



NATURAL RESOURCES
DIVISION

ARKANSAS DEPARTMENT OF AGRICULTURE NATURAL RESOURCES DIVISION

POULTRY FEEDING OPERATION REGISTRATION

All poultry feeding operations shall register between January 1 through March 31 or be deemed out of compliance and subject to penalties set forth in Title 19.

POULTRY FEEDING OPERATION REGISTRATION

Contact Information:

Operator name: _____

Home Mailing Address: _____

City: _____ County: _____

State: _____ ZIP: _____

Telephone Numbers: _____

FAX: _____

E-mail _____

Facility Information:

1. Facility Name and Location Information:

Facility name: _____

Address (*Physical Address, not p.o. box*): _____

City: _____ County: _____

State: _____ ZIP: _____

Latitude: _____ Longitude: _____ of entrance to facility

Section: _____ Range: _____ Township: _____

Tracking #:

Watershed:

2. Owner Information (if different from operator information):

Owner Name: _____

Mailing Address: _____

City: _____ County: _____

State: _____ ZIP: _____

Telephone Numbers: _____

3. Integrator Information (If contract operation):

Integrator Name: _____

Contact Name: _____

Address: _____

City: _____ County: _____

State: _____ ZIP: _____

Telephone Numbers: _____

FAX: _____

4. Type of Poultry

a) Dry Litter

Broiler – under 4 lbs

Broiler – over 4lbs

Turkey

Pullet

Duck

Breeder

Roosters

b) Wet Manure

Layers

5. Bird Capacity for the Year:

Number of Houses _____ x Flocks per Year _____ x Number of Birds per Flock _____ =
_____ Total number of Birds per Year

6. Average Number of Days in Production per Flock: _____

7. Average Weight of Birds: _____

8. ADMIN ONLY – Estimated Tons of Litter Produced Last Year: _____

(refer to District PFO Report – Litter Calculator Tab – Use Number of Birds per Flock from #5)

9. Number of acres under your control available for land application of manure or litter: _____

10. Type of storage: _____ total storage capacity _____ tons

11. Method of carcass disposal:

- In-vessel Composting
- Composter
- Incinerator
- Other-specify _____

12. **Utilization:** Attach your 2019 litter use or transferred records to this form

Litter removed from poultry houses

- a) Total tons of cake removed _____ Tons
- b) Cleanout date ___/___/2019 _____ Tons (complete clean out)
- c) Cleanout date ___/___/2019 _____ Tons (complete clean out)
- d) Total tons of Litter removed _____ Tons (add 9a through 9c)
 - Windrow: ___/___/2019; ___/___/2019

Type of litter practice (The total tons removed should be accounted for in this section)

- e) Land-Applied: _____ Tons
- f) Stored: _____ Tons
- g) Sold or Transferred: _____ Tons (refer to records on page 6 and report names and destination)
- h) Other _____ Tons, specify: _____
- i) Total: _____ Tons (add e through h)

Annual FEE:

- Poultry Feeding Operation Registration: (**\$10 Payable to your Conservation District**):
Check # _____

District Employee Signature _____

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true and accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment.

Print or type full name.

Signature of owner/operator.

_____/_____/_____
Date

Litter Transfer and Activity Records:

Name of Facility and or Operator _____

1. Cake out or clean out (circle one):

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

2. Cake out or clean out (circle one):

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

3. Cake out or clean out (circle one):

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

4. Cake out or clean out (circle one):

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

5. Cake out or clean out (circle one):

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

6. Cake out or clean out (circle one):

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

Litter Transfer and Activity Records: *take this copy back to your farm and use it as part of your farm records. When you register your farm next year, provide this information to the District office along with your registration form; each year you will be given a new record sheet.*

Name of Facility and or Operator _____

1. **Cake out or clean out (circle one):**

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

Address _____ Phone (____) _____

Name of Town or community where the litter was applied: _____

2. **Cake out or clean out (circle one):**

Date _____ Tons _____ applied transferred stored other

Name of person you sold or transferred the litter to: _____

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