

TWIN FALLS COUNTY  
PLANNING & ZONING ADMINISTRATION  
630 ADDISON AVENUE WEST, SUITE 1100, TWIN FALLS, IDAHO 83301  
PHONE (208) 734-9490 FAX (208) 733-9645

**ANIMAL FEEDING OPERATION**  
**PERMIT APPLICATION**

New: \_\_\_\_\_ Expanding: \_\_\_\_\_ Change of Species: \_\_\_\_\_

Date Received: \_\_\_\_\_

Application fee: \$ \_\_\_\_\_

**PROPERTY OWNER OF RECORD**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Cell or other #: \_\_\_\_\_

**APPLICANT / REPRESENTATIVE**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Cell or other #: \_\_\_\_\_

Name of Operation: \_\_\_\_\_

Address or general location: \_\_\_\_\_ City: \_\_\_\_\_

Total Acreage of operation (include all parcels): \_\_\_\_\_

**GENERAL INFORMATION**

1. Parcel #(s): \_\_\_\_\_ (i.e. RP10S18E150000 or RPOK3838999100 – obtained on  
\_\_\_\_\_ your tax information or from the County Assessor's Office  
\_\_\_\_\_ **Use separate page if needed.**

2. Copy of deed showing ownership including legal description (Obtained from the County Clerk's Office)

3. Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Acreage: \_\_\_\_\_

4. Zone: Agricultural: \_\_\_\_\_ Ag-Range Preservation: \_\_\_\_\_

5. Current use of the property: \_\_\_\_\_

6. Surrounding Land Use: \_\_\_\_\_

7. Animal Type applying for: \_\_\_\_\_ Animal Units: \_\_\_\_\_

8. Current Animal Type: \_\_\_\_\_ Animal Units: \_\_\_\_\_

(If expanding or changing species)

**9. The Following information must be provided as a hard copy and on disc:**

- A. **Evidence that a valid water right exists** or a copy of an application to appropriate water or an application to change the point of diversion, place, and/or nature of use of an existing water right that has been filed with the Idaho Department of Water Resources, which, if approved, would provide an adequate supply for the operation.
- B. **Vicinity map** a minimum size of eighteen inches by twenty four inches (18" x 24") with a minimum scale of one inch equals one hundred feet (1" = 100') showing the following information, which occurs within a one mile radius of the proposed operation:
  - a. Building locations and uses
  - b. Waste storage facilities
  - c. Areas for land application of solid and liquid waste
  - d. Flood zones or flood data for site and land application sites
  - e. Private domestic wells
  - f. Public water supply wells
  - g. Irrigation wells
  - h. Existing monitoring or injection wells
  - i. Irrigation canals and laterals
  - j. Rivers, streams, springs, reservoirs and wetlands
  - k. Animal feeding operations
  - l. Sinkholes of record
  - m. Seep tunnels of record
  - n. Topography at intervals of twenty feet (20')
- C. **Site Plan:** A registered surveyor or a civil engineer licensed in the state of Idaho shall be required to prepare and certify the site plan as accurate. The site plan will be a minimum size of eighteen inches by twenty four inches (18" x 24") with a minimum scale of one inch equals one hundred feet (1" = 100') showing the following:
  - a. Topography at intervals of twenty feet (20')
  - b. Dimensions, size and location of existing improvements, if any, including setbacks
  - c. Dimensions, size and location of proposed improvements, including, but not limited to, feed storage areas, confinement areas, waste storage areas, lagoons, treatment systems, truck/motor vehicle parking areas, etc.
  - d. Show compliance with setback requirements of the Zoning Ordinance (Section 8-17-7 or 8-17-8).
  - e. Existing and proposed wells
  - f. Spring(s) and surface watercourse(s)
  - g. Traffic access: Ingress, egress, and road widths to conform to uniform fire code twenty feet (20') minimum for emergency access
  - h. Public thoroughfares
  - i. Outdoor lighting
  - j. Surveyor's or engineer's stamp and signature
  - k. Sound, sight, odor and other environmental buffers between the site and nearby lands
  - l. A written description of the waste treatment system, including site criteria for land where the wastewater will be stored and/or applied, submitted by a registered professional engineer
  - m. Letter from canal company or water district relative to the proposed operation
  - n. Letter from local fire protection district addressing its ability to provide fire protection services
  - o. Letter from local highway district approving ingress and egress points on site plan and addressing the adequacy of public roads to serve the proposed facility
  - p. Preliminary nutrient management plan
  - q. Any additional information required for the siting advisory team review
  - r. A characterization of proposed operation including estimated amount of water per animal unit required and any land application site(s) owned, leased, operated or contracted by the applicant, which land is part of the nutrient management plan and includes the following information:

1. Annual precipitation as contained in the Idaho waste management guidelines
2. Soil characteristics from natural resources conservation service
3. Hydro-geological factors from Idaho Department of Water Resources, Idaho State Department of Agriculture and U.S. geological survey including:
  - (a) Depth to first water yielding zone and first encountered water;
  - (b) Direction of ground water movement and gradient;
  - (c) Sources and estimates of recharge;
  - (d) Seasonal variations in water level and recharge characteristics;
  - (e) Susceptibility to contamination; and
  - (f) Ground water/surface water relationships
4. Water quality data from Idaho Department of Environmental Quality, Idaho State Department of Agriculture, and U.S. geological survey including:
  - (a) Microorganisms (bacteria or single cell);
  - (b) Nutrients, including, but not limited to, nitrates and phosphorous;
  - (c) Pharmaceuticals and organic compounds
- s. Monthly prevailing winds information for a minimum of twelve (12) months
- t. Such other information as might be required by state law, federal law or specifically requested by the siting review team of the State of Idaho

For a complete list of required items refer to Twin Falls County Code Title 8, Chapter 17 or 18 depending upon the size of the operation.

It is the responsibility of the applicant to show compliance with any state regulations, recommendations, and guidelines.

I hereby apply for the above permit and acknowledge that I have read this application and hereby certify that the information I have provided is correct.

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Signature of Owner

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Date

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Signature of Applicant / Representative

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Date