

**APPENDIX 1**  
**Monitoring and Reporting Program No. R2-2015-0031**

Report Date: \_\_\_\_\_

## Annual Report

**San Francisco Bay Regional Water Quality Control Board**  
**Conditional Waiver of Waste Discharge Requirements for Existing Dairies**  
**Order No. R2-2015-0031**

**Due November 30; reporting for preceding 12 month period (November 1 through October 31).**

Facility Name: \_\_\_\_\_ Facility Address: \_\_\_\_\_  
No. Street City Zip

Operator: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Property owner: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Current # of mature dairy cows (milking + dry): \_\_\_\_\_

Current # and type of other dairy animals: \_\_\_\_\_

Within the last year has any of the above information changed? \_\_\_\_\_ If yes, please highlight new information.

The objective of the Annual Report is to provide compliance updates, demonstrate that the dairy is ready for the rainy season, document required water quality monitoring and actions taken to correct identified problems, and to demonstrate that each facility is operating in compliance with the requirements of Order No. R2-2015-0031 (Conditional Waiver).

Any discharges of waste, waste water or contaminated storm water that may endanger human health or the environment, must be verbally reported within 24 hours of becoming aware of the occurrence to the **Water Board Spill Hotline at (510) 622-2369 and to the California Office of Emergency Services (OES) at (800) 852-7550**. Within 14 business days, a written report describing the incident and resulting corrective actions must be submitted, as indicated below.

By **November 30** of each year, please complete this form to document compliance and submit it to:

Mail	FAX	Email
<b>San Francisco Regional  Water Quality Control Board  ATTN: Confined Animal  Facility Program  1515 Clay Street, Suite 1400  Oakland, CA 94612</b>	<b>San Francisco Bay Regional  Water Quality Control Board  ATTN: Confined Animal  Facility Program    (510) 622-2460 (fax)</b>	<b>R2ConfinedAnimals@waterboard.ca.gov</b>

**A. Statement of Completion**

Each facility must develop and implement the following programs/plans consistent with technical standards and schedule, specified within the Conditional Waiver, and provide a written certification that each plan is prepared and implemented in accordance with the minimum requirements, by each due date. Please check all that apply.

1. Facility Monitoring Program - Due November 1, 2016

Visual Inspection

- Production / confined area inspections conducted daily
- Retention pond inspections conducted monthly (April-Sept) and daily (Oct-March)
- On-site inspection and monitoring plan is completed and ready for upcoming rainy season

Provide explanation if any of these are not completed and currently implemented: \_\_\_\_\_

\_\_\_\_\_

- My dairy is enrolled in the \_\_\_\_\_ group monitoring program for surface water sampling.
- I will complete individual surface water sampling requirements.

2. Waste Management Plan (for production area) - Due November 30, 2017

- Plan is completed / updated      Date of completion: \_\_\_\_\_
- Plan is fully implemented
- Certification is attached
- Previously submitted

Comments: \_\_\_\_\_

\_\_\_\_\_

3. Grazing Management Plan (if 50 acres or more are grazed) - Due November 30, 2017

- Plan is completed / updated      Date of completion: \_\_\_\_\_
- Plan is fully implemented
- Certification is attached
- Previously submitted

Comments: \_\_\_\_\_

\_\_\_\_\_

4. Nutrient Management Plan (if waste is applied to land) - Due November 30, 2019 (facilities with 700 or more mature cows must have a nutrient management plan upon waiver enrollment)

- Plan is completed / updated      Date of completion: \_\_\_\_\_
- Plan is fully implemented
- Certification is attached
- Previously submitted

Professional who developed the plan (TSP or other professional) \_\_\_\_\_

Comments: \_\_\_\_\_

**B. Pre-Rainy Season Pollution Prevention**

Please check all pre-season pollution prevention measures listed below that apply to your dairy. Attach photo-documentation of compliance with measures. To be complete, each “No” or “N/A” response requires detailed explanation(s).

