant is the property owner of record. Enter the name, address and phone number of the person who legally owns the property on which the agricultural animal facility is located.

Operator: Enter the name, address and phone number of the person who is responsible for the daily operation of the facility.

Plan Preparer: Enter the name of the plan preparer.

Title/SC Registration Number: Enter the title and SC registration number (if applicable) of the person responsible for the design of the Animal Facility Management plan.

Address, Phone Number: Enter the business address and phone numbers for the plan preparer.

Section 3 – Certification. For this section, please read the certification statements and have the appropriate person(s) sign the certification.

DHEC Processing Procedures:

Two (2) copies of the submittal package are submitted to DHEC. After Permitting, DHEC files the original in the main project file, located in DHEC's central office. DHEC sends a copy of the approved package to the appropriate EQC District Office.