

# Agricultural Environmental Management Services (AEMS) PO Box 528804, Oklahoma City OK 73152

AEMS.Poultry@ag.ok.gov / 405-522-5998

# TRANSFER POULTRY FEEDING OPERATION (PFO) APPLICATION (application must be submitted within 30 days after property sale)

PFO ID# Official Use Section – Rev Code 531 **Old Owner Name:** Make checks payable to "ODAFF" or if paying by ☐ Transfer Application Fee \$10 (effective 8/11/2024) credit card, fees apply. 1. New Applicant / Owner Information (required) Check One: ☐ Individual Owner(s) OR ☐ Corporation / LLC / Business Ownership Name: First Name or Business Name Mailing Address: \_\_\_\_ Phone#:\_\_\_\_\_ Email:\_\_\_\_ 2. New Farm Operator Information (if different from Owner) Name: \_\_\_\_\_ First Name Mailing Address:\_\_\_\_ Street City Phone#:\_\_\_\_\_ Email:\_\_\_\_ 3. New Farm Operation Information (required) Name:\_\_\_\_\_ Farm Name Physical Location: Street Address or Cross-Streets Phone#: Email:\_\_\_\_ Legal Description to the Nearest 10 Acres 1/4 \_\_\_\_1/4 Section: Township: Range: County: GPS Entrance Location to Farm: Latitude / Longitude (Lat/Long) 4. Integrator Information (required) Name: Integrator Name Mailing Location: Street Address or Cross-Streets City Phone#:\_\_\_\_\_ Email:\_\_\_\_

5 Descrip	tion of Form Onorg	tion	s: (check one): DF	vnort Only 🖂 Land Annly (	 Inly			
5. Description of Farm Operations: (check one): ☐ Export Only ☐ Land-Apply Only ☐ Both Current House Dimensions and Bird Capacity (as on file with the Department)								
# of			Dimensions (ft)	Bird Type	# Bird Capacity per			
Houses				(ex. Pullet, Broiler, Layer)	House			
	Length X Width							
	Length		Width					
			lanned Under New (	•				
_			<del>-</del>	pplication form (available onlin				
-	_			e of Intent (NOI) if overall dirt	disturbance for the			
				vailable on our website at:	Navor			
				tal Management → AgPDES p	rogram → NOI			
	arcass Disposal Pla	n io	r Daily Operations					
□ Compos	· ·		.1 PEG L' P					
	` 1		must have DEQ Air F	<i>'</i>				
	`			gement from land-fill facility)				
	= :	subi	nit letter of acknowle	dgement from rendering facility	y)			
\ <b>1</b>	olease describe):							
_	<del>-</del>	Plar	for Deaths Signification	antly Higher than Normal				
□ Composting								
☐ Incineration (depending on size, must have DEQ Air Permit)								
☐ Land-fill (if selected, must submit letter of acknowledgement from land-fill facility)								
☐ Rendering (if selected, must submit letter of acknowledgement from rendering facility)								
☐ Other (p	olease describe):							
6. Checkli	st of Additional Doc	cum	ents Required with <b>N</b>	New Application Submission (	(no construction)			
			-	Plan meeting expansion plans				
	* *		_	Plan (NMP) to include the exp	<u> </u>			
			_	ease mark the applicable answer				
docume	ntation							
□The a	applicant is a corpora	ition	– please provide the	name and address of the corpor	ration and the name and			
address	s of each officer and	regis	stered agent of the cor	rporation. (please complete the	Corporation Data Sheet in			
this pa								
☐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. (please see Corporation Data Sheet)								
□Not Applicable, the farm operation is owned by a person(s) not associated with partnership/business								
☐ 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								
☐ Warranty Deed (Proof of Land Ownership)								
☐ Notarized Lawful Presence Affidavit (in this packet)								
□ NMP Transfer Form (in this packet)								
☐ Final Annual Litter Report from Previous Owner (copy available in this packet)								
I certify under penalty of law this document was verified and updated under my direction to the best of my								
knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for knowingly								
submitting false information.								
SIGNATU	RE:			DATE:				

(revised 8/2024) Page **2** of **7** PFO Transfer Packet

Instructions for Required Affidavit:

All natural persons applying for a 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	) ss: )	
oath states, under penalty of perjury,	, of lawful age, being first dulas follows:	y sworn, upon Applicant's
	en, or I am a qualified alien ion Act, and I am lawfully pres	
	[Signature of Appl	licant]
Subscribed and sworn to or affirmed	before me this day of _	, 20,
by		
[Print Notary's Name]	<del>.</del>	
	Notary Public	
My Commission Expires:		
Notary Commission No.:		
(SEAL)		



# Poultry Feeding Operation Nutrient Management Plan (NMP) Transfer Application

(For facilities **not in** the Eucha-Spavinaw watershed)

