

Schedule A – AGRICHEMICAL FACILITY PERMIT

Facility Name _____

Project Location _____
City Street Address County

This information is required for all Agrichemical Facility Permit Applications. The summary of specific parts of this information is requested on the back of this form.

1. LOCATION AREA MAP – Provide a location map of the area surrounding the facility. Identify the relative locations of the following on the map, or by notations, the distance and direction: a) All community wells within 1,000 feet and all private wells within 200 feet of the facility boundary; b) Surface water flow path to area lakes, streams or storm water drains; c) Residences, institutions, commercial businesses, and nearest city boundary; d) Notation of soil type and approximate groundwater depth at facility location. Preferably, this location map should be done on a copy from the U.S. Geological Survey Quadrangle Map, or the County Plat Book with adequate scale to show required details. NOTE: Setback requirements can be found in the Illinois Environmental Protection Act.
2. PLOT PLAN – Provide a plot plan showing all facility structures, storage tanks, facility well, connections to public water systems, storm sewers and drainage tile within property boundaries and use of adjacent property. Identify all containment structures and operational areas, including unloading, loading, mixing, repackaging, and equipment washing. Topography of property can be shown by contour lines or notation and arrows depicting surface water flow across and from facility. The plot plan should be drawn to a reasonable scale or adequately dimensioned.
3. WATER SUPPLY/WELL PROTECTION PLAN – Provide a schematic flow diagram of the facility water distribution system between facility well and/or public water system connection and all process or operational use points. Identify backflow protection (break-tank, fixed air gap, reduced pressure principle backflow valves) on the diagram.
4. OPERATIONAL AND MANAGEMENT PRACTICES PLAN – This requires a narrative description of the practices that will be employed at the facility for handling recovered materials, accumulated precipitation, and to minimize the volume of recovered materials generated. The following should be included:
 - a) List of types and amounts of agrichemicals handled and stored at the facility.
 - b) Methods of storage, reuse, or disposal and estimated quantity of solutions and solids recovered in the operational area containment and recovery system(s).
 - c) Methods for handling storm water collected in operational area and secondary containment systems. This may include practices to keep containment systems clean to prevent storm water contamination and special precaution taken to ensure contaminated storm water is not discharged. Define differences in practices employed off-season such as by-pass of operational area collection systems.
 - d) Methods utilized to minimize the collection or contamination of collected storm water, quantity of rinsates, solutions, and solids. These practices include use of pressure washers, rinsing and washing application equipment in the field, reducing operational spillage, containers to catch predictable spillage, diversion of roof and surface water flow, buildings or covers over containment systems, and management practices to minimize contamination of collected storm water.

Schedule A SUMMARY

Facility Name _____

1. LOCATION AREA MAP included in application: () Yes () No
Community Well(s) within 1,000 feet? () No () Yes, _____ Feet
Private Well(s) within 200 feet? () No () Yes, _____ Feet
Approximate Groundwater depth _____ Ft. Soil Type _____
Nearest Down Gradient Surface Water – Name of lake or stream and approximate distance: _____

Distance in feet to nearest: Residence _____, Municipality _____,
Hospital _____, Institution _____, Commercial Business _____

2. PLOT PLAN is included in application: () Yes () No.
Approximate size of facility property: _____ x _____ Feet

3. WATER SYSTEM PROTECTION Flow Diagram attached: () Yes () No
Facility well at location? () No () Yes, Depth _____ Feet
Connection to public water system? () No () Yes
Indicate Backflow Protection type, E = existing or P = planned, and Installation date(s):
____ Break Tank (____/____/____)
____ Fixed Air Gap (____/____/____)
____ Reduced Pressure Principle Backflow Valve(s) (____/____/____)

4. OPERATIONAL & MANAGEMENT PRACTICES PLAN attached: () Yes () No
List agrichemicals and approximate quantities handled and stored at facility:

Is your plan to reuse all recovered agrichemical materials for their original intended purpose and in accordance with the pesticide label when applicable? () Yes () No

If no, please explain: _____

Do you wash application vehicles at the agrichemical facility site? () Yes () No

Is a stormwater by-pass arrangement used or planned for your operational area containment? () Yes () No

If no, please explain: : _____

