

Part 2 — Technical Requirements

NRCB Natural Resources
Conservation Board

Application under the *Agricultural Operation Practices Act* for a confined feeding operation, manure collection area, and/or manure storage facility(ies)

NRCB USE ONLY	Application number	Legal land description
<input checked="" type="checkbox"/> Approval <input type="checkbox"/> Registration <input type="checkbox"/> Authorization <input type="checkbox"/> Amendment	<u>BA25013</u>	<u>NE 32-57-25 W4M</u>

APPLICATION DISCLOSURE

This information is collected under the authority of the *Agricultural Operation Practices Act* (AOPA), and is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. This information is public unless the NRCB grants a written request that certain sections remain private.

Any construction prior to obtaining an NRCB permit is an offence and is subject to enforcement action, including prosecution.

I, the applicant, or applicant's agent, have read and understand the statements above, and I acknowledge that the information provided in this application is true to the best of my knowledge.

April 29, 2025
Date of signing


Signature

Springside Poultry Ltd.
Corporate name (if applicable)

Elias Veldhuizen
Print name

GENERAL INFORMATION REQUIREMENTS

Proposed facilities: list all proposed confined feeding operation facilities and their dimensions. Indicate whether any of the proposed facilities are additions to existing facilities. (attach additional pages if needed)

Proposed facilities	Dimensions (m) (length, width, and depth)
Broiler breeder barn	51 x 13.4

Existing facilities: list **ALL** existing confined feeding operation facilities and their dimensions

Existing facilities	Dimensions (m) (length, width, and depth)	NRCB USE ONLY
Barn 2	85.6 x 13.4 x 3	
Barn 3	106 x 13.4 x 3	
Barn 4	74.7 x 26.8 x 3	

NRCB USE ONLY

Part 2 – Technical Requirements **NRCB** Natural Resources Conservation Board

NRCB Natural Resources
Conservation Board

Application under the *Agricultural Operation Practices Act* for a confined feeding operation, manure collection area, and/or manure storage facility(ies)

[illegible]

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Conservation Board

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If a new facility is replacing an old facility, please explain what will happen to the old facility and when. ☐ N/A

Construction completion date for proposed facilities Jan 1 2026

Additional information

We would like to build a hatching egg barn that could accomadate 4000 units

Livestock numbers: Complete only if livestock numbers are different from what was identified in the Part 1 application. Note: if livestock numbers increase in your Part 2 application, a new Part 1 application must be submitted which may result in a loss of priority for minimum distance separation (MDS).

Livestock category and type (Available in the Schedule 2 of the Part 2 Matters Regulation)	Permitted number	Proposed increase or decrease in number (if applicable)	Total
Breeders			35,000
Pullets			11,000

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Application under the *Agricultural Operation Practices Act* for a confined feeding operation, manure collection area, and/or manure storage facility(ies)

DECLARATION AND ACKNOWLEDGMENT OF APPLICANT CONCERNING *WATER ACT* LICENCE

issued by Alberta Environment and Protected Areas (EPA) for a confined feeding operation (CFO)

Date and sign one of the following four options

OPTION 1: Applying through the NRCB for both the AOPA permit and the *Water Act* licence

I **DO** want my water licence application coupled to my AOPA permit application.

Signed this ____ day of _____, 20____.

Signature of Applicant or Agent

OPTION 2: Processing the AOPA permit and *Water Act* licence separately

1. I (we) acknowledge that the CFO will need a new water licence from EPA under the *Water Act* for the development or activity proposed in this AOPA application.
2. I (we) request that the NRCB process the AOPA application **independently** of EPA's processing of the CFO's application for a water licence.
3. In making this request, I (we) recognize that, if this AOPA application is granted by the NRCB, the NRCB's decision will not be considered by EPA as improving or enhancing the CFO's eligibility for a water licence under the *Water Act*.
4. I (we) acknowledge that any construction or actions to populate the CFO with livestock pursuant to an AOPA permit in the absence of a *Water Act* licence will **not** be relevant to EPA's consideration of whether to grant the *Water Act* licence application.
5. I (we) acknowledge that any such construction or livestock populating will be at the CFO's sole risk if the *Water Act* licence application is denied or if the operation of the CFO is otherwise deemed to be in violation of the *Water Act*. This risk includes being required to depopulate the CFO and/or to cease further construction, or to remove "works" or "undertakings" (as defined in the *Water Act*).
6. **AS RELEVANT:** I (we) acknowledge that the CFO is located in the South Saskatchewan River Basin and that, pursuant to the *Bow, Oldman and South Saskatchewan River Basin Water Allocation Order* [Alta. Reg. 171/2007], this basin is currently closed to new surface water allocations.
7. **Provide:** Water licence application number(s) _____

Signed this ____ day of _____, 20____.

