



Agriculture Cost Share Program

COOPERATOR ACKNOWLEDGEMENT



Lagoon Biosolids Removal

Cooperator Name: _____ Date: _____

Tract/Field: _____ County: _____

The following items provide important information regarding ACSP policies pertaining to Lagoon Biosolids Removal Practice projects. The cooperator should read through each of the items and initial on the line to acknowledge that they have read and understand the information.

This form should be filled out with the assistance of local Soil and Water Conservation District staff so that they may provide further explanation and answer any questions that arise.

_____ I have reviewed, understood and signed the lagoon biosolids removal waste management plan.

_____ It is the responsibility of the permittee to submit a copy of the Lagoon Biosolids Removal waste management plan to the Division of Water Resources regional office prior to the start of removing biosolids.

_____ The lagoon biosolids removal waste management plan was developed to, and the removal shall be carried out according to, the biosolids removal methodology _____ as indicated below:

- a) Agitate all waste in the lagoon to create a slurry and land apply
- b) Dewater the lagoon leaving ____ feet of liquid, then agitate remaining liquid with sludge to create a slurry and land apply
- c) Dredge sludge from lagoon and land apply
- d) Other: _____

_____ The land application must be in accordance with the rates and under the conditions specified in the biosolids removal waste management plan.

_____ If a third-party contractor is hired to conduct the biosolids removal, it is the responsibility of the cooperator to ensure the waste management plan, including removal methodology and land application rates, is properly adhered to.

_____ If sludge is land applied to conventionally tilled bare soil, the sludge shall be incorporated into the soil within two days after application on the land, or prior to the next rainfall event, whichever occurs first.

_____ Provisions shall be made to prevent damage to the lagoon dike and liner during the sludge removal process.

_____ Landowners for each field not owned by the cooperator shall complete the biosolids impact to land acknowledgement form.

_____ If any vegetated areas are disturbed during the biosolids removal, they shall be revegetated to control erosion in accordance with NRCS 342 Critical Area Planting.

I acknowledge by my signature below that I have read and understand the policies listed above.

PRINT NAME: _____

SIGNATURE: _____ DATE: _____

District Technical Representative

I acknowledge I have reviewed the biosolids removal waste management plan and associated policies with the cooperator listed above.

PRINT NAME: _____

SIGNATURE: _____ DATE: _____