|  |  |
| --- | --- |
| The TCEQ Blue and Green Logo  | Notice of Change (NOC) for Concentrated Animal Feeding Operations under General Permit (TXG920000) |

**IMPORTANT:**

Use the [INSTRUCTIONS](#INSTRUCTIONS) to fill out each question in this form.

Once processed, your authorization can be viewed at: <http://www.tceq.texas.gov/goto/wq-dpa>

**ePERMITS: Sign up now for online NOC:** <https://www3.tceq.texas.gov/steers/>

This form will be returned for any of the following reasons:

1. The permit number is not provided, is invalid, or is no longer active,
2. Wet ink signature of person meeting signatory requirements is not provided,
3. The current permittee is not the applicant, and
4. A requested change in operator name is not a legal name change.

**This form cannot be used for a change in owner or operator. To inform TCEQ of a change in owner or operator, use Notice of Intent Form (**[**TCEQ-20111) and Core Data Form (TCEQ 10400).**](http://www.tceq.texas.gov/assets/public/permitting/waterquality/forms/20111.pdf)

What is the permit number? TXG92Click here to enter text.

Describe the proposed changes:Click here to enter text.

# **SECTION 1. OWNER (PERMITTEE)**

If there is more than one owner, provide the additional information in an attachment.

1. What is the full Legal Name of the current owner as it appears on the authorization? Click here to enter text.
2. What is the Customer Number (CN) assigned to this owner? CN Click here to enter text. You may search for your CN at: <http://www.tceq.texas.gov/goto/cr-customer>

# **SECTION 2. OPERATOR (PERMITTEE)**

If there are more than two permittees, provide the additional information in an attachment.

1. What is the full Legal Name of the current operator as it appears on the authorization? Click here to enter text.
2. What is the Customer Number (CN) assigned to this operator? You may search for your CN at: <http://www.tceq.texas.gov/goto/cr-customer>

CN Click here to enter text.

# **SECTION 3. PERMITTED SITE (RN) (REQUIRED)**

What is the Regulated Entity Reference Number (RN) assigned to this site?

RN Click here to enter text.

# **SECTION 4. APPLICATION CONTACT**

If TCEQ needs additional information regarding this application, who should be contacted?

Prefix (Mr. Ms. or Miss): Click here to enter text.

First and Last Name: Click here to enter text. Suffix: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Organization Name: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

Email: Click here to enter text.

Mailing Address: Click here to enter text.

City, State, and Zip Code: Click here to enter text.

# **SECTION 5. REQUESTED CHANGE TO PERMITTED INFORMATION**

What information has changed or needs to be corrected? Check one or more of the sections being updated and enter the new information in the corresponding attachments.

[ ]    Owner or Operator’s legal name changed with Secretary of State (SOS). **Stop!** Submit the Core Date Form (TCEQ 10400).

[ ]   Address and contact information for the owner or operator. **Stop!** Submit the Core Data Form (TCEQ 10400).

[ ]   Site information (Regulated Entity) corrections. **Stop!** Submit the Core Data Form (TCEQ 10400).

[ ]   Address and contact information for the billing.

## Billing Address and Contact Information

Prefix (Mr. Ms. Miss): Click here to enter text.

First/Last Name: Click here to enter text. Suffix: Click here to enter text.

Title: Click here to enter text. Credential: Click here to enter text. Organization Name: Click here to enter text.

Phone Number: Click here to enter text. Ext: Click here to enter text. Fax Number: Click here to enter text.

E-mail Address: Click here to enter text. Mailing Address: Click here to enter text. Internal Routing (Mail Code, Etc.): Click here to enter text.

City: Click here to enter text. State: Click here to enter text. ZIP Code: Click here to enter text.

[ ]    General Characteristics Relating to the Regulated Activity.

## TPDES Large CAFO

[ ]   Substantial Change: Select one or more of the following characteristics that are proposed to be changed:

Complete the CAFO Plain Language Summary Template (English) for CAFO Permit Applications and submit with this application.

If a bilingual education program is required by the Texas Education Code at the nearest elementary or middle school to the facility or proposed facility, also complete the [CAFO Plain Language Summary Template](https://www.tceq.texas.gov/permitting/wastewater/review/maintenance_forms.html) (Spanish) or provide a translated copy of the completed English plain language summary in the appropriate alternative language if different from Spanish.

[ ]   Changing animal type, increasing head count/manure production. Submit the estimated manure production calculations that show the comparison between the initial and proposed manure production to be 50% or less. Complete and attach Attachment B, Attachment C, updated NMP and other supporting documents.

[ ]   Adding land management units (LMUs) or increasing application acreage of LMUs. Complete and attach Tables 1 and 2 to Attachment C 2). Attach the applicable portions of the updated NMP and applicable Maps.

[ ]   Addition of a new crop or yield goal. Complete and attach Table 3 to Attachment C 2). Attach the applicable portions of the updated NMP.

