NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

LETTER OF LAND APPLICATION MANAGEMENT APPROVAL APPLICATION

Refer to Appropriate Completeness Checklist and Instructions and N.J.A.C. 7:14A-20.
Provide All Applicable Information. Please Print or Type. Attach additional sheets if necessary.
If you need assistance in completing the LLAMA, contact the Bureau of Ground Water, Residuals, and Permit Administration by email to DWQ_RESIDUALS@DEP.NJ.GOV.

A. Identification of Land Application Site

Site name: _____

Site location: _____

Street or Route Number: _____

County: _____ Block(s): _____ Lot(s): _____

City or Town: _____ State: New Jersey Zip: _____

B. Preparer / Residual Source Information

1. Preparer Name: _____
2. NJPDES Permit No.: _____ Discharge Category:_____
3. Mailing Address: _____

   _____

   _____
4. Contact person: _____ Email:_____

   Phone No.: ( )_____ Cell No.:( )_____

5. Does the residual meet the Class A pathogen reduction requirements in 40 CFR 503.32(a):

   ☐ Yes ☐ No

   If you answered "no", proceed to question 6. If you answered "yes", please proceed to question 8.

6. Does the residual meet the Class B pathogen reduction requirements in 40 CFR 503.32(b):

   ☐ Yes ☐ No

   If you answered "no", the residual **cannot be land applied**. If "yes", proceed to question 7.

7. Residual meeting the Class B pathogen reduction requirements shall also comply with the site restrictions at 40 CFR 503.32(b)(5). Specify (using attachments as necessary) how these restrictions will be met (See Appendix B of the Bureau of Pretreatment and Residual Technical Manual for Residual Permits): _____

   _____

   _____

   _____

8. Does the residual meet one of the vector attraction reduction requirements in 40 CFR 503.33(b)1 through (8): ☐ Yes ☐ No

   If you answered "no", proceed to question 9. If you answered "yes", the rest of Section B is not applicable, please proceed to Section C.

9. Specify (using attachments as necessary) which vector attraction reduction option (40 CFR 5033.3(b)9 or (10)) the person land applying the residual will meet and how they will meet these requirements (See Appendix C of the Bureau of Pretreatment and Residual Technical Manual for Residual Permits):

   _____

   _____

   _____

C. Owner Information

1. Are you the owner of this land application site? ☐ Yes ☐ No

   If no, provide the following information about the owner:

   Name: _____

   Street or P.O. Box: _____

   City or Town: _____ State: _____ Zip: _____

   Phone No.: (_____)_____ Email: _____

2. Property owner certification:

   I hereby certify that I, _____, am the owner of the property identified in Section A. above. This endorsement is certification that I have read and understand the instructional literature and grant permission for the utilization of residual on subject property. This permission may be withdrawn at any time during the life of the project.

   In addition, the aforementioned property owner shall certify:

   a. Whether any residuals are to be applied within an easement:

      Yes _____ (initial) No _____ (initial)

      If yes, what type of easement: _____

   b. Whether any residuals will be applied to property belonging to the State of New Jersey:

      Yes _____ (initial) No _____ (initial)

   c. Whether any residuals will be applied within areas under jurisdiction of the Pinelands Development Commission:

      Yes _____ (initial) No _____ (initial)

   d. Signature of Owner: _____ Date: _____

D. Applier Information

1. Are you the person who applies, or who is responsible for application of, residual to this land application site?

☐ Yes ☐ No

2. If no, provide the following information for the person who applies.

Name: _____

Street or P.O. Box: _____

City or Town: _____ State: _____ Zip: _____

Phone No.: (_____)_____ Email: _____

E. Land Application Site Information

1. Identify the type of land application site from among the following:

☐ Agricultural Land ☐ Reclamation Site ☐ Public Contact Site
☐ Forest ☐ Other (Specify:_____)

2. Identify the type of zoning for the land application site from among the following:

☐ Residential ☐ Industrial
☐ Commercial ☐ Other (Specify:_____)

3. Is the facility located within the Pinelands Area (designated as such by Section 10(a) of the Pinelands Protection Act)? ☐ Yes (proceed to 3.a) ☐ No (skip to 4)

a. If yes, submit either a:

☐ Certificate of Filing (COF) for the activity issued by the Pinelands Commission

or

☐ A written determination from the Pinelands Commission that a COF is not required

Questions regarding Pinelands applicability shall be directed to the Pinelands Commission at (609) 894-7300. Further information may be obtained at www.state.nj.us/pinelands/

4. Site Size:

Total area: _____ Acres

Total area of buffer zones: _____ Acres

Area of Application: _____ Acres

5. Site Characteristics:

Proximity of site to nearest: Surface water body _____ Feet
Potable water well _____ Feet
Occupied Dwelling _____ Feet

6. Attach a U.S. Geological Survey Topographical Map (clear copy or original) for the area of the proposed land application site.

   a. Delineate thereon the areas where residuals are to be applied.

   b. The map portion is from the _____ 7.5 minute Quadrangle.

   c. Delineate thereon the transportation routes to be used to haul the residuals from the point of generation (preparer site) to the site of application. Where routes extend beyond the boundaries of the quadrangle map, a supplementary page or map must be attached listing the additional routes to be used.

