Print All Pages

Print Form Only

United States
Environmental Protection Agency

Office of Water
Washington, D.C.

EPA Form 3510-2B
Revised March 2019

Water Permits Division

Application Form 2B

Concentrated Animal Feeding Operations and Concentrated Aquatic Animal Production Facilities

NPDES Permitting Program

Note: Complete this form ***and*** Form 1 if your facility is a new or existing concentrated animal feeding operation or concentrated aquatic animal production facility.

Paperwork Reduction Act Notice

The U.S. Environmental Protection Agency (EPA) estimates the average burden for concentrated animal feeding operation respondents to collect information and complete Form 2B to be 9.2 hours (8.7 hours to complete and submit the application and 0.5 hours to complete and submit a nutrient management plan). EPA estimates the average burden for concentrated aquatic animal production respondents to collect information and complete Form 2B to be 5.5 hours. These estimates include time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and reviewing the collection of information. Send comments about the burden estimates or any other aspect of this collection of information to the Chief, Information Policy Branch (PM-223), U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, DC 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th Street, NW, Washington, DC 20503, marked "Attention: Desk Officer for EPA."

FORM 2B—INSTRUCTIONS

General Instructions

Who Must Complete Form 2B?

You must complete Form 2B if you answered "Yes" to Item 1.2.1 on Form 1—that is, if you are a concentrated animal feeding operation (CAFO) or a concentrated aquatic animal production (CAAP) facility.

Where to File Your Completed Form

Submit your completed application package (Forms 1 and 2B) to your National Pollutant Discharge Elimination System (NPDES) permitting authority. Consult Exhibit 1–1 of Form 1's "General Instructions" to identify your NPDES permitting authority.

Public Availability of Submitted Information

The U.S. Environmental Protection Agency (EPA) will make information from NPDES permit application forms available to the public for inspection and copying upon request. You may not claim any information on Form 2B (or related attachments) as confidential.

You may make a claim of confidentiality for any information that you submit to EPA that goes beyond the information required by Form 2B. Note that NPDES authorities will deny claims for treating any effluent data as confidential. If you do not assert a claim of confidentiality at the time you submit your information to the NPDES permitting authority, EPA may make the information available to the public without further notice to you. EPA will handle claims of confidentiality in accordance with the Agency's business confidentiality regulations at Part 2 of Title 40 of the *Code of Federal Regulations* (CFR).

Completion of Forms

Print or type in the specified areas only. If you do not have enough space on the form to answer a question, you may continue on additional sheets, as necessary, using a format consistent with the form.

Provide your EPA Identification Number from the Facility Registry Service, NPDES permit number, and facility name at the top of each page of Form 2B and any attachments. If your facility is new (i.e., not yet constructed), write or type "New Facility" in the space provided for the EPA Identification Number and NPDES permit number. If you do not know your EPA Identification Number, contact your NPDES permitting authority. See Exhibit 1–1 of the "General Instructions" of Form 1 for contact information.

Do not leave any response areas blank unless the form directs you to skip them. If the form directs you to respond to an item that does not apply to your facility or activity, enter "NA" for "not applicable" to show that you considered the item and determined a response was not necessary for your facility.

The NPDES permitting authority will consider your application complete when it and any supplementary material are received and completed according to the authority's satisfaction. The NPDES permitting authority will judge the completeness of any application independently of the status of any other permit application or permit for the same facility or activity.

Definitions

The legal definitions of all key terms used in these instructions and Form 2B are in the "Glossary" at the end of the "General Instructions" in Form 1.

Line-by-Line Instructions

Section 1. General Information

Item 1.1. Mark whether your facility/business type is a CAFO or a CAAP.

- For a CAFO, you must complete Sections 1 through 6 and Section 8.
- For a CAAP, you must complete Sections 1, 7, and 8.

Item 1.2. Indicate whether your facility is an existing or proposed facility. Mark "Proposed Facility" if your facility is presently not in operation or is expanding to meet the definition of a CAFO in accordance with the regulations at 40 CFR 122.23.

Section 2. CAFO Owner/Operator Contact Information

Item 2.1. Provide the name, title, telephone number, and email address of the owner/operator of the facility/business.