[ ]   Non-substantial Change: Select one or more of the following characteristics that are proposed to be changed:

[ ]   Decreasing headcount/manure production. Submit the estimated manure production calculations that show the reduction or no change in the manure production. Complete and attach Attachment B, Attachment C, Updated NMP and other supporting documents.

[ ]   Removing LMUs, decreasing the acreage of LMUs, or renaming LMUs. Complete and attach Tables 1 and 2 to Attachment C 2). Attach the applicable portions of the updated NMP and applicable Maps.

[ ]   Removing crop(s)/yield goal(s). Submit the current and proposed crops/yield goals.

[ ]   Changes to the PI Index of an LMU. Submit the NMP

[ ]   Retention Control Structure(s)/Wastewater production. Submit the retention control structure(s) design calculations and the water balance model. Complete and attach Table 1 and Table 2 to Attachment C 1) and see Maps section below. For wastewater production, complete section 2 of Attachment B and provide other supporting document(s).

[ ]   Air authorization. Complete and attach Attachment D and see Maps section below.

[ ]   Other changes that are not listed above. Attach supporting documents.

## State only CAFO

Select one or more of the following characteristics that are proposed to be changed.

[ ]   Changing animal type, increasing or decreasing head count/manure production. Submit the estimated manure production calculations for the proposed headcount. Complete and attach Attachment B and see the Maps section below.)

[ ]   Adding land management units (LMUs), increasing the application acreage of existing LMUs, removing or decreasing the acreage of LMUs. Complete the land application summary table in Attachment C.2) b) and see Maps section below.

[ ]   Retention Control Structure(s)/Wastewater production. Submit the retention control structure(s) design calculations and the water balance model. Complete and attach Table 1 to Attachment C 1) and see Maps section.

[ ]   Other changes that are not listed above. Attach supporting documents.

## Facility Operational Status

Has the facility become operational?

[ ]   Yes What date did it become operational? Click here to enter text.

[ ]   No

**Maps**

If there are any proposed changes to the property boundaries, production area, RCSs and/or LMUs; updated USGS Topographic, Site, and LMU maps are required. If an Air Standard Permit is proposed, an Area Land Use Map must be provided as well.

* + 1. Provide a **USGS Topographic Map** with scale showing the specific location of the production area and property boundaries. A high quality copy of a topographic map may be used in lieu of an original map.
		2. Provide a **Site Map(s)** clearly delineating and labeling the location of all operations and characteristics.
		3. Provide a **Land Management Unit Map(s)** clearly delineating and labeling each LMU listed in this application.
		4. If an Air Standard Permit is proposed, provide an **Area Land Use Map** that shows the required minimum buffer distance for odor control.

**CERTIFICATION FOR WATER QUALITY AUTHORIZATION**

[ ]   Owner[ ]   Operator

A signature is required for each permittee. If more than two permittees, you must make additional copies of this section.

I,

*Typed or printed name Title*

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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under **30 Texas Administrative Code §305.44** to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signature: Date:

 *(Use blue ink)*

[ ]   Owner [ ]   Operator

(Required only if there is more than one permittee)

I,

*Typed or printed name Title*

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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code §305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signature: Date:

 *(Use blue ink)*

# Attachment A to a NOC Form for Providing Different Addresses & Contact Information Related to a Specific Permit under General Permit TXG920000

What is the permit number? TXG92 Click here to enter text.

**Address & Contact Information Change**

**Stop! Submit a Core Data Form (TCEQ 10400)**

**Billing Address for Receiving Annual Fee Statement**

Prefix (Mr. Ms. or Miss): Click here to enter text.

First and Last Name: Click here to enter text. Suffix: Click here to enter text. Title: Click here to enter text. Credentials: Click here to enter text. Organization Name: Click here to enter text. Phone Number: Click here to enter text. Fax Number: Click here to enter text. Email: Click here to enter text.

Mailing Address: Click here to enter text.

City, State, and Zip Code: Click here to enter text.

**Additional Permittee**

**Stop! Submit a Core Data Form (TCEQ 10400).**

**Regulated Entity (RE) Site Location Information Correction**

Is this a change to the location of the permitting activity?

[ ]   Yes – This requested change will not be processed since the authorizations are site specific.

[ ]   No – Complete a Core Data Form (TCEQ 10400).

# Attachment B to a NOC Form for Proposing Different Animal Type, Head Count, Waste Production, and/or Waste Use to a Specific Permit under General Permit TXG920000

What is the permit number? TXG92 Click here to enter text.

**Animal Type and Head Count**

Is there a change in animal type and/or head count?

[ ]    Yes – Check the box by the animal type and provide the currently authorized & proposed head count in the table below.

