

For LWRD Use Only
Received By:
Date:

## Manure Storage Facility Certificate of Use Application

For questions related to this permit application, please contact Dane County Land Conservation Division at (608) 224-3730.

Landowner:	_ Applicant:
Landowner Address:	_ Applicant Address:
Landowner Phone:	Applicant Phone:
Landowner email:	_ Applicant email:
Location of Facility: Township	_ Section ¼ Parcel #
Permit Fee: \$1000* *Fee waived if submit	ted by November 1st, 2020
Check # Checks shall be made	out to: Dane County Treasurer
	pplicant allow the Department to enter the property where the facilities we action per Chapter 49.21, Dane County Code of Ordinances.
Applicant Signature:	Date:
Return To: Dane County Land & Water Resources 5201 Fen Oak Drive, Room 208 Madison, WI 53718	For LCD Use Only Engineering review completed by: Nutrient Management Plan review completed by:
Do you have any of the following:	Date Issued:
Engineering Plans & Specifications for one or more of these manure storage facilities	Certificate of Use #:
Nutrient Management Plan	

## ADDITIONAL INFORMATION IS REQUIRED ON BACK OF THIS FORM

## Dane County Manure Storage Certificate of Use Application

Please fill out the information below as completely as possible. Leave information blank if unknown.

r ead	ch facility, describe the follow	ving:		
cility	Name:			Year Constructed:
≻	Estimated Volume	Gallons	Tons	Days of Storage:
	Position (check all that apply)	Above Ground	Below Ground	Under Barn
≻	Liner Type (check all that apply)	Concrete	Earthen	Other
≻	Sides (check all that apply)	Vertical Walls	Sloped Sides	Other
$\triangleright$	Dimensions	Length	Width	Depth
	Are there transfer channels	or pipes to or from	this storage? Yes	No
	Was the facility constructed government agency?	d with technical sup Yes No	port and/or cost share fun	ds from a federal, state or local
≻	Type of Animals (check all that	apply) Dairy E	Beef Heifer Swin	e Horse Poultry
	Other			
	Number of Animals (by type)			
>				
– – cility	v Name:			Year Constructed:
 cility ≻	Vame: Estimated Volume	Gallons	Tons	Year Constructed: Days of Storage:
 cility ≻	V Name: Estimated Volume Position (check all that apply)	Gallons	Tons	Year Constructed: Days of Storage: Under Barn
cility	V Name: Estimated Volume Position (check all that apply) Liner Type (check all that apply)	Gallons Above Ground	Tons Below Ground Earthen	Year Constructed: Days of Storage: Under Barn Other
cility	V Name: Estimated Volume Position (check all that apply)	Gallons Above Ground Concrete Vertical Walls	Tons Below Ground Earthen Sloped Sides	Year Constructed: Days of Storage: Under Barn Other Other
cility	Name: Estimated Volume Position (check all that apply) Liner Type (check all that apply) Sides (check all that apply) Dimensions	Gallons Above Ground Concrete Vertical Walls Length	Tons Below Ground Earthen Sloped Sides Width	Year Constructed: Days of Storage: Under Barn Other Other
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cility	Name: Estimated Volume Position (check all that apply) Liner Type (check all that apply) Sides (check all that apply) Dimensions Are there transfer channels Was the facility constructed government agency? Type of Animals (check all that	Gallons Above Ground Concrete Vertical Walls Length s or pipes to or from d with technical sup Yes No apply) Dairy B	Tons Below Ground Earthen Sloped Sides Width o this storage? Yes	Year Constructed: Days of Storage: Under Barn Other Other Depth No ds from a federal, state or local e Horse Poultry