Item 2.2. Provide the complete mailing address of the owner/operator of the facility/business.

Section 3. CAFO Location and Contact Information

Item 3.1. Provide the legal name and location (complete mailing address) of the facility. Also indicate whom the NPDES permitting authority should contact about the application, including a telephone number and email address.

Item 3.2. Provide the latitude and longitude of the entrance to the production area (i.e., the part of the operation that includes the animal confinement area, the manure storage area, the raw materials storage area, and the waste containment areas). Latitude and longitude coordinates may be obtained in a variety of ways, including use of hand held devices (e.g., a GPS enabled smartphone), internet mapping tools (e.g., https://mynasadata.larc.nasa.gov/latitudelongitude-finder/), geographic information systems (e.g., ArcView), or paper maps from trusted sources (e.g., U.S. Geological Survey or USGS). For further guidance, refer to http://www.epa.gov/geospatial/latitudelongitude-data-standard.

Item 3.3. If the facility uses a contract grower, provide the name and complete mailing address of the integrator.

Section 4. CAFO Topographic Map

Item 4.1. Provide a topographic map of the geographic area in which the facility is located, showing the specific location of the production area(s). You are not required to provide the topographic map required by Section 7 of Form 1.

On each map, include the map scale, a meridian arrow showing north, and latitude and longitude to the nearest second. Latitude and longitude coordinates may be obtained in a variety of ways, including use of hand held devices (e.g., a GPS enabled smartphone), internet mapping tools (e.g., https://mynasadata.larc.nasa.gov/latitudelongitude-finder/),

geographic information systems (e.g., ArcView), or paper maps from trusted sources (e.g., USGS).

On all maps of rivers, show the direction of the current. In tidal waters, show the directions of ebb and flow tides.

You may develop your map by going to the United States USGS's National Map website at http://nationalmap.gov/. (For a map from this site, use the traditional 7.5-minute quadrangle format. If none is available, use a USGS 15-minute series map.) You may also use a plat or other appropriate map. Briefly describe land uses in the map area (e.g., residential, commercial.). Note that you have completed your topographic map and attached it to the application.

Section 5. CAFO Characteristics

Supply all information in Section 5 if you checked "Existing facility" in response to Item 1.2.

Item 5.1. Provide the maximum number of each type of animal in open confinement or housed under roof (either partially or totally) that are held at your facility for a total of 45 days or more in any 12-month period. Provide the total number of animals confined at the facility.

Item 5.2. Identify the applicable types of containment and storage for manure, litter, and process wastewater at the facility and indicate the capacity of storage in days and gallons or tons.

Item 5.3. Indicate the total number of acres that are drained and collected in the containment and storage structure(s).

Item 5.4. Specify the tons of manure or litter and the gallons of process wastewater generated at the facility on an annual basis.

Item 5.5. Indicate whether the manure, litter, and/or process wastewater is land applied. If yes, continue to Item 5.6. If no, skip to Item 5.8.

Item 5.6. Indicate the number of acres of land under the control of the applicant that are available for land application of the manure, litter, or process wastewater.

Item 5.7. Check any of the identified best management practices that are being implemented at the facility to control runoff and protect water quality.

Item 5.8. Indicate if the manure, litter, and/or process wastewater is transferred to any other persons. If yes, continue to Item 5.9. If no, skip to Item 5.10.

Item 5.9. Specify the tons of manure or litter or the gallons of process wastewater transferred annually to other people.

Item 5.10. Describe any alternative uses of manure, litter, or process wastewater, if any (e.g., composting, pelletizing, energy generation).

Section 6. CAFO Nutrient Management Plans

Item 6.1. Indicate if you have submitted a nutrient management plan that satisfies the requirements at 40 CFR 122.42(e) and, if applicable, the requirements at 40 CFR 412.4(c).

Item 6.2. If you have not yet submitted a nutrient management plan, explain why not.

Item 6.3. Indicate if a nutrient management plan is being implemented at the CAFO. If not land applying, describe the alternative uses of the manure, litter, and wastewater (e.g., composting, pelletizing, energy generation).

Item 6.4. Indicate the date of the last review or revision of the nutrient management plan.

