PLEASE NOTE:

Applications must be submitted 15 days prior to the scheduled Planning Board meeting by NOON. Late submittals will be placed on the next month's agenda. This is your only notice of this meeting date and no reminder will be sent.

TOWN OF FARMINGTONApplication for Biosolids and Other Residuals

This application must be complete	ed and retur	ned by noon on:	
(Please print or type)			
Application Date:		Application Number:	(0)((1)
Name of Applicant:			(Office Use Only)
Address:			
Phone:	_ Email:		
2. Name of Land Owner:			
Address:			
Phone:	_ Email:		
Name of Authorized Agent:			
Address:			
Phone:	_ Email:		
4. Name of Generator:			
Address:			
Phone:	_ Email:		
UTILIZATION SITE INFORMATION			
Name of Site Operator: (Entity responsible for land application)			
2. Location of Site:		Map Lo	ot Zone
3. Is this site within the Wellhead Pro	otection Zon	e? Yes No	
4 Directions to Utilization Site:			

5.	Description of project and types of materials to be land applied: (Attach additional sheets if necessary). List below the name and addresses of the owners of abutting property:				
6.					
	Name	Address	Map/Lot#		
	TE CHARACTERISTICS Distance to and name of nearest surface water bodies (including intermittent streams and drainage swales) from each boundary of the site (feet):				
2.	. Distance to and owner of nearest dwelling (feet):				
3.	a. Distance to and owner of any private well or water supply within 300 feet:				
	b. Distance to and operator of r	nearest public water supply well (feet):			

4. Distance to and name of nearest public road (feet):

5.	Describe location of any proposed area(s) for short term stacking (to facilitate the spreading schedule) and indicate on site map:
6.	Total acreage of site: How many acres are proposed for utilization?
7.	Slope of land at proposed utilization?
8.	What are the types of soil are at this site?Attach a copy of NRCS soils survey map, a soils map prepared by a certified soil scientist, or other supporting documentation.
9.	Is this site located on a documented sand and gravel aquifer or an aquifer recharge area? Please include a copy of the Maine Geological Survey aquifer map if applicable.
10	. Is the site located on a 100-year floodplain or a flood hazard area? Please include a copy of the Federal Emergency Management Agency (FEMA) flood insurance rate map if applicable.
11	. Describe the route and types of roads that will be taken to deliver sludge or residual to the site including on site roads.
12	. This site was previously used for:
13	. This site was fertilized with:
14	This site was treated with the following pesticides:

TO BE INCLUDED WITH THIS APPLICATION ARE THE FOLLOWING:

(Check off as completed) ☐ 1. New permits require a non-refundable fee of Three Hundred Dollars (\$300.00) and a one time impact fee amount of Ten Dollars (\$10.00) per acre. Permit renewals and permit modifications shall be accompanied by a non-refundable fee of One Hundred fifty Dollars (\$150.00). ☐ 2. A copy of the complete application submitted to DEP for the proposed activity including all the required permit attachments. ☐ 3. Property location shown on a 7.5 minute USGS topo map copy. ☐ 4. Accurate site plan map drawn to scale 1":500', including tax maps and the most recent aerial photograph possible, that clearly indicates property lines, abutters, existing water well locations within three hundred (300) feet, areas suitable for spreading, required setback, storage areas, proximity to any primary sand and gravel aguifer recharge area and/or significant groundwater aquifer, waterbody/courses, roads, swales, steep slopes (greater than 15%), buildings and environmentally sensitive areas. ☐ 5. Baseline well test preformed on all wells within 300' of application and storage sites. (To be paid for by the applicant). ☐ 6. A narrative explaining the reasons for choosing the designated areas and setbacks. ☐ 7. A baseline standard soil test preformed by a certified lab for each proposed land application field. ☐ 8. A medium intensity Natural Resources Conservation Service (NRCS) soil survey map or similar map prepared by a Maine Certified Soil Scientist. If an NRCS map is used, it must be verified by a Maine Certified Soil Scientist. ☐ 9. If field stacking or field storage of biosolids and/or other residuals is proposed, an on-site soil investigation performed by a Maine Certified Soil Scientist of the stacking or storage site is required. ☐ 10. A hydrogeologic impact study based on size, location, surrounding uses, or other characteristics of the proposed site prepared by a State of Maine Certified Geologist may be required by the Planning Board at the applicant's expense. ☐ 11. The submission of all biosolids and other residual analysis reports, annual reports and any other data required as per the DEP permit to the Code Enforcement Office at the time of initial application. ☐ 12. A plan for the submission of the results of soils tests to be performed annually prior to the application of the biosolids and other residuals for the duration of the permit sought, including the proposed sampling schedule, sampling locations, and parameters to be measured.

□ 13.		nt Plan which has been reviewed and approved by ervation District and said plan must meet the t.				
IDEMN	IDEMNIFICATION AGREEMENT					
By signing below, I the applicant shall covenant and agree to indemnify, and hold harmless and defend the Town of Farmington, its agents and employees, from and against any and all claims for injuries or damage to persons or property of whatsoever kind or character, whether real or asserted, arising out of the work to be performed under the permit. The applicant hereby assumes all liability and responsibilities for injuries, claims, or suits for damages, to persons or property of whatsoever kind or character, whether real or asserted, occurring during the time that work is being performed under the permit or arising out of the performance of same.						
Signati	ure of Applicant	Date				
CERTI	FICATION					
By signing below, I, the applicant acknowledge that I am herewith submitting a complete application. I have examined the information submitted in this document and all attachments thereto and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate, and complete. I understand that a copy of the Town's Biosolids and other Residual Management Ordinance is available upon request.						
Signati	ure of Applicant	Date				