

**LIVESTOCK MANURE AND MORTALITIES
MANAGEMENT REGULATION**

**Application for Permit to Construct, Modify
Or Expand a Manure Storage Facility**



Name of Operation

Mailing Address

Postal Code _____

Location of Operation

Qtr Sec Twp Rge E/WPM or River Lot/Parish

Rural Municipality

Name of Contact

Contact Numbers

Business

Residence

Cellular

Facsimile

Owner (legal name)

Corp File # if app

Mailing Address

Postal Code _____

Contact Numbers

Business

Residence

Cellular

Facsimile

Affiliate (legal name)

Engineering Consultant

Mailing Address

Postal Code _____

Contact Numbers

Business

Residence

Cellular

Facsimile

Contractor

Mailing Address

Postal Code _____

Contact Numbers

Business

Residence

Cellular

Facsimile

FOR DEPARTMENT USE ONLY

Permit No.: LM _____

Reviewed by: _____

Date received: _____

Date of Certification _____

Proprietary (confidential) information will be protected in accordance with Manitoba law. Personal information is collected under the authority of *The Environment Act*, the Livestock Manure and Mortalities Management Regulation, and will be used to issue permits, and for administration and enforcement purposes. Information collected is protected by the privacy provisions of *The Freedom of Information and Protection of Privacy Act*. If you have any questions, contact the Access & Privacy Coordinator, Box 85, 200 Saulteaux Crescent, Winnipeg MB R3J 3W3; 1-204-945-4170.

PERMIT REQUIRED FOR: (check work proposed)

- 1. New operation and storage facility
- 2. Existing operation - No expansion of livestock inventory, ONLY new storage facility
- 3. Existing operation - Expansion of livestock inventory AND expansion of storage facilities
- 4. Existing operation - No additional livestock: Expansion Modification Repair of storage facility

TYPE OF FACILITY:

Earthen: _____ Concrete: _____ Steel: _____ Other: _____

LIVESTOCK INFORMATION:

Operation description (e.g. milk cows, sows-farrow/finish, beef cows, broilers, etc):

Type and number of livestock and animal units

(where the operation is expanding livestock inventories, indicate current and future inventory numbers and types)

OTHER APPROVALS:

New or expanding operations with 300 or more animal units:

- Technical Review Application Date _____ under _____
(name)
- Conditional Land Use Order included? _____

New or expanding operations with less than 300 animal units:

- Municipal Development Permit included? _____

MANURE STORAGE FACILITY SITING INFORMATION:

Distance from nearest surface water course: _____

Distance from nearest spring, well or sinkhole: _____

Distance from the property boundaries of the agricultural operation: _____

Depth to groundwater table: _____

Distance to nearest residence not associated with operation _____

Located within 100 year flood plain elevation? i.e. Red River Valley Designated

Flood Area (Y/N) _____ Water Resources Permit # _____

Abandoned wells on site (Y/N) _____ Specify location _____

WATER SOURCE FOR OPERATION:

Description of water source: _____

Volume of water required (gallons/minute or litres/second): _____

Water Rights licence required (Y/N) _____ Water Rights Licence #: _____

PROPOSED CONSTRUCTION PERIOD: _____

Note: Section 6 (9) of the regulation requires 5 days notification to Environment Officer **before starting** the construction.

NEW EARTHEN STORAGE FACILITY

Type of construction:

Cut & fill: ___ Clay liner: _____ Synthetic liner: _____ Type of liner: _____

Proposed size:

	Cell #1	Cell #2	Cell #3
Floor measurement			
Length	_____	_____	_____
Width	_____	_____	_____
Inside Slope Ratio	_____	_____	_____
Top measurement			
Length	_____	_____	_____
Width	_____	_____	_____
Outside Slope Ratio	_____	_____	_____
Total Depth (incl. freeboard)	_____	_____	_____
Freeboard	_____	_____	_____
Storage capacity (days)	_____	_____	_____
Storage loading			
Top	_____	_____	_____
Bottom	_____	_____	_____

EXPANSION/MODIFICATION/MAJOR REPAIR OF EARTHEN STORAGE FACILITY

Size of existing storage facility

Floor measurement: Length: _____ Width: _____
 Top measurement: Length: _____ Width: _____
 Slope ratio Inside: _____ Outside: _____
 Total depth (incl. freeboard): _____
 Freeboard: _____
 Storage capacity (days) _____
 Storage loading: Top: _____ Bottom: _____

Number of existing monitoring wells _____

Description of existing storage facility (type, when constructed, Eng. designed, etc)

Size of proposed storage facility

Floor measurement Length: _____ Width: _____
 Top measurement: Length: _____ Width: _____
 Slope ratio Inside: _____ Outside: _____
 Total depth (incl. freeboard): _____
 Freeboard: _____
 Storage capacity (days): _____
 Storage loading: Top: _____ Bottom: _____

Major repairs:

attach original drawings, highlight damaged area(s) and describe repair approach.