Note: A permit application is not complete until a nutrient management plan is submitted to the NPDES permitting authority.

Section 7. CAAP Facility Characteristics

Item 7.1. Indicate if the CAAP facility is located on land. If the facility is located in water (e.g., a net pen or submerged cage system), check "No" and skip to Item 7.3. If yes, continue to Item 7.2.

Item 7.2. Provide the maximum daily and maximum average monthly discharge at the CAAP facility by outfall number. Outfall numbers should correspond with the outfall numbers provided on the map submitted in Section 7 of Form 1. Values given for flow should be representative of your normal operation. The maximum daily flow is the maximum measured flow occurring over a calendar day. The maximum average monthly flow is the average of measured daily flow over the calendar month of highest flow.

Item 7.3. Indicate the number of ponds, raceways, net pens, submerged cages, or similar structures at your facility that result in discharges to waters of the United States. Describe each type and provide the name of the associated receiving water and intake water source.

Item 7.4. List the species of fish or aquatic animals held and fed at your facility. Distinguish between cold-water and warm-water species. The names of fish species should be proper, common, or scientific names as given in Special Publication 34 of the American Fisheries Society, *Common and Scientific Names of Fishes from the United States, Canada, and Mexico*.

For each species, provide the total harvestable weight in pounds (lbs.) for a typical calendar year. Also indicate the maximum weight present at any one time at your facility.

Item 7.5. Indicate the maximum monthly pounds of food given at your facility. Also indicate the month given. The amounts should be representative of your normal operations.

Section 8. Checklist and Certification Statement

Item 8.1. Review the checklist provided. In Column 1, mark the sections of Form 2B that you have completed and are submitting with your application. For each section in Column 2, indicate whether you are submitting attachments.

Item 8.2. The Clean Water Act provides for severe penalties for submitting false information on this application form. CWA Section 309(c)(2) provides that, "Any person who knowingly makes any false statement, representation, or certification in any application, …shall upon conviction, be punished by a fine of no more than $10,000 or by imprisonment for not more than six months, or both."

FEDERAL REGULATIONS AT 40 CFR 122.22 REQUIRE THIS APPLICATION TO BE SIGNED AS FOLLOWS:

A. For a corporation, by a responsible corporate officer. For the purpose of this section, a responsible corporate officer means: (1) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (2) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

B. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively.

C. For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official. For purposes of this section, a principal executive officer of a federal agency includes: (1) The chief executive officer of the agency, or (2) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of EPA).

END

Submit your completed Form 1, Form 2B, and all associated attachments (and any other required NPDES application forms) to your NPDES permitting authority.

This page intentionally left blank.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
		4 Bros. Dairy, Inc.	

Form 2B NPDES	EPA	U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater CONCENTRATED ANIMAL FEEDING OPERATIONS and CONCENTRATED AQUATIC ANIMAL PRODUCTION FACILITIES

SECTION 1. GENERAL INFORMATION (40 CFR 122.21(l)(1))

General Information

1.1 Indicate the facility/business type. (Check only one response.)

☑ CAFO ➔ Complete Sections 1 through 6 and Section 8.

☐ CAAP ➔ Complete Sections 1, 7, and 8.

1.2 Indicate the operational status of the facility. (Check one.)

☑ Existing facility ☐ Proposed facility

SECTION 2. CAFO OWNER/OPERATOR CONTACT INFORMATION (40 CFR 122.21(f)(2) and (4) and 122.21(i)(1)(i))

CAFO Owner/Operator Contact Information

2.1 **Owner/Operator Contact**

Name (first and last)	Title
Andrew Fitzgerald	Partner
Phone number	**Email address**
(208) 308-4716	af@4brosdairy.com

2.2 **Owner/Operator Mailing Address**

Street or P.O. box		
425 North 250 West		
City or town	State	Zip code
Shoshone	ID	83352

SECTION 3. CAFO LOCATION AND CONTACT INFORMATION (40 CFR 122.21(i)(1)(ii and iii))

CAFO Location and Contact Information

3.1 **CAFO Location and Contact**

Name		
4 Bros. Dairy, Inc.		
Address (street, route number, or other specific identifier)		County
425 North 250 West		Lincoln
City or town	State	Zip code
Shoshone	ID	83352
Facility contact name	Phone number	Email address
Andrew Fitzgerald	(208) 308-4716	af@4brosdairy.com

3.2 **Latitude/Longitude of Entrance to Production Area** (see instructions)

Latitude	Longitude
42° 59′ 54.24″ N	114° 27′ 16.31″ W

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
		4 Bros. Dairy, Inc.	