Signature of Applicant or Agent

OPTION 3: Additional water licence not required

1. I (we) declare that the CFO will not need a new licence from EPA under the *Water Act* for the development or activity proposed in this AOPA application.
2. **Provide:** Water license number(s) or water conveyance agreement details _____

Signed this ____ day of _____, 20____.

Signature of Applicant or Agent

Part 2 — Technical Requirements

Application under the *Agricultural Operation Practices Act* for a confined feeding operation, manure collection area, and/or manure storage facility(ies)

OPTION 4: Uncertain if *Water Act* licence is needed; acknowledgement of risk (for existing CFOs only)

1. At this time, I (we) do not know whether a new water licence is needed from EPA under the *Water Act* for the development or activity proposed in this AOPA application.
2. If a new *Water Act* licence is needed, I (we) request that the NRCB process the AOPA application **independently of** EPA's processing of the CFO's application for a water licence.
3. In making this request, I (we) recognize that, if this AOPA application is granted by the NRCB, the NRCB's decision will not be considered by EPA as improving or enhancing the CFO's eligibility for a water licence under the *Water Act*.
4. I (we) acknowledge that any construction or actions to populate the CFO with additional livestock pursuant to an AOPA permit in the absence of a *Water Act* licence will **not** be relevant to EPA's consideration of whether to grant my *Water Act* licence application, if a new water licence is needed.
5. I (we) acknowledge that any such construction or livestock increase will be at the CFO's sole risk if the *Water Act* licence application is denied or if the operation of the CFO is otherwise deemed to be in violation of the *Water Act*. This risk includes being required to depopulate the CFO and/or to cease further construction, or to remove "works" or "undertakings" (as defined in the *Water Act*).
6. **AS RELEVANT:** I (we) acknowledge that the CFO is located in the South Saskatchewan River Basin and that, pursuant to the *Bow, Oldman and South Saskatchewan River Basin Water Allocation Order* [Alta. Reg. 171/2007], this basin is currently closed to new surface water allocations.
7. **Provide:** Water license number(s) or water conveyance agreement details _____

Signed this 29 day of April 29, 2025.

Signature of Applicant or Agent

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Part 2 – Technical Requirements

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GENERAL ENVIRONMENTAL INFORMATION

(complete this section for the worst case of the existing facility which is the closest to water bodies or water wells and for each of the proposed facilities)

Facility description / name (as indicated on site plan)

Existing: Barn / Pad

Proposed 1: Breeder Barn

Proposed 2: _____

Proposed 3: _____

Facility and environmental risk information		Facilities				NRCB USE ONLY	
		Existing	Proposed 1	Proposed 2	Proposed 3	Meets requirements	Comments
Flood plain information	What is the elevation of the floor of the lowest manure storage or collection facility above the 1:25 year flood plain or the highest known flood level?	<input checked="" type="checkbox"/> >1 m <input type="checkbox"/> ≤ 1 m	<input checked="" type="checkbox"/> >1 m <input type="checkbox"/> ≤ 1 m	<input type="checkbox"/> >1 m <input type="checkbox"/> ≤ 1 m	<input type="checkbox"/> > 1 m <input type="checkbox"/> ≤ 1 m	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES with exemption	
Surface water information	How many springs are within 100 m of the manure storage facility or manure collection area?	0	0			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES with exemption	
	How many water wells are within 100 m of the manure storage facility or manure collection area?	0	0			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES with exemption	
	What is the shortest distance from the manure collection or storage facility to a surface water body? (e.g., lake, creek, slough, seasonal)	>100m	>100m			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES with exemption	
Groundwater information	What is the depth to the water table?	6m	6m			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES with exemption	
	What is the depth to the groundwater resource/aquifer you draw water from?	8.5m	8.5m			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES with exemption	

Additional information (attach supporting information, e.g. borehole logs, records, etc. you consider relevant to your application)



Water Well Drilling Report

View in Imperial **Export to Excel**

GIC Well ID 1755045
GoA Well Tag No.
Drilling Company Well ID
Date Report Received

The driller supplies the data contained in this report. The Province disclaims responsibility for its accuracy. The information on this report will be retained in a public database.

GOWN ID

Well Identification and Location										Measurement in Metric	
Owner Name		Address			Town		Province		Country		Postal Code
VELDHUIZEN, ERIC		RR 1 SITE 2 BOX 21			LEGAL		AB		CA		T0G 1L0
Location	1/4 or LSD	SEC	TWP	RGE	W of MER	Lot	Block	Plan	Additional Description		
	NE	32	57	25	4						
Measured from Boundary of					GPS Coordinates in Decimal Degrees (NAD 83)					Elevation	
_____ m from					Latitude 53.974500 Longitude -113.876000					_____ m	
_____ m from					How Location Obtained					How Elevation Obtained	
					Not Verified					Not Obtained	

Drilling Information	
Method of Drilling Bored	Type of Work New Well
Proposed Well Use Domestic	