Submit this form and a color copy of the currer	nt NMP with y	our transfer appl	ication to <u>AEMS.Poultry@ag.ok.g</u>	gov.		
Farm/Facility Name:	PFO ID#:					
Farm Address:						
Owner/Operator:						
<ol> <li>Please check the type of bird(s) listed in t</li> </ol>	he current wr	itten NMP and t	hose you plan to grow:			
NMP Listed Bird(s) Grown		Planned Growing				
☐ Broiler ☐ Layer [	☐ Pullet ☐ Broiler		☐ Layer ☐ Pullet			
☐ Other:		☐ Other:				
2. Please list the number of houses, average	e number of b	oirds per house a	and the overall total birds as list	ed in the		
current written NMP and the planned nun		•				
	NMP Total		Planned Total			
Number of Houses	#		#			
Average #of Birds per House	#		#			
TOTAL #Birds	#		#			
. Have there been or will there be any new poultry houses or other						
operational related structures constructed	-		□ Yes	□ No		
4. Have there been or will there be changes	made to the h	andling and stor	age of			
generated waste as noted in the written N	MP (i.e. addi	tion of litter shed	d)? □ Yes	$\square$ No		
5. Have there been or will there be any chan	iges made to t	the handling and				
storage of normal or catastrophic mortalit	ties disposal a	s noted in the wi	ritten NMP?   Yes	$\square$ No		
6. Please check the type of litter operations	as noted in th	e written NMP a	nd your planned operations:			
NMP Listed Litter Process(es)		Planned Litter Process(es)				
☐ Land Application to PFO Associated	d Lands	☐ Land Application to PFO Associated Lands				
☐ Transferred/Exported		☐ Transferred/Exported				
I certify by signature below, operations w provided and as outlined above.	ill remain w	ithin the operat	tional parameters of the writt	en NMP		
Printed Name:			Title:			
Signature:	ato• Pagos 5-6	Date Signed.  Sare to be completed by the current/old registration holder.				

OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, AND FORESTRY (ODAFF)

Please note: If changes are planned with new ownership, a new NMP or letter of intent must be submitted.

#### **AGRICULTURAL ENVIRONMENTAL MANAGEMENT SERVICES**

P. O. Box 528804 Oklahoma City, Oklahoma 73152 Phone: (405) 522-5998 Email: <u>AEMS.Poultry@ag.ok.gov</u>

### POULTRY FEEDING OPERATION (PFO) CLOSE OUT LITTER REPORT COVER SHEET

Owner Name:	ODAFF PFO Id:
Facility Name:	
E-mail:	
Address:	
City:	State: Zip:
County:	
Name of the Nutrient Limited Watershed where	PFO is located:
<ol> <li>This report covers the dates from: July 1,</li> <li>Please check if applicable: No litter period</li> </ol>	through ( / / ) sold, transferred or land applied for this reporting
he final date of ownership. If you did not sell, t	r can be approved and include information from July 1, throug ransfer, or land apply poultry waste during the listed period yonsferred or land applied" and return this page to the departmen
supervision by qualified personnel. Based upogathering the data, the information submitted complete. I am aware that there are signific	ent and all attachments were prepared under my direction on my inquiry of the person or persons directly responsible for is to the best of my knowledge and belief, true, accurate, and ant penalties for knowingly submitting false, inaccurate, of ity of a fine of not more than ten thousand dollars for each
Signaturo	Dato

## Oklahoma Registered Poultry Feeding Operations Close Out Litter Report Form

AEMS141A	Owner/Facility Name:	Only report information for July 1,through (//)
	ODAFF PFO Id:	PFO Annual Litter Sold, Transferred or Land Applied On Site

		Amount	Litter	Inforr	nation for litter a associated wit		If litter removed off site (Sold or Transferred)					
Line Id <sup>1</sup>	Date <sup>2</sup> of Removal or Applied Applied Site <sup>3</sup> (Tons) Sold, analysis Date <sup>4</sup> Date <sup>4</sup> Include a copy of analysis with report	Total acres available for land application <sup>5</sup>	Applicator Name and License No. <sup>6</sup>	Mailing Address & Telephone No. <sup>7</sup> (" <b>same</b> " if PFO and applicator are the same)	Person or entity receiving litter <sup>8</sup> (If moved out of Oklahoma, only provide the State	Person or entity receiving - Mailing Address & Telephone No. <sup>9</sup>	Applicator Name & License No. <sup>10</sup>	Applicator Mailing Address & Telephone No. <sup>11</sup>	Litter Haulei Name <sup>12</sup>	Litter Hauler - Mailing Address & Telephone No. <sup>13</sup>		

Instructions: Each line is a single entry. Do not put "litter applied on PFO" and "litter removed off site" on the same line, these are treated as separate events and need to be reported as separate events. <u>Use additional pages as necessary.</u> 1 – Line entry number 1, 2, 3. 2 - Date of the event. 3 – Enter the amount of litter land applied, sold or transferred. 4 – Provide the Litter analysis date for this entry and include a copy of the litter analysis with this report. (5-7 are for entries where litter is applied on land associated with PFO) 5 – How many acres are available for litter application. 6 – Enter applicator name and the PWA license number. 7 – Provide applicator mailing address and telephone number. (8-13 are for entries where litter is sold or transferred to another entity) 8 – Who is the entity receiving the litter. 9 – Provide recipient mailing address and telephone number 10 – If known, who the applicator is and their PWA license number. 11 – If known, applicator mailing address and telephone number 12 – Who was the person hauling the litter from your farm to the person receiving the litter hauler telephone number and mailing address.

# OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, AND FORESTRY (ODAFF) AGRICULTURAL ENVIRONMENTAL MANAGEMENT SERVICES

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### **CORPORATION DATA SHEET**

Date of Organization:	State of Organization:	
•		
Principal Place of Business:		
•		
Mailing Address:		
Ç		
Registered Agent:		
Registered Address:		
-		
Officers:		
Tax Matters Member:		
Tax Identification Number:		
Annual Meeting Date:		
_		
Name	Ownership	Membership Percentage