

ANIMAL WASTE LAND APPLICATION RECORD FOR PERMITTED CONFINED ANIMAL FACILITIES

PERMITTEE: _____

PERMIT NUMBER: _____

APPLICATION METHOD: _____

Field Name or/ and Number	Date Applied	Crop Type	Area Applied (acres)	Volume Applied (gallons)

NOTE: Facility record; **DO NOT MAIL THIS;** Keep this record at the facility.
Make additional copies of this table as needed.