[ ]    No – Go to section 2).

| **Proposed SIC Code and Animal Type** | **Proposed Head Count** | **Currently Authorized Head Count** |
| --- | --- | --- |
| [ ]  0241 – Total Dairy Cattle |  |  |
| How many of the total dairy cattle are milking cattle? |  |  |
| [ ]  0211 – Beef Cattle Feedlot |  |  |
| [ ]  0212 – Veal Calves |  |  |
| [ ]  0213 – Total Swine |  |  |
| How many of the total swine are less than 55 lbs? |  |  |
| How many of the total swine are 55 lbs or over? |  |  |
| [ ]  0253 – Turkeys |  |  |
| [ ]  0272 – Horses |  |  |
| [ ]  0214 – Sheep or Lambs |  |  |
| [ ]  0252 – Laying Hens[ ]   Dry Litter[ ]   Liquid Manure |  |  |
| 0251 – Chickens/Broilers[ ]   Dry Litter[ ]   Liquid Manure |  |  |
| 0259 – Ducks[ ]   Dry Litter[ ]   Liquid Manure |  |  |
| Other Animal TypeIdentify the animal type: Click here to enter text.Provide the SIC Code: Click here to enter text. |  |  |

**Waste Production and Use**

1. Is there a change in the production or use of manure, sludge, or wastewater?

[ ]    Yes – Complete this section

[ ]    No – Proceed to the next section

1. What is the duration of manure storage?

[ ]   Temporary Storage

[ ]   Storage for more than 30 days

1. What is the estimated amount of wastewater generated annually by the facility, acre-feet? Click here to enter text.
2. What is the estimated amount of manure generated annually by the facility, tons? Click here to enter text.
3. Is manure, sludge, or wastewater transferred to another person?

[ ]   Yes, Answer questions 1. and 2. below.

1. What is the estimated amount of wastewater transferred to other persons, acre-feet? Click here to enter text.

2. What is the estimated amount of manure transferred to other persons, tons? Click here to enter text.

[ ]   No

1. Are you using alternative methods for manure, sludge, or wastewater disposal?

[ ]   Yes, Select the alternative methods.

[ ]   Compost Facility [ ]   Evaporation

[ ]   Contract Hauler [ ]   Energy Generation

[ ]   Pelletizing [ ]   Other, specify: Click here to enter text.

[ ]   No

# Attachment C to a NOC Form for Proposing Different Retention Control Structure and/or Land Management Unit Information Related to a Specific Permit under General Permit TXG92000

What is the permit number? TXG92Click here to enter text.

**Retention Control Structures (RCSs)**

* 1. Are there any changes to existing RCSs and/or are you proposing to add new RCSs or changes to the animal type/head count?

[ ]   Yes, Complete RCS table.

[ ]   No, Go to section 2).

Complete Table 1 for each RCS.

**Any currently authorized RCSs that you wish to remain authorized must be entered in the RCS table. Only the RCSs entered in the RCS table will be authorized through this Notice of Change**. Make additional copies of Table 1 as needed.

**\*Please note:** You must comply with the closure requirements in Part III.D of the general permit prior to terminating authorization of an RCS.

**Table 1: Retention Control Structure(s) Information**

| **RCS Name** | **Structure Type** | **Days of Storage** | **Required Capacity (Acre-Feet)** | **Drainage Area (Acres)** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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* 1. Identify the RCSs that act in series or indicate that none act in series. Click here to enter text.
	2. Provide the designed volumes for each RCS according to the design calculations and constructed capacities certified by the licensed Texas Professional Engineer. Make additional copies of Table 2 as needed.

**Table 2: Volume Allocations for Retention Control Structures Volume Allocations for RCS(s) (Acre-Feet)**

| **RCS Name** | **Design Rainfall Event Runoff** | **Process Generated Wastewater** | **Minimum Treatment Volume** | **Sludge Accumulation** | **Water Balance** | **Required Capacity** | **Constructed or Proposed Capacity** |
| --- | --- | --- | --- | --- | --- | --- | --- |
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**Land Management Units (LMUs)**

1. **TPDES Large CAFO**
2. Are there changes to existing Land Management Units (LMUs) and/or are you proposing to add new LMUs or changes to the animal type/head count?

[ ]   Yes, Complete LMU tables below.

[ ]   No, Leave this section blank.

Complete the table for each LMU.

Any currently authorized LMUs that you wish to remain authorized must be entered in the LMU table. Only the LMUs entered in the LMU table will be authorized through this Notice of Change. Make additional copies of Table 1 as needed.