CAFO Location and Contact Information Continued

3.3 **Integrator Name and Address**

Name		
N/A		
Street address		
City or town	State	Zip code

SECTION 4. CAFO TOPOGRAPHIC MAP (40 CFR 122.21(i)(1)(iv))

CAFO Topographic Map

4.1 Have you attached a topographic map containing all required information to this application? (See instructions for specific requirements.)

☑ Yes ➔ SKIP to Section 5. ☐ No

SECTION 5. CAFO CHARACTERISTICS (40 CFR 122.21(i)(1)(v ix))

CAFO Characteristics

5.1 Provide information on the type and number of animals in the table below.

Animal Type	Number in Open Confinement	Number Housed Under Roof	Animal Type	Number in Open Confinement	Number Housed Under Roof
☑ Mature dairy cows	11400		☐ Sheep or lambs		
☑ Dairy heifers	8703		☐ Chickens (broilers)		
☐ Veal calves			☐ Chickens (layers)		
☑ Cattle (not dairy or veal calves)	456		☐ Ducks		
☐ Swine (55 lbs. or more)			☐ Other (specify)		
☐ Swine (under 55 lbs.)			☐ Other (specify)		
☐ Horses			☐ Other (specify)		
☐ Turkeys			**Total Animals**		

5.2 Indicate the type of containment and storage, total number of days, and total capacity for manure, litter, and process wastewater storage in the table below.

Type of Containment and Storage	Total Number of Days	Total Capacity (specify gallons or tons)	Type of Containment and Storage	Total Number of Days	Total Capacity (specify gallons or tons)
☐ Anaerobic lagoon			☐ Belowground storage tanks		
☐ Evaporation			☐ Roofed storage shed		
☐ Aboveground storage tanks			☐ Concrete pad		
☑ Storage pond	235	15811038	☐ Impervious soil pad		
☐ Underfloor pit			☐ Other (specify)		

5.3 Indicate the total number of acres drained and collected in the containment and storage structure(s) reported under Item 5.2.

685 acres

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
		4 Bros. Dairy, Inc.	

CAFO Characteristics Continued

Manure, Litter, and/or Process Wastewater Production and Use

5.4 How many tons of manure or litter and gallons of process wastewater are generated annually at the CAFO?

Manure	400968	tons
Litter	n/a	tons
Process wastewater	92179688	gallons

5.5 Is manure, litter, and/or process wastewater generated at the CAFO land applied?

☑ Yes ☐ No ➔ SKIP to Item 5.8.

5.6 How many acres of land under the control of the applicant are available for applying the CAFO's manure, litter, or process wastewater?

3065 acres

5.7 Check all land application best management practices that are being implemented.

☑ Buffers ☐ Infiltration field
☑ Setbacks ☐ Grass filter
☐ Conservation tillage ☐ Terrace
☐ Constructed wetlands ☐ Other (specify)

5.8 Is manure, litter, and/or process wastewater transferred to any other persons?

☑ Yes ☐ No ➔ SKIP to Item 5.10.

5.9 How many tons of manure or litter and gallons of process wastewater, produced by the CAFO, are transferred annually to other people?

Manure	352851	tons
Litter	N/a	tons
Process wastewater	0	gallons

5.10 Describe alternative use(s) of manure, litter, or process wastewater, if any.

N/a

SECTION 6. CAFO NUTRIENT MANAGEMENT PLANS (40 CFR 122.21(i)(1)(x))

CAFO Nutrient Management Plans

6.1 Has the applicant attached a nutrient management plan that satisfies the requirements at 40 CFR 122.42(e) and, if applicable, the requirements at 40 CFR 412.4(c)? **Note:** A permit application is not complete until a nutrient management plan is submitted to the NPDES permitting authority.

