

1421 Hampshire Pike
Columbia, TN 38401

Mark Jordan
Tennessee Division of Water Resources
Enforcement and Compliance Section
Tennessee Tower, 11th Floor
312 Rosa Parks Avenue
Nashville, TN 37243

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a 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 knowing violations.

KHAMSAY SENG-CHANH

Khamsay Sengchanh

1-26-15

Name and title, print or type

Signature

Date

For: annual CAFO report submittal

Due: Between January 1 and February 15

NPDES Permit Number:

SOPC 0011

Reporting period (mm/dd/yyyy - mm/dd/yyyy)

01-01-14 - 12-31-14

Facility Name: NOY FARM

Address: 510 GANT Rd
SHELBYVILLE TN 37160

Phone Number: 931 205 8113

I. TYPE AND NUMBER OF ANIMALS.

Report the maximum number of each type of animal confined at this facility at any one time.

Type	Number in Open Confinement	Number Housed Under Roof
Mature Dairy Cows		
Dairy Heifers		
Veal Calves		
Other Cattle		
Swine (55 lbs or more)		
Swine (under 55 lbs)		
Horses		
Sheep or Lambs		
Turkeys		
Chickens (broilers)	290 400	8
Chickens (layers)		
Ducks		
Other (specify):		

II. MANURE, LITTER AND PROCESS WASTEWATER PRODUCTION.

Report the estimated amount of manure, litter and process wastewater that was generated at this facility in the 12-month period covered by this report.

- A. Amount of manure generated _____ tons
- B. Amount of litter generated 1800 tons
- C. Amount of process wastewater generated _____ gallons.

III. MANURE, LITTER AND PROCESS WASTEWATER TRANSFERRED TO OTHER PERSONS.

Report the estimated amount of manure, litter and process wastewater transferred to other persons in the 12-month period covered by this report.

- A. Amount of manure transferred _____ tons
- B. Amount of litter transferred 1800 tons
- C. Amount of process wastewater transferred _____ gallons

IV. LAND APPLICATION ACRES COVERED BY THE NUTRIENT MANAGEMENT PLAN.

Report the total number of acres that are covered by this facility's nutrient management plan. Include all land application acres covered by the nutrient management plan, whether or not they were used for land application during the 12-month period covered by this report.

Total number of land application acres covered by the nutrient management plan 534

V. TOTAL NUMBER OF ACRES USED FOR LAND APPLICATION OF MANURE, LITTER OR PROCESS WASTEWATER.

Report the total number of acres of land where manure, litter or process wastewater generated at this facility was spread. Include only application areas under the control of this CAFO facility.

Total number of acres used for land application 0

VI. SUMMARY OF DISCHARGES.

Provide a summary of each discharge of manure, litter and/or process wastewater from the production area(s) that occurred in the 12-month period covered by this report. Attach additional sheets, if needed.

N/A

Date ^a	Time ^b	Description ^c	Volume ^d

^a Date: The date of the discharge. If the discharge was detected after it happened, give an estimate of the date when the discharge occurred.

^b Time: The time of the discharge. If the discharge was detected after it happened, give an estimate of the time when the discharge occurred.

^c Description: Provide other relevant information about the discharge, including the source, cause, composition (e.g., emergency overflow of process wastewater from lagoon #2), and impacts observed (e.g., fish kill in waterbody).

^d Volume: Give an estimate of the number of gallons or tons of manure, litter or process wastewater discharged.

VII. NUTRIENT MANAGEMENT PLAN

Indicate whether the facility's nutrient management plan was either developed or approved by a certified nutrient management planner (e.g., a comprehensive nutrient management plan).

Was the current version of this facility's nutrient management plan prepared or approved by a certified nutrient management planner? Yes No

Print Name: KHAMSAY SENGCHANH Date: 1-26-15

Signature: *Khamsay Sengchanh*