

# Appendix



# D

## Example Nutrient Management Plan Recordkeeping Forms

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**CAFO Weekly Storage, Containment and Treatment Structure Inspections  
Log Sheet**

Facility Name: \_\_\_\_\_ NPDES Permit No.: \_\_\_\_\_

Storage, Containment or Treatment Structure: \_\_\_\_\_

Instructions: Use this form to keep track of weekly visual inspections of the structures that you use to store, contain or treat manure, litter, and process wastewater. Use a separate form for each structure.

Keep track of your inspections each week in the table below. Provide the following information:

- the date of the inspection
- the initials of the inspector
- for open liquid waste storage structures, record the level indicated on the depth marker
- for open liquid waste storage structures, indicate whether the wastewater level was below the level required to maintain capacity to store the runoff and precipitation from a 25-year, 24-hour storm.
- use the "Notes" column to describe problems, if you find any, and how they might be fixed
- fill in the "date corrected" column with the date when you correct the problem

	<b>Date</b>	<b>Initials</b>	<b>Depth Marker Reading</b>	<b>Wastewater Below Pumping Level?</b>	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 1						
Week 2						
Week 3						
Week 4						
Week 5						

	<b>Date</b>	<b>Initials</b>	<b>Depth Marker Reading</b>	<b>Wastewater Below Pumping Level?</b>	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 6						
Week 7						
Week 8						
Week 9						
Week 10						
Week 11						
Week 12						
Week 13						
Week 14						
Week 15						
Week 16						

	<b>Date</b>	<b>Initials</b>	<b>Depth Marker Reading</b>	<b>Wastewater Below Pumping Level?</b>	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 17						
Week 18						
Week 19						
Week 20						
Week 21						
Week 22						
Week 23						
Week 24						
Week 25						
Week 26						
Week 27						

	<b>Date</b>	<b>Initials</b>	<b>Depth Marker Reading</b>	<b>Wastewater Below Pumping Level?</b>	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 28						
Week 29						
Week 30						
Week 31						
Week 32						
Week 33						
Week 34						
Week 35						
Week 36						
Week 37						
Week 38						

	<b>Date</b>	<b>Initials</b>	<b>Depth Marker Reading</b>	<b>Wastewater Below Pumping Level?</b>	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 39						
Week 40						
Week 41						
Week 42						
Week 43						
Week 44						
Week 45						
Week 46						
Week 47						
Week 48						
Week 49						

	<b>Date</b>	<b>Initials</b>	<b>Depth Marker Reading</b>	<b>Wastewater Below Pumping Level?</b>	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 50						
Week 51						
Week 52						



**CAFO Weekly Storm Water Diversion and Channel Inspections  
Log Sheet**

Facility Name: \_\_\_\_\_ NPDES Permit No.: \_\_\_\_\_

Instructions: Use this form to keep track of weekly visual inspections of your storm water management structure(s) (including storm water and runoff diversion devices, and devices used to channel contaminated storm water to a wastewater storage or containment structure). List the items that need to be inspected below.

_____	_____
_____	_____
_____	_____
_____	_____

Keep track of your inspections in the following table by filling out one row each week when you inspect your storm water management structures. Provide the following information:

- the date of the inspection
- the initials of the inspector
- check the "OK" box if no problems were found
- use the "Notes" column to describe problems, if you find any, and how they might be fixed
- fill in the "date corrected" column with the date when you correct the problem

	<b>Date</b>	<b>Initials</b>	<b>OK</b> (✓ if no problems found)	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 1					
Week 2					
Week 3					
Week 4					
Week 5					

	<b>Date</b>	<b>Initials</b>	<b>OK</b> (✓ if no problems found)	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 6					
Week 7					
Week 8					
Week 9					
Week 10					
Week 11					
Week 12					
Week 13					
Week 14					
Week 15					
Week 16					

	<b>Date</b>	<b>Initials</b>	<b>OK</b> (✓ if no problems found)	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 17					
Week 18					
Week 19					
Week 20					
Week 21					
Week 22					
Week 23					
Week 24					
Week 25					
Week 26					
Week 27					

	<b>Date</b>	<b>Initials</b>	<b>OK</b> (✓ if no problems found)	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 28					
Week 29					
Week 30					
Week 31					
Week 32					
Week 33					
Week 34					
Week 35					
Week 36					
Week 37					
Week 38					

	<b>Date</b>	<b>Initials</b>	<b>OK</b> (✓ if no problems found)	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 39					
Week 40					
Week 41					
Week 42					
Week 43					
Week 44					
Week 45					
Week 46					
Week 47					
Week 48					
Week 49					

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	<b>Date</b>	<b>Initials</b>	<b>OK</b> (✓ if no problems found)	<b>Notes</b> (Note any problems found and possible solutions.)	<b>Date Corrected</b>
Week 50					
Week 51					
Week 52					

### CAFO Nutrient Land Application Log Sheet

**Facility Name:** \_\_\_\_\_ **NPDES Permit No.:** \_\_\_\_\_

**Field ID** (use the same field identification as used in the NMP): \_\_\_\_\_ **Acres:** \_\_\_\_\_

*Instructions:* Use this form to keep records of your land application activities. Maintain a separate sheet for each field. For each land application event, provide the following information in the table below:

- Date: the date that you applied manure, litter, or process wastewater to the field
- Source: the source (e.g., storage structure) of the manure, litter, or process wastewater applied
- Method: the method you used to apply the manure, litter, or process wastewater
- Weather Conditions: the weather conditions 24 hours before, during, and 24 hours after the land application event
- Amount Applied: The total tons of manure or litter or gallons of process wastewater applied
- Total N: the total amount of nitrogen you applied to the field
- Total P: the total amount of phosphorus you applied to the field

The following records also must be maintained on-site along with a current copy of your site-specific NMP:

- Expected crop yield
- Test methods used to sample and analyze manure, litter, soil, and process wastewater
- Results from manure, litter, process wastewater and soil sampling
- Explanation of basis for determining application rates
- Calculations for the total N and P planned to be applied and the total N and P actually applied
- Dates of land application equipment inspections.

Date	Source	Method	Weather Conditions			Amount Applied (specify gallons or tons)	Total N	Total P
			24 hours before	during	24 hours after			





**Daily Water Line Inspection  
Log Sheet**

Facility Name: \_\_\_\_\_

NPDES Permit No.: \_\_\_\_\_

Instructions: Use this form to keep track of your daily water line visual inspections (including drinking and cooling water lines). Initial the form *each day* the after the inspection is done. Mark the "✓ if leak" column if you find a leak.

Year	January		February		March		April		May		June		July		August		September		October		November		December	
	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak	Initials	✓ if leak
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**MANURE, LITTER, AND PROCESS WASTEWATER TRANSFER RECORD FORM**

Facility Name: \_\_\_\_\_ NPDES Permit No. \_\_\_\_\_

Instructions: Use this form to keep track of all manure, litter, and process wastewater generated at your CAFO facility that you transfer to other persons (i.e. for use or disposal on land not owned by or under the control of your CAFO). Use additional sheets as necessary.

Date of Transfer	Name of Recipient	Address of Recipient	Nutrient Analysis Provided to Recipient	Amount Transferred		
				Manure (tons)	Litter (tons)	Wastewater (gallons)