☑ Yes ➔ SKIP to Item 6.3. ☐ No

6.2 Explain why a nutrient management plan is not attached to the application.

6.3 Is a nutrient management plan being implemented at the CAFO?

☑ Yes ☐ No

6.4 What was the date of the last review or revision of the nutrient management plan? Date 05/01/2019

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
		4 Bros. Dairy, Inc.	

SECTION 7. CAAP FACILITY CHARACTERISTICS (40 CFR 122.21(i)(2))

CAAP Facility Characteristics

7.1 Is the CAAP facility located on land?

☐ Yes ☐ No ➔ SKIP to Item 7.3.

7.2 Provide the maximum daily and maximum average monthly discharge at CAAP by outfall.

Outfall Number	Discharge	
	Maximum Daily Discharge	Maximum Average Monthly Discharge
	gpd	gpd
	gpd	gpd
	gpd	gpd

7.3 Indicate the type and number of discharge structures at the CAAP. Provide a brief description of each structure. Also note the name of the receiving water and the source of the intake water for each structure.

Structure Type	Number of Each	Description	Receiving Water Name	Source of Intake Water
Ponds				
Raceways				
Net pens				Not applicable
Submerged cages				Not applicable
Similar structures (specify) _____				

7.4 List the cold-water and/or warm-water aquatic species raised/produced in the table below. For each species listed, indicate the total yearly and maximum harvestable weight (in pounds).

Cold Water Species			Warm Water Species		
Species	Harvestable Weight		Species	Harvestable Weight	
	Total Yearly	Maximum		Total Yearly	Maximum
	lbs.	lbs.		lbs.	lbs.
	lbs.	lbs.		lbs.	lbs.
	lbs.	lbs.		lbs.	lbs.
	lbs.	lbs.		lbs.	lbs.

7.5 Indicate the calendar month of maximum feeding and the total mass of food fed (in pounds) during that month.

Month of Maximum Feeding	Total Mass of Food Fed
	lbs.

EPA Identification Number	NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004
		4 Bros. Dairy, Inc.	

SECTION 8. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement

8.1 In Column 1, below, mark the sections of Form 2B that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.

Column 1	Column 2
☑ Section 1: General Information	☐ w/ attachments
☑ Section 2: CAFO Owner/Operator Contact Information	☐ w/ attachments
☑ Section 3: CAFO Location and Contact Information	☐ w/ attachments
☑ Section 4: CAFO Topographic Map	☑ w/ topographic map ☐ w/ additional attachments
☑ Section 5: CAFO Characteristics	☐ w/ attachments
☑ Section 6: CAFO Nutrient Management Plans	☑ w/ nutrient management plan ☐ w/ attachments
☐ Section 7: CAAP Facility Characteristics	☐ w/ attachments
☑ Section 8: Checklist and Certification Statement	☐ w/ attachments

8.2 **Certification Statement**

I 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.

Name (print or type first and last name)	Official title
Signature	Date signed

Click to go back to the beginning of Form

PA Identification Number	NPDES Permit Number	Facility Name
		4 Bros. Dairy, Inc.

Form Approved 03/05/19
OMB No. 2040-0004

ON 8. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

8.1 In Column 1, below, mark the sections of Form 2B that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to provide attachments.

Column 1	Column 2
☑ Section 1: General Information	☐ w/ attachments
☑ Section 2: CAFO Owner/Operator Contact Information	☐ w/ attachments
☑ Section 3: CAFO Location and Contact Information	☐ w/ attachments
☑ Section 4: CAFO Topographic Map	☑ w/ topographic map ☐ w/ additional attachments
☑ Section 5: CAFO Characteristics	☐ w/ attachments
☑ Section 6: CAFO Nutrient Management Plans	☑ w/ nutrient management plan ☐ w/ attachments
☐ Section 7: CAAP Facility Characteristics	☐ w/ attachments
☑ Section 8: Checklist and Certification Statement	☐ w/ attachments

8.2 **Certification Statement**

I 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.

Name (print or type first and last name)	Official title
AUDREW FITZGERALD	SEC-TRES
Signature	**Date signed**
Andrew Fitzgerald	9-28-20