**Table 1: Land Application Summary from NMP**

| **LMU Name** | **Acre** | **Crop(s) and Yield Goal(s)** | **Nitrogen Maximum Application Rate (lbs/acre)** | **Phosphorus (as P2O5) Maximum Application Rate (lbs/acre)** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
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**Table 2: Data Elements for Phosphorus Index Rating**

Make additional copies of Table 2 as needed. You may attach the PI Index by Field Table from the NMP to the application.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **LMU Name** |  |  |  |  |  |  |
| Slope, % |  |  |  |  |  |  |
| Dominant Hydrologic Soil Group |  |  |  |  |  |  |
| Runoff Curve Number |  |  |  |  |  |  |
| Soil Test P Level, index points |  |  |  |  |  |  |
| Inorganic P2O5 Application Rate, index points |  |  |  |  |  |  |
| Organic P2O5 Application Rate, index points |  |  |  |  |  |  |
| Inorganic Method & Timing, index points |  |  |  |  |  |  |
| Organic Method & Timing, index points |  |  |  |  |  |  |
| Proximity of Application to Named Stream, index points |  |  |  |  |  |  |
| Runoff Class, index points |  |  |  |  |  |  |
| Soil Erosion, index points |  |  |  |  |  |  |
| Total Index Points |  |  |  |  |  |  |
| P Runoff Potential |  |  |  |  |  |  |
| N-Leaching Index Test Required (yes or no) |  |  |  |  |  |  |
| Soil Test Date |  |  |  |  |  |  |

1. **NMP Certification**
2. What is the date of the last review or revision of the NMP? Click here to enter text.
3. I certify that the NMP has been developed and certified by a Certified Nutrient Management Specialist.

[ ]    Yes

[ ]    No, The NMP must be certified by a nutrient management specialist.

1. Alternative crop(s)/yield goal(s).

Are there changes to existing crops/yield goals, or are you proposing new crops and/or yield goal(s)?

[ ]    Yes, complete Table 3 below. Make additional copies of Table 3 as needed or you may attach a list of crops/yield goals to this application.

[ ]    Check this box if the list is Applicable to all the LMUs. Provide the information for the first LMU only.

[ ]    No, Leave this section blank.

**Table 3:** **Alternative Crop(s) and Yield Goal(s)**

| **LMU Name** | **Crop(s)** | **Yield Goal(s)** |
| --- | --- | --- |
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1. **State only CAFOs**

Are there changes to existing Land Management Units (LMUs) and/or are you proposing to add new LMUs?

[ ]    Yes, Complete land application summary table below. Make additional copies of the table as needed or you may attach a list to this application.

[ ]    No, Leave this section blank.

Complete the table for each LMU.

Any currently authorized LMUs that you wish to remain authorized must be entered in the LMU table. Only the LMUs entered in the LMU table will be authorized through this Notice of Change.

**Table 1: Land Application Summary**

| **LMU Name** | **Acre** | **Estimated Application Rate (Acre-Inches/Acre/Year) Or (Tons/Acre/Year)** |
| --- | --- | --- |
|  |  |  |
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# Attachment D to a NOC Form for Proposing A Different Air Authorization Related to a Specific Permit under General Permit TXG920000

What is the permit number? TXG92Click here to enter text.

**Proposed Air Authorization**

1. Select the proposed air authorization type

[ ]   Permit-by-Rule in 30 TAC 106 Subchapter F

[ ]   Individual Air Quality Permit under 30 TAC Chapter 116

[ ]   Air Standard Permit for Animal Feeding Operations in 30 TAC Section 321.43

If Air Standard Permit is selected, answer questions 1. and 2. below.

1. When did the facility start operations or plan to start operations?

[ ]   Operation started after 8/19/1998

Which option will the CAFO use to meet the requirement for the Air Standard Permit?

[ ]   1/2-mile buffer [ ]   1/4-mile buffer and odor control plan

[ ]   Operation started on or before 8/19/1998

Which option will the CAFO use to meet the requirement for the Air Standard Permit?

[ ]   1/4-mile buffer [ ]   odor control plan

2. Is a written letter of consent from an affected landowner being used in lieu of meeting the buffer distance specified?

[ ]   Yes, provide the first and last name of the affected landowner. Click here to enter text.

[ ]   No

[ ]   Buffer is not required.

Certification for Air Standard Permit for Animal Feeding Operation

(Required if requesting authorization under the Air Standard Permit)

[ ]   Owner [ ]   Operator

A signature is required for each permittee. If more than two permittees, you must make additional copies of this section.

I,

*Typed or printed name Title*

I am requesting coverage under the Air Standard Permit for Animal Feeding Operations located in 30 TAC Subchapter 321, Subchapter B. I have read the requirements for this air standard permit. I hereby certify that this facility will be constructed and operated in accordance with the requirements of this air standard permit. I will also maintain the documentation required to show compliance with the air standard permit on-site.

The signature below confirms that I have knowledge of the facts included in this application and that these facts are true and correct to the best of my knowledge and belief. I further state that to the best of my knowledge and belief, the project for which application is made will not in any way violate any provision of the Texas Water Code (TWC), chapter 7; Texas Clean Air Act (TCAA), as amended, or any of the air quality rules and regulations of the Texas Commission on Environmental Quality or any local governmental ordinance or resolution enacted pursuant to the TCAA. I further state that I have read and understand TWC statements or representations in this application, and TWC Section 7.187 pertaining to CRIMINAL PENALTIES.

