

# Example Nutrient Management Plan Recordkeeping Forms

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

Stange Containment on	
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

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

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

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

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

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

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

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

Facility Name:	NPDES Permit No.:
structure(s) (including storm water and runoff	eekly visual inspections of your storm water management diversion devices, and devices used to channel contaminated nament 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

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

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

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

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

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

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

## CAFO Nutrient Land Application Log Sheet

		ined on-site iffe NMP:  yze manure, astewater pplication ned to be applied ispections.	Total D	1 0141 1					
		o must be mainta of your site-spec sample and analy s wastewater litter, process w or determining a tal N and P plan N and P actually ion equipment in	Total N	LOCALIA					
NPDES Permit No.:	Acres:	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.	Amount Applied	(specify gallons or tons)					
NP		. Maintain a lowing field wastewater vater 4 hours after the astewater applied	S	24 hours after					
	ie NMP):	plication activities nt, provide the foll wastewater to the , litter, or process wastew fore, during, and 2 llons of process wifeld to field	Weather Conditions	during					
	Field ID (use the same field identification as used in the NMP):	<ul> <li>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:</li> <li>Date: the date that you applied manure, litter, or process wastewater to the field</li> <li>Source: the source (e.g., storage structure) of the manure, litter, or process wastewater applied</li> <li>Method: the method you used to apply the manure, litter, or process wastewater</li> <li>Weather Conditions: the weather conditions 24 hours before, during, and 24 hours after the land application event</li> <li>Amount Applied: The total tons of manure or litter or gallons of process wastewater applied</li> <li>Total N: the total amount of phosphorus you applied to the field</li> <li>Total P: the total amount of phosphorus you applied to the field</li> </ul>	^	24 hours before					
	ne field identifi	orm to keep reco field. For each la below: an applied manur- g., storage struc- you used to appli the weather con- tr e total tons of ma ount of nitrogen	Mothod	Memor					
Facility Name:	ID (use the san	Instructions: Use this form to keep separate sheet for each field. For ea information in the table below:  • Date: the date that you applied m: • Source: the source (e.g., storage s applied • Method: the method you used to a weather Conditions: the weather land application event • Amount Applied: The total tons c • Total N: the total amount of nitro	Commoo	23 Inoc					
Facili	Field	Instruction separate s informatic or Date: the Source: applied or Method or Weather land app or Amount or Total P:	Doto	Date					

Doto	Common	Mothod	W	Weather Conditions	SI	Amount Applied	Total N	Total D
Date	aannoc	Menion	24 hours before	during	24 hours after	(specify gallons or tons)	I Otal IN	1 Otal F

## NPDES Permit No.: Daily Water Line Inspection

Facility Name:

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.

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L	December	slaitinI																															
	er	√ if leak																															
	November	slaitinI																															
ſ	<u>;</u>	√ if leak																													П		
	October	slaitinI																															
Ī	ĕ	√ if leak																													П		
	September	slaitinI																															
	šť	√ if leak																															
	August	slaitinI																															
		√ if leak																															
	July	slaitinI																															
		√ if leak																													П		
	June	slaitinI																															
		√ if leak																													П	П	П
	May	slaitinI																															
		√ if leak																															
	April	slaitinl																															
	n T	√ if leak																															
	March	slaitinI																															
	5	√ if leak																													П		
	February	slaitinI																															
ſ	N	√ if leak																															
J	January	slaitinI																															
	Year	20	1	2	3	4	5	9	7	8	6	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

# MANURE, LITTER, AND PROCESS WASTEWATER TRANSFER RECORD FORM

IPDES Permit No.	
Z	
ne:	
Facility Nar	

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.

red	Wastewater (gallons)				
Amount Transferred	Litter (tons)				
<b>A</b>	Manure (tons)				
Nutrient Analysis	Provided to Recipient				
	Address of Recipient				
	Name of Recipient				
	Date of Transfer				