- Yes  No  N/A Runoff from all roofed areas is diverted away from confined or heavily manured areas through working gutters or other means.
- Yes  No  N/A Berms, ditches and other measures used to divert rain and surface drainage away from manured areas or waste impoundments are adequately maintained and protected against erosion.
- Yes  No  N/A All uncovered confined or heavily manured areas including corrals, feeding, watering or loafing areas, not draining into retention ponds have been scraped clean and/or otherwise protected.
- Yes  No  N/A Animals have been relocated away from all uncovered confined areas not draining into retention ponds.
- Yes  No  N/A All retention ponds, pumping equipment, pipes and other conveyances have been inspected and undergone maintenance.
- Yes  No  N/A All retention ponds have been emptied, properly maintained and protected from inundation or washout.
- Yes  No  N/A All retention pond liners have not been damaged during clean-out process.
- Yes  No  N/A Solid and/or liquid manure sources have been applied to land according to Conditional Waiver specifications and in a manner that prevents the discharge of waste to surface waters or flood-prone areas, prior to November 30.

Explain No or N/A answers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) of Pre-Rainy Season Inspections: \_\_\_\_\_

**C. Compliance Inspections (required to start by November 1, 2016)**

Periodic visual inspections must be conducted to ensure each facility is operated and maintained in compliance with the Conditional Waiver. Observations of any threats to water quality and corrective actions taken shall be documented throughout the year and reported below. Please check all that apply and explain each “No” response.

**Production / Confined Area Inspections**

- Yes  No Did you conduct daily inspections of confined and production areas, including retention ponds, pumping equipment, water lines, corrals, travel lanes, water crossings, feed storage areas, loafing areas, etc., to confirm that:
  - ✓ All storm water contacting waste was contained;
  - ✓ All non-storm water waste and/or wastewater was contained;
  - ✓ Animals were prevented from entering surface waters or clean storm water diversion ditches; and
  - ✓ Clean storm water was diverted away from manured areas?

If no, explain: \_\_\_\_\_  
\_\_\_\_\_

**Retention Pond Inspections**

- Yes  No Did you conduct weekly inspections of retention ponds to confirm that:
  - ✓ 2 feet of freeboard was maintained for partially or completely above ground ponds or 1 foot freeboard for those completely in ground; and
  - ✓ Berms were free of cracking, slumping, excess vegetation, animal burrows and/or seepage?
- Yes  No Was freeboard measured and recorded monthly during the dry season (Apr.-Sept.)?
- Yes  No Was freeboard measured and recorded weekly during the rainy season (Oct.-Mar.)?

If no, explain: \_\_\_\_\_  
\_\_\_\_\_

**Storm Event Inspections**

- Yes  No Did you conduct inspections of entire facility before, during and after storm events to confirm that:
  - ✓ Retention ponds and structures were sound and had adequate capacity;
  - ✓ Receiving waters, both up and downstream of facility were monitored, and water quality changes were documented; and
  - ✓ All pollution prevention measures, for confined areas, grazing lands, and land application areas were implemented and effective?

If no, explain: \_\_\_\_\_  
\_\_\_\_\_

**Cropland and/or Pasture Inspections** (areas where wastewater and manure are applied)

- Yes  No Did you conduct land application inspections at least once daily during each irrigation and/or spreading event, to confirm that:
  - ✓ Land application activities did not result in erosion, field saturation, runoff, or nuisance conditions; and
  - ✓ Liquid or solid manure was applied to land according to required set-backs from waterways, flood-prone and heavy run-off areas?
- Yes  No Did you record the dates, locations, and approximate volumes of waste water and/or solid waste applied to land?
- Yes  No Did you record the weather conditions at the time of, and 24 hours prior to, waste water and/or solid waste application to cropland?