Signature: Date:

 *(Use blue ink)*

[ ]   Owner [ ]   Operator

(Required only if there is more than one permittee)

I,

*Typed or printed name Title*

I am requesting coverage under the Air Standard Permit for Animal Feeding Operations located in 30 TAC Subchapter 321, Subchapter B. I have read the requirements for this air standard permit. I hereby certify that this facility will be constructed and operated in accordance with the requirements of this air standard permit. I will also maintain the documentation required to show compliance with the air standard permit on-site.

The signature below confirms that I have knowledge of the facts included in this application and that these facts are true and correct to the best of my knowledge and belief. I further state that to the best of my knowledge and belief, the project for which application is made will not in any way violate any provision of the Texas Water Code (TWC), chapter 7; Texas Clean Air Act (TCAA), as amended, or any of the air quality rules and regulations of the Texas Commission on Environmental Quality or any local governmental ordinance or resolution enacted pursuant to the TCAA. I further state that I have read and understand TWC statements or representations in this application, and TWC Section 7.187 pertaining to CRIMINAL PENALTIES.

Signature: Date:

 *(Use blue ink)*

# General Information and Instructions for Notice of Change (NOC) to an Authorization for Concentrated Animal Feeding Operation Under TXG920000

## General Information

**Where to Send the NOC:**

BY REGULAR U.S. MAIL

Texas Commission on Environmental Quality

Applications Review and Processing Team (MC148)

P.O. Box 13087

Austin, Texas 78711-3087

 BY OVERNIGHT/EXPRESS MAIL

 Texas Commission on Environmental Quality

 Applications Review and Processing Team (MC148)

12100 Park 35 Circle

Austin, TX 78753

**TCEQ Contact list:**

Application – status and form questions:512/239-4671, CAFO@tceq.texas.gov

Technical questions: 512/239-4671, CAFO@tceq.texas.gov

Environmental Law Division: 512/239-0600

Records Management - obtain copies of forms: 512/239-0900

Reports from databases (as available): 512/239-DATA (3282)

Cashier’s office: 512/239-0357 or 512/239-0187

## Notice of Change Process:

**A. Notice of Change Review**

The NOC and Core Data Form will be reviewed to ensure the request is from the permittee on the authorization, the permit is active and initial coverage was acknowledged. Each item on the forms will be reviewed for a complete response. Changes related to General Characteristics may be reviewed by technical staff and require additional information to be submitted. In addition, the permittee’s legal name change must be verified with Texas Secretary of State (if applicable). The address(s) on the Core Data Form must be verified with the US Postal Service (USPS) as an address receiving regular mail delivery. Do not provide an overnight/express mailing address.

If an item is incomplete or not verifiable, the permittee may be notified by letter, phone call or email. In some instances, such as the following, the request may simply be returned.

* The permit number is not provided, invalid, or no longer active,
* A wet ink signature of person meeting signatory requirements for permittee is not provided,
* The applicant is not the current permittee,
* A requested name change for a permittee is not recognized as a legal name change, or
* The change does not qualify for processing through the NOC process.

**B. NOC Confirmation**

An updated Acknowledgment Certificate will be mailed to the operator only if the NOC is to change information provided on the acknowledgment certificate. The original coverage effective date will not change.

**C.** General Permit (Your Permit) and Forms

You may view and print the CAFO general permit TXG920000 on the TCEQ website [www.tceq.texas.gov](http://www.tceq.texas.gov). Enter the general permit, TXG920000, as the key word in the search box to locate the specific web page.

**Paper forms**

The Notice of Intent (NOI) form TCEQ-20111, Notice of Termination (NOT) form TCEQ-20343, and Notice of Change (NOC) form TCEQ-20511 with instructions are available in an accessible word document format on the TCEQ web site [www.tceq.texas.gov](http://www.tceq.texas.gov).

# **INSTRUCTIONS FOR FILLING OUT THE NOC FORM**

## 1) and 2) PERMITTEE INFORMATION

**Legal Name**

Provide the current legal name of the permittee, as it appears on the permit.

**Customer Number (CN)**

TCEQ will assign each customer a number that begins with CN, followed by nine digits. You may search for your CN at: <http://www.tceq.texas.gov/goto/cr-customer>.

**Note:** If a change is being made to the CN and the CN has other TCEQ authorization types, it is the entity’s responsibility to update those authorizations at the same time. If an authorization has been cancelled or terminated, the name cannot be changed on the permit. Because of this, a new CN may be issued for the new name.

## 3) PERMITTED SITE (RN**)**

Provide the TCEQ Issued Regulated Entity (RN) number assigned for this permitted activity. Go to <http://www.tceq.texas.gov/goto/cr-searchrn> to locate your RN.