7. Attach a Municipal Tax Map (clear copy or original) for the area of the proposed land application site.

   a. Delineate thereon the property boundaries for the proposed site and the areas where residuals are to be applied.

   b. Indicate Tax Identification Lot numbers and Block numbers.

8. Attach a clear copy of an aerial photograph depicting the following:

   a. The boundaries of the proposed LLAMA site.

   b. The boundaries and acreage of each proposed application area (which shall not be within 200 feet of surface waters of the State, as defined in N.J.A.C. 7:14A-1.2; within 1,500 feet of a public community water supply well; or within 300 feet of a public non-community or non-public water supply well). Each application area shall be delineated as a numbered unit which is appropriate for record keeping and soil testing purposes (buffer zones shall be labeled as non-application areas).

   c. The locations and name(s) of public roads, private access roads, dwellings, buildings and surface waters including but not limited to perennial and intermittent streams, lakes, ponds, and reservoirs within the proposed LLAMA site and those within fifteen hundred (1500) feet of the boundaries of the application area(s).

   d. The location(s) and depth(s) of all public community water system wells, public noncommunity water system wells, nonpublic water system wells, ground water monitoring wells, industrial process water supply wells and agricultural water supply wells within the proposed LLAMA site and those within fifteen hundred (1500) feet of the boundaries of the application area(s).

   e. The locations of all sinkholes, gullies, and soil erosion or conservation plan features including but not limited to ditches, tile drains and discharge points, dikes, berms and terracing within the application area(s) and those features which convey or divert drainage from the application area(s).

   f. Soil boring/test-pit locations.

9. Attach a U.S. Department of Agriculture, Natural Resource Conservation Service Soil Survey Map (clear copy or original) for the area of the proposed land application site.

   a. Delineate thereon the areas where residuals are to be applied.

   b. The map portion is from the _____ County Soil Survey.

   c. The map portion is from sheet number _____ of the above Soil Survey.

10. Attach the Soil Conservation Service Soil Survey Interpretation Sheets for each soil series within the proposed land application area.

11. Attach the soil profile descriptions of the required soil borings made in the proposed land application area, which shall conform to and include the following:

   a. A sufficient number of soil borings/test pits shall be taken to determine soil characteristics in accordance with the following table:

Acreage	Minimum Number of Borings
1 – 10	3
11 – 50	6
51 – 100	12
101 – 200	18
Over 200	Minimum of 24

   b. The soil borings/test pits shall be placed so as to provide representative information about the degree of variation in the characteristics of all soils within the proposed land application areas.

   c. The soil profile of each boring/test pit shall be described by horizon to a minimum depth of five (5) feet. Each soil profile description shall be dated and include: thickness of horizon; texture (based on the USDA Soil Texture Classification System); Munsell color; estimated permeability; if encountered, restricting layers or fragipans; depth to, abundance, size and contrast of mottling; depth to seasonal high water table and depth at which water was encountered; and depth to bedrock.

   d. A soil scientist, geologist, or other qualified person shall describe the soil profile.

   e. Where, in the judgement of the Department, submitted information is insufficient to adequately evaluate the site, additional and/or deeper soil borings/test pits may be required.

12. Attach current (within the past 3 years) soil fertility data for each proposed field, which shall conform to and include the following:

    a. Soil samples shall be collected from each proposed field and be comprised of multiple soil cores collected across the field in a manner as to provide a representative sample which shall be thoroughly mixed to form a composite sample for analysis of the following constituents:

Potassium (lbs/acre)	Calcium (lbs/acre)
Magnesium (lbs/acre)	Phosphorus (lbs/acre)
pH (Standard Units)	

    b. The Mehlich-3 Soil Fertility Test Method shall be used for all soil samples (except pH).

    c. An accredited soil-testing laboratory shall perform all soil analyses with a copy of the results submitted to the Department on the official letterhead of the laboratory.

