



# ANNUAL REPORT LAND APPLICATION

FACILITY NAME:	CALENDAR YEAR OF REPORT:	PERMIT NUMBER:	FACILITY ID:
SITE ADDRESS OR LEGAL DESCRIPTION: <input type="checkbox"/> Check if multiple sites (Attach additional sheets for additional site information.)	COUNTY:		
FACILITY CONTACT (name):	FACILITY PHONE:		
FACILITY CONTACT MAILING ADDRESS (if different):	FACILITY CONTACT PHONE (if different):	FACILITY CONTACT EMAIL:	

Did you operate in \_\_\_\_\_?

Yes ***If yes***, proceed to next section and complete the form.

No ***If no***, answer the following questions, sign and date the last page, and submit. This completes your reporting obligations.

When did you stop operations? \_\_\_\_\_

Do you plan to restart?  No  Yes When? \_\_\_\_\_

**IDENTIFY FOR EACH CROP:**

Crop	Acreage Used	Type of Waste	Amt of Waste (specify cu yds or tons)	Source of Waste (including county)	Additional lbs. of N/acres				
					Manure	Biosolids	Commercial Fertilizer	Waste Water	Other

**IDENTIFY THE TYPE AND AMOUNT OF ANY WASTE REMAINING IN STORAGE AS OF  
DECEMBER 31<sup>ST</sup> OF THE REPORTING YEAR:**

Waste Type	Amount Please check: <input type="checkbox"/> Cubic Yards/Year or <input type="checkbox"/> Scaled Tons/Year	Specify Method of Storage

Additional information to be attached **if required** (please check is included):

- Additional waste characterization information **if required** to be obtained as a condition of the permit, and a summary of that data.
- Environmental monitoring data **if required** to be obtained as a condition of the permit, and a summary report of that data.
- Additional information **if required** by the jurisdictional health department as a condition of the permit.

During the reporting year, were there any changes in your management practices that would impact your operations?

No     Yes (specify) \_\_\_\_\_

Are there any new solid waste activities planned at your site for this calendar year?     No     Yes (specify) \_\_\_\_\_

Planned start date: \_\_\_\_\_

PREPARED BY:	DATE:	PHONE:
EMAIL:		

*If you need this publication in another format, please call the Waste 2 Resources Program at 360-407-6900.  
Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.*