If the site has changed or the information provided indicates a new location, this form will be returned. It is the responsibility of the permittee(s) to comply with the general permit.

## 4) APPLICATION CONTACT

Provide the name, title and contact information of the person that TCEQ can contact for additional information regarding this application.

## 5) REQUESTED CHANGE TO PERMITTED INFORMATION

Check one or more of the available options indicating the information that is to be updated or proposed to be changed. Provide the changes to the owner/operator information using a Core Data Form (TCEQ 10400).

Address and Contact Information

If the address and/or contact information is changing, please submit a Core Data Form (TCEQ 10400).

For billing address changes use ATTACHMENT A to the NOC. The permit number MUST be written on the ATTACHMENT to indicate it is a part of the NOC form for the permit being updated. The updates cannot be made without reference to the submitted NOC form.

General Characteristics Change

If the facility has become operational and you wish to notify the TCEQ, complete section 5 c) of the NOC.

If you are a TPDES Large CAFO, and you are proposing a substantial change to the terms of the NMP, you must complete the Template and Instructions for the Plain Language Summary for a Concentrated Animal Feeding Operation (CAFO) Permit Application and submit with this notice of change.

This template is a guide for developing a plain language summary for a CAFO permit application as required by the TCEQ Public Participation Plan and Language Access Plan. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed site or facility; (2) the expected output of the proposed site or facility; (3) the expected pollutants that may be emitted or discharged by the proposed site or facility; and (4) how the applicant will control those pollutants, so that the proposed or existing CAFO facility will not have an adverse impact on human health or the environment.

If a bilingual education program is required by the Texas Education Code at the nearest elementary or middle school to the facility or proposed facility also complete the Plain Language Summary Template (Spanish) or provide a translated copy of the completed English plain language summary in the appropriate alternative language if different from Spanish.

Download a copy of the template from the TCEQ website at <https://www.tceq.texas.gov/permitting/wastewater/review/maintenance_forms.html>.

Attachments to the notice of change.

If you are a TPDES Large CAFO or a State Only CAFO and you are proposing a change to the animal type and or head count, use Attachment B to propose different animal type, head count, waste production, and/or waste use.

If you are proposing RCS(s) or LMU changes use Attachment C; and

To propose a different air authorization use Attachment D.

For ‘Other changes that are not listed’, include an attachment that describes the changes and provide supporting documentation.

### Operational status

Provide the date that the facility became operational.

**Maps**

If there are any proposed changes to the property boundaries, production area, RCSs and/or LMUs; updated USGS Topographic, Site, and LMU maps are required. If an Air Standard Permit is proposed, an Area Land Use Map must be provided as well.

Provide a **USGS Topographic Map** with scale showing the specific location of the production area and property boundaries. A high quality copy of a topographic map may be used in lieu of an original map.

Provide a **Site Map(s)** clearly delineating and labeling the location of all operations and characteristics. The map shall show the production area and include, at a minimum, pens and open lots, barns, berms, permanent manure storage areas, composting areas, control facilities including RCSs, water wells (abandoned and in use), surface water in the state, and dead animal burial site. Each RCS listed above must be included and clearly crossed-referenced on the map.

Provide a **Land Management Unit Map(s)** clearly delineating and labeling each LMU listed in this application. The map shall include, at a minimum, the following information: a) the boundary and acreage of each LMU, b) all buffer zones required by this permit, c) the location of the production area, d) water wells, abandoned and in use, which are on-site or within 500 feet of the facility boundary, e) all surface water in the state located on-site and within one mile of the property boundary, and f) the facility boundary.

If an Air Standard Permit is proposed, provide an **Area Land Use Map** that shows the required minimum buffer distance for odor control. The map must identify property lines, permanent odor sources, and distances and direction to any occupied residence of business structure, school (including associated recreation areas), structures containing a place of worship, or public park within a one-mile radius of the permanent odor sources at the CAFO. The map shall include a north arrow; scale of map; buffer distance from permanent odor source in radii of ¼, ½, and 1 mile; that date the map was generated; and the date the distances were verified.

## 6) CERTIFICATION

The certification must bear an original signature of a person meeting the signatory requirements specified under 30 Texas Administrative Code (TAC) §305.44.

IF YOU ARE A CORPORATION:

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a) (see below). According to this code provision, any corporate representative may sign an NOI or similar form so long as the authority to sign such a document has been delegated to that person in accordance with corporate procedures. By signing the NOI or similar form, you are certifying that such authority has been delegated to you. The TCEQ may request documentation evidencing such authority.

