| Rev. Code | : 531 |
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| Date Rec. | |
| \$ Rec | |

OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, AND FORESTRY Agricultural Environmental Management Services

PO Box 528804 Oklahoma City, Oklahoma 73152 Phone: (405) 522-5998 Fax: (405) 522-6357

NEW POULTRY FEEDING OPERATION REGISTRATION APPLICATION

| \$10 Application Fee | |
|---|---|
| Legal Description of the Facility Location (to the near | est 10 acres): |
| 1/41/4 Section Tow | nship Range County |
| 1. Owner (<u>Requires Completion</u>) | 2. Operator (<u>Must complete if different than owner</u>) |
| Name | Name |
| Address | Address |
| City | City |
| StateZip | StateZip |
| Phone () | Phone () |
| Additional Phone () | Additional Phone () |
| Owner e-mail address: | Operator e-mail address: |
| 3. Farm Information (Requires Completion) | 4. Integrator (Requires Completion) |
| Farm Name | Name |
| Contact Person_ | Contact Person |
| Farm Physical Address | Address |
| City | City |
| StateZip | |
| Phone () | Phone () |
| Email address: | Email address: |
| Location of Farm Entrance: | |
| Latitude Lon | gitude |

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Description of Farm (please complete the following table for the farm being registered):

| # of Houses | Poultry House Dimensions (Ft.) | | | Bird Type (ex: Pullet, Broiler, Layer) | # of birds per house |
|----------------|--------------------------------|---|-------|--|----------------------|
| | Length | X | Width | | |
| | Length | X | Width | | |
| | Length | X | Width | | |
| | Length | X | Width | | |
| | Length | X | Width | | |

THE FOLLOWING INFORMATION $\underline{\text{MUST}}$ ACCOMPANY THIS APPLICATION:

| 1. | A detailed scaled map identifying the following within one (1) mile of the facility: Occupied Residence(s) |
|----|--|
| | Public School(s) |
| | ☐ Incorporated City Limits |
| | ☐ Public Roadway(s) |
| | ☐ Property Boundary |
| | Perennial or intermittent stream(s) as identified on a current USGS 7.5 minute topographic map |
| | Private well(s) not owned or used for the poultry feeding operation |
| | ☐ Public Well(s) |
| | ☐ Location of the poultry barns, composters and other carcass disposal areas, litter sheds, and other buildings associated with the operation |
| 2. | A copy of the current approved Nutrient Management Plan or proof of application for such plan or any other plans authorized by the State Department of Agriculture. |
| 3. | A Statement of Ownership – please mark the applicable answer and provide necessary documentation The applicant is a corporation – please provide the name and address of the corporation and the name and address of each officer and registered agent of the corporation. The applicant is a partnership or other legal entity – please provide the name and address of each partner and stockholder with an ownership interest of 10% (ten percent) or more. Not Applicable |
| 4. | Environmental History, Records, and Awards – please mark the applicable answer and provide necessary documentation An environmental history from the past three years of any poultry feeding operation established and operated by the applicant or any other operation with common ownership in this state or any other state. Not Applicable |
| | |

5. Warranty Deed (Proof of Ownership)

(SEAL)

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Instructions for Required Affidavit:

All natural persons applying for a new poultry operation registration from the Oklahoma Department of Agriculture, Food, and Forestry (Department) are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Department with verification of lawful presence in the United States by executing the Affidavit below before a notary public or other officer authorized to notarized affidavits under State law.

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Affidavit of

[Print Applicant's Name] STATE OF ______) COUNTY OF _____ , of lawful age, being first duly sworn, upon Applicant's oath states, under (Print Name) penalty of perjury, as follows: I am a United States Citizen, or I am a qualified alien under the federal Immigration and Naturalization Act, and I am lawfully present in the United States. [Signature of Applicant] Subscribed and sworn to or affirmed before me this _____ day of ____, 20___, by [Print Applicant's Name] Notary Public My Commission Expires: Notary Commission No.:

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Facility Application Review Resources

Google Earth
https://www.google.com/earth/versions/

Oklahoma Water Resources Board Interactive Maps and GIS Data https://www.owrb.ok.gov/maps/index.php

Oklahoma Department of Environmental Quality Data Viewer https://gis.deq.ok.gov/maps/

United States Geological Survey TopoView https://ngmdb.usgs.gov/topoview/viewer/#4/39.98/-100.06

United States Environmental Protection Agency NEPAssist https://nepassisttool.epa.gov/nepassist/nepamap.aspx

Earth Point

http://www.earthpoint.us/Townships.aspx