**Grazing Lands Inspections** (required for grazing lands of 50 acres or more)

- Yes  No Did you conduct grazing land inspections at least monthly during the rainy season and twice during the dry season, including upstream and downstream inspection of the closest surface water body, to confirm that:
  - ✓ Chosen management practices were implemented and minimum requirements for grazing operations were met; and
  - ✓ Grazing activities did not result in adverse impacts to receiving waters.
- Yes  No Did you measure and/or estimate grazing land residual dry matter (RDM), prior to the first fall rains?

RDM result (lbs. / acre): \_\_\_\_\_

If recommended standards were not met, or if you did not measure RDM, please provide an explanation below: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Based on your visual inspections and observations during the past year, did you discover any threats to water quality or pollutant discharges to surface or groundwater?**

- Yes  No

If yes, include a detailed description (location, date/time, photographs, and estimated amount of release) and corrective actions taken at the time of the pollution threat and/or discharge (attach additional sheets if necessary). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. Water Quality Sampling (required to start by November 1, 2016)**

Surface Water Sampling:

- I am a member of the \_\_\_\_\_ group monitoring program for surface water sampling.
- I am not a member of an approved monitoring group, complete surface water sampling report attached on page 7.

Groundwater Sampling:

Attach groundwater sampling results for reports submitted Fall 2017 and Fall 2018. Table on page 8 may be used to assist record keeping.

**E. Summary**

- Yes  No Have all the required monitoring and inspections been completed?
- Yes  No Have all required reports been submitted to the San Francisco Bay Regional Water Quality Control Board?
- Yes  No Based on your visual inspections and water quality monitoring results, did your facility operate in compliance with the Conditional Waiver?

If no, explain: \_\_\_\_\_  
\_\_\_\_\_

**Certification**

*“I certify under penalty of law that I have personally examined and am familiar with the information submitted in this report, sampling data, 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, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.”*

**Printed Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Month/day/year** \_\_\_\_\_

**Surface Water Sampling Results:**

For producers NOT participating in a Group Monitoring Program: complete and submit this report with your Annual Report. Details associated with surface water sampling requirements are in Attachment A of the Conditional Waiver. Sampling shall take place during or directly following each of 3 major storm events, after at least 1 inch of rain per 24 hours. Sampling events shall be at least 14 days apart.

1. Attach a map of the sampling locations, including proximity of the confined facilities and land application areas.
2. Describe your sampling methods (field equipment, test kits, measurement devices, etc.): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Complete the table for your surface water sampling.

Date	Location	Specific conductance	pH	Temperature	Total ammonia nitrogen (NH <sub>3</sub> + NH <sub>4</sub> <sup>+</sup> )	Unionized ammonia (NH <sub>3</sub> ) as calculated
Benchmarks: Specific conductance, below 2000 µS/cm; Temperature, °C; pH, 6.5-8.5; Total ammonia nitrogen, Below 1 ppm (or mg/l) and meets calculated unionized ammonia benchmark; Unionized ammonia as calculated, 0.025 mg/l.						

**Ground Water Sampling:**

Existing representative wells located within the confined facility, including domestic and agricultural supply wells, shall be sampled 4 times total, approximately six (6) months apart. A sample must be collected in: **(1) Fall 2016, (2) Spring, 2017, (3) Fall 2017, and (4) Spring 2018.** Results of groundwater samples collected consistently with the sampling protocols and within these time frames for another purpose (e.g. for a County Health Department or by the County milk inspector) may be submitted to the Water Board instead of collecting additional samples. The sample must be representative of groundwater well conditions (i.e. not disinfected).

Groundwater samples shall be analyzed by a laboratory certified by the State’s Environmental Laboratory Accreditation Program (participating labs available at the website: [http://www.waterboards.ca.gov/drinking\\_water/certlic/labs/index.shtml](http://www.waterboards.ca.gov/drinking_water/certlic/labs/index.shtml)) or a laboratory pre-approved by the Water Board staff.

Date	Well ID	Nitrate	Total Coliform Bacteria
Municipal supply bench mark is 45.0 mg/l nitrate; 1.1 MPN/100 ml total coliform bacteria			