**IF YOU ARE A MUNICIPALITY OR OTHER GOVERNMENT ENTITY:**

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a)(see below). According to this code provision, only a ranking elected official or principal executive officer may sign an NOI or similar form. Persons such as the City Mayor or County Commissioner will be considered ranking elected officials. In order to identify the principal executive officer of your government entity, it may be beneficial to consult your city charter, county or city ordinances, or the Texas statute(s) under which your government entity was formed. An NOI or similar document that is signed by a government official who is not a ranking elected official or principal executive officer does not conform to §305.44(a)(3). The signatory requirement may not be delegated to a government representative other than those identified in the regulation. By signing the NOI or similar form, you are certifying that you are either a ranking elected official or principal executive officer as required by the administrative code. Documentation demonstrating your position as a ranking elected official or principal executive officer may be requested by the TCEQ.

If you have any questions or need additional information concerning the signatory requirements discussed above, please contact the Texas Commission on Environmental Quality’s Environmental Law Division at 512/239-0600.

**30 Texas Administrative Code**

**§305.44. Signatories to Applications**

(a) All applications shall be signed as follows.

(1). For a corporation, the application shall be signed by a responsible corporate officer. For purposes of this paragraph, a responsible corporate officer means 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 the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding $25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures. Corporate procedures governing authority to sign permit or post-closure order applications may provide for assignment or delegation to applicable corporate positions rather than to specific individuals.

(2). For a partnership or sole proprietorship, the application shall be signed by a general partner or the proprietor, respectively.

(3). For a municipality, state, federal, or other public agency, the application shall be signed by either a principal executive officer or a ranking elected official. For purposes of this paragraph, a principal executive officer of a federal agency includes the chief executive officer of the agency, or a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., regional administrator of the EPA).

# ATTACHMENT A INSTRUCTIONS

The permit number MUST be written on ATTACHMENT A to indicate it is a part of the NOC form for the permit being updated. The updates cannot be made without reference to the submitted NOC form.

**Address & Contact Information Change**

Indicate the type of address and contact information that has changed from the original NOI or last NOC submitted to the TCEQ by using the Core Data Form (TCEQ 10400). For billing address changes use Attachment A to update the information. There can only be one billing address for receiving the annual fee statement and there can only be one site mailing address. If there are more than two permittees to be updated, attach additional pages with the information to be updated.

**Mailing Address**

The address **MUST BE** verifiable with the US Postal Service at <http://www.usps.com> for regular mail delivery (not overnight express mail). If you find that the address is not verifiable using the USPS web search, please indicate the address is used by the USPS for regular mail delivery. Failure to provide a valid mailing address will delay or prohibit us from updating the permit.

**Regulated Entity (RE) Information Change**

The NOC form is only for use to update or correct information submitted on the original application or last NOC for the authorization. The authorization under a general permit is site specific. If this change is related to a new location, a Notice of Change is not attainable.

Provide the updated site name, and updated site addresses, as applicable to your NOC request by submitting a Core Data Form (TCEQ 10400).

# **ATTACHMENT B INSTRUCTIONS**

The permit number MUST be written on ATTACHMENT B to indicate it is a part of the NOC form for the permit being updated. The updates cannot be made without reference to the submitted NOC form.

**General Characteristic**

If there is a proposed change to animal type and/or head count, select “Yes” and complete section 1, otherwise select “No” and go to section 2.

**Animal Type:**

* Check the box for the type of animals that will be confined at this facility. Provide the proposed maximum capacity under the general permit as the “**Proposed Head Count**”.
* Under the “**Currently Authorized**” column, enter the number of head that are currently authorized for each animal type. If you are currently authorized for an animal type that you propose to change to zero of that animal type, then also enter zero under the “proposed Head Count.”

Please be sure to complete the information for subcategories. For example, if your animal type is of the swine species, please mark one of the boxes indicating weight of swine at the facility. Check the box for 55 lbs or more if your facility contains swine that weigh greater than 55 pounds, and provide the number of swine that weigh 55 lbs or more. Check the box for under 55 lbs if your facility contains swine that weigh less than 55 pounds, and provide the number of swine that weigh less than 55 lbs. Check the box for both if your facility contains swine that weigh both greater and less than 55 pounds. Also, if your animal type is Dairy Cattle, provide the total number of dairy cattle and the number of milking cattle.

**Waste Production and Use**

1. If there is a change in manure, sludge, and/or wastewater production and use, select “Yes” and complete section 2, otherwise select “No.”
2. Identify the type of storage for the manure and/or wastewater by indicating if it is temporary storage (less than 30 days) and/or storage of more than 30 days.

**c – d)** Provide the total amount of manure (in tons) and wastewater (in acre-feet) projected to be generated annually by the facility.

**e)** If the applicant’s facility is going to transfer manure, sludge, and/or wastewater off-site annually to other persons, provide the estimated annual quantity in tons of manure and acre-feet of wastewater that the applicant plans to transfer off-site.

**f)** If you are using alternative use(s) for manure, sludge, and/or wastewater, select all that apply, and/or describe “other.”