F. NRCS Conservation Plan

Attach a conservation plan certified by the County Soil Conservation District; a written determination from the Natural Resources Conservation Service that no conservation plan is required for the site; or an equivalent conservation plan that is developed by a person trained in nutrient management and conservation planning and that is approved by the Department solely for the purposes of this LLAMA. If this is a reclamation site, this requirement is replaced by the need to obtain a Soil Erosion and Sediment Control Plan (SESCP) which has been certified by the local Soil Conservation District, unless the local Soil Conservation District determines that no SESCP is required.

G. Operational Considerations

1. Residual Application Method(s):

_____

_____

_____

_____

2. Crop Information:

    a. Specify (using attachments where necessary) the types of crops proposed to be grown and the following information for each proposed crop:

Crop	Actual Yield (if available)	Yield Goal	Crop End Use

b. Indicate the nitrogen, phosphorus, and potassium requirements for each crop:

Crop	N Requirement (lbs/acre)			P Requirement (lbs/acre)			K Requirement (lbs/acre)		
	Estab.	Maint.	Annual	Estab.	Maint.	Annual	Estab.	Maint.	Annual

c. Specify (using attachments where necessary), for each crop identified, above how the nutrient requirements were developed _____

_____

_____

_____

_____

d. Specify (using attachments where necessary), for each crop identified above the proposed method for determining the residuals application rate(s). For a field that has soil test phosphorus values in the above optimum range, a phosphorus index calculation result must be submitted supporting nitrogen based application rates. (See the Bureau of Pretreatment and Residual Technical Manual for Residual Permits.): _____

_____

_____

_____

_____

_____

_____

_____

e. Specify (using attachments where necessary), for each crop identified above the periods of the year during which residuals are proposed to be applied and the cropping practices to be employed (some common cropping restrictions can be found in the Bureau of Pretreatment and Residual Technical Manual for Residual Permits): _____

_____

_____

_____

_____

H. Storage

Permanent storage structures will not be permitted at LLAMA sites. Only temporary enclosed structures (ex. frac tank) will be approved.

1. Will residual be temporarily stored at this LLAMA site prior to use: ☐ Yes ☐ No

   If you answered "yes", proceed to question 2. If you answered "no", the rest of Section H is not applicable, please proceed to Section I.

2. Does the residual to be temporarily stored at this LLAMA site meet the definition of a Marketable Residual Product pursuant to N.J.A.C. 7:14A-1.2: ☐ Yes ☐ No

   If you answered "yes", proceed to question 3. If you answered "no", the residual cannot be stored at the LLAMA site, please proceed to Section I.

3. Provide an explanation as to the need for residual storage at this site (use additional sheets if necessary): _____

   _____

   _____

   _____

   _____

   _____

4. Estimated length of storage time: _____

5. Method and location of storage: _____

   _____

   _____

   _____

   _____

   _____

   _____

   _____

   _____

6. Each temporary residual storage structure identified above shall provide for protection against: leakage (more than 0.05 gallons/hour) and/or bursting; improper or inadequate mixing; odors; overflow and/or spills; corrosivity; soil bearing deficiencies; and/or fire and/or combustion.

7. Where, in the judgement of the Department, submitted information is insufficient to adequately address the storage requirements listed above, a Professional Engineer may be required to certify that the temporary storage structure(s) complies with said requirements.

I. Cumulative Loadings and Remaining Allotments

Complete this part only if residual applied to this site is subject to the Cumulative Pollutant Loading Rates (CPLRs) in 40 CFR 503.13(b)2 as referenced at N.J.A.C. 7:14A-20.7(c)

1. Has bulk residual subject to CPLRs been previously applied to the site? ☐ Yes ☐ No
2. Provide the following information for every facility other than yours that is sending, or has sent, bulk residual subject to CPLRs to this site. If more than one such facility, attach additional pages as necessary.

   Name of facility: _____

   Facility contact: Name: _____

   Title: _____

   Phone: (_____) _____

   Facility Mailing Address.

   Street or P.O. Box: _____

   City or Town: _____ State: _____ Zip: _____

J. Public Notice

1. Attach a copy of the preparer's (residual source identified in Section B) approved notification plan that describes the form of advance public notice, which, at a minimum, will be supplied to all landowners and occupants adjacent to or abutting the proposed residual land application site.
2. Attach proof that the preparer provided public notice in accordance with their approved notification plan.

K. Municipal Clerk(s)

Attach proof (ex. Copy of Certified Return Receipt) that this application for a LLAMA and all of its attachments were submitted to the municipal clerk of the municipality(ies) where the residual land application site is proposed to be located.

L. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for purposely, knowingly, recklessly, or negligently submitting false information.

Signature of Officer: _____ Official Title:_____

Name of Office (print):_____ Telephone Number: (____) _____

Date Signed: _____