# ATTACHMENT C INSTRUCTIONS

The permit number MUST be written on ATTACHMENT C to indicate it is a part of the NOC form for the permit being updated. The updates cannot be made without reference to the submitted NOC form.

* + 1. **Retention Control Structures (RCSs)**

If you there are changes to Retention Control Structure(s) (RCS) information, select “Yes” and complete the information for the RCS table.

Enter each RCS that will maintain authorization as is or with proposed changes, and each RCS that is proposed. Only the RCSs entered on the RCS tables will be authorized through this NOC.

When completing Table 1, list each RCS by identifying the name, as well as the structure type (i.e. treatment pond, storage pond, settling basin, settling pond, evaporation pond, transfer pond, treatment/storage, or other), days of storage, required capacity and drainage area. Please attach additional pages if more space is needed.

When completing Table 2, provide the name of the RCS, and the volume allocations from the design calculations for each of the RCSs. Please attach additional pages if more space is needed.

If there are no changes in RCSs, select “No” and go to section 2.

* + 1. **Land Management Units (LMUs)**

If there are changes in Land Management Unit(s), select “Yes” and complete the information for the LMU table (Table 1 in Section 2 a) for TPDES CAFOs and Table 2 in Section 2 b) for State Only CAFOs).

Enter each LMU that will maintain authorization as is or with proposed changes, and each new LMU that is proposed. Only the LMUs entered on the LMU table will be authorized through this NOC.

**Table 1:** Land Application Summary from NMP – For each field where manure and wastewater is (will be) land applied, provide the name, acreage, crop(s) to be planted or any other uses such as pasture or fallow fields, the realistic yield goal(s) for each crop, the maximum nitrogen and phosphorus recommendations, lbs/ac from the S\_Crops.xls Table. A copy of the S Crop.xls Table is available for download at the Texas A & M Agrilife Extension website <http://nmp.tamu.edu/>.

**Table 2:** Data Elements for Phosphorus Index Rating – Provide the data elements (site characteristic) from the phosphorus index worksheet for each field where manure and wastewater is (will be) land applied or attach the PI Index by Field Table from the NMP. See Table 1 or Table 2 of the NRCS Technical Notes–Agronomy Technical Note Number 15-Phosphorus Assessment Tool for Texas.

If you are a TPDES Large CAFO, indicate if the NMP has been developed and certified by a certified nutrient management specialist.

If there are no changes in LMUs, select “No.”

**Table 3:** Indicate whether alternative crop(s) and yield goal(s) or any other uses such as pasture or fallow fields are being proposed for the LMUs**.** If the answer is “Yes” and if the list of proposed alternative crop(s) and yield goal(s) provided for the first LMU is the same for ALL LMUs, select the check box that says “Applicable to all LMUs.” If you have a more extensive list of alternative crops/yield goals, you may attach the list to this application.

**The requirement for a Nutrient Management Plan (NMP) is not applicable to State Only CAFOs.**

**For a State Only:** When completing the table list each LMU by identifying the name, as well as the total number of acres for the LMU and the estimated application rate with the unit. Please attach additional pages if more space is needed.

# ATTACHMENT D INSTRUCTIONS

The permit number MUST be written on ATTACHMENT D to indicate it is a part of the NOC form for the permit being updated. The updates cannot be made without reference to the submitted NOC form.

**Proposed Air Authorization**

1. All animal feeding operations, regardless of size, are required to obtain air quality authorization under the Texas Clean Air Act, Texas Health and Safety Code, Chapter 382, Subchapter C. Air quality authorization may be obtained by one of the following:
* Permit By Rule, Chapter 106, Subchapter F (relating to animal confinement) - This is typically used for the smaller operations and dry litter poultry operations. Certain poultry operations require registration with a PI-7 through the Air Permits Division.
* Individual permits under Chapter 116 - This is one option to authorize facilities that cannot meet the permit by rule. The permit is processed by the Air Permits Division. For details, contact the Air Permits Division and request assistance on agricultural permitting for New Source Review at 512/239-1240.
* Air Standard Permit for Animal Feeding Operations - Requirements for this authorization are located in Chapter 321, Subchapter B. Facilities which meet all of the requirements are eligible for coverage. If the facility cannot meet all the requirements, then coverage should be obtained under Chapter 106, permit by rule; or Chapter 116, individual permit.

If “Air Standard Permit” is selected complete b and c, complete the signature page for Air Standard Permit at the end of the application, and provide an Area Land Use map. See the Maps section on page 1 of the NOC form.

**b – c)** This section should only be completed if you are requesting authorization under the air standard permit in 30 TAC 321, Subchapter B.

1. **Certification for Air Standard Permit for Animal Feeding Operations**

The operator must sign and date this certification statement if requesting authorization under the Air Standard Permit for Animal Feeding Operations. If you are not requesting air authorization through this NOI, then there is no need to sign the certification.