Formation Log			Measurement in Metric	
Depth from ground level (m)	Water Bearing	Lithology Description		
3.96		Tan Clay		
5.49		Blue Clay		
8.23		Shale		
8.53	Yes	Water Bearing Coal		
10.06		Shale		
10.36	Yes	Water Bearing Coal		
10.97		Shale		
11.46	Yes	Water Bearing Coal		
22.25		Gray Shale		
23.77		Brown Shale		
24.99		Shale		
26.82		Coal		
27.43		Shale		

Yield Test Summary			Measurement in Metric	
Recommended Pump Rate	45.46 L/min			
Test Date	Water Removal Rate (L/min)	Static Water Level (m)		
2006/10/20	318.23	5.49		

Well Completion			Measurement in Metric	
Total Depth Drilled	Finished Well Depth	Start Date	End Date	
27.43 m		2006/10/20	2006/10/23	
Borehole				
Diameter (cm)	From (m)	To (m)		
83.82	0.00	27.43		
Surface Casing (if applicable)		Well Casing/Liner		
Galvanized Steel		Unknown		
Size OD :	64.77 cm	Size OD :		
Wall Thickness :	0.160 cm	Wall Thickness :		
Bottom at :	27.43 m	Top at :		
		Bottom at :		
Perforations				
From (m)	To (m)	Diameter or Slot Width (cm)	Slot Length (cm)	Hole or Slot Interval (cm)
7.92	11.58	0.635		15.24
Performed by Machine				
Annular Seal Clay Cap				
Placed from 0.00 m to 6.40 m				
Amount				
Other Seals				
Type Bentonite Chips/Tabl				At (m) 7.62
Screen Type				
Size OD : cm				
From (m)		To (m)	Slot Size (cm)	
Attachment				
Top Fittings		Bottom Fittings		
Pack				
Type Natural		Grain Size 0.31		
Amount 6.00 Yards				

Contractor Certification	
Name of Journeyman responsible for drilling/construction of well ROBERT UHRYN	Certification No 3496AD
Company Name TOWN & COUNTRY WATER WELL BORING LTD.	Copy of Well report provided to owner Date approval holder signed



Water Well Drilling Report

View in Imperial **Export to Excel**

GIC Well ID 1755045

GoA Well Tag No.

Drilling Company Well ID

Date Report Received

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GOWN ID

Well Identification and Location										Measurement in Metric	
Owner Name		Address				Town		Province		Country	Postal Code
VELDHUIZEN, ERIC		RR 1 SITE 2 BOX 21				LEGAL		AB		CA	T0G 1L0
Location	1/4 or LSD	SEC	TWP	RGE	W of MER	Lot	Block	Plan	Additional Description		
	NE	32	57	25	4						
Measured from Boundary of					GPS Coordinates in Decimal Degrees (NAD 83)					Elevation	
_____ m from					Latitude 53.974500 Longitude -113.676000					_____ m	
_____ m from					How Location Obtained					How Elevation Obtained	
					Not Verified					Not Obtained	

Additional Information										Measurement in Metric	
Distance From Top of Casing to Ground Level										60.96 cm	
Is Artesian Flow										Is Flow Control Installed	
Rate _____ L/min										Describe _____	
Recommended Pump Rate										45.46 L/min	
Recommended Pump Intake Depth (From TOC)										25.30 m	
Pump Installed										Yes	
Type										SUB @ 83 FEET.	
Depth										m	
Make										240 VOLT	
H.P.											
Model (Output Rating)											
Did you Encounter Saline Water (>4000 ppm TDS)										Depth	
Gas										m	
Well Disinfected Upon Completion											
Remedial Action Taken.										Geophysical Log Taken	
Submitted to ESRD											
Sample Collected for Potability										Submitted to ESRD	
Additional Comments on Well											

Yield Test			Taken From Ground Level		Measurement in Metric	
			Depth to water level			
Test Date	Start Time	Static Water Level	Pumping (m)	Elapsed Time	Recovery (m)	
2006/10/20	12:00 AM	5.49 m		Minutes:Sec		
Method of Water Removal Type <u>Bailer</u> Removal Rate <u>318.23 L/min</u> Depth Withdrawn From <u>7.92 m</u> If water removal period was < 2 hours, explain why			5.49	0:00	7.92	
				1:00	7.47	
				2:00	7.01	
				3:00	6.55	
				4:00	6.10	
				5:00	5.64	

Water Diverted for Drilling		
Water Source	Amount Taken	Diversion Date & Time
	L	

Contractor Certification	
Name of Journeyman responsible for drilling/construction of well	Certification No
ROBERT UHRYN	3496AD
Company Name	Copy of Well report provided to owner
TOWN & COUNTRY WATER WELL BORING LTD.	Date approval holder signed



Water Well Drilling Report

View in Imperial **Export to Excel**

GIC Well ID 260139
GoA Well Tag No.
Drilling Company Well ID
Date Report Received 1995/09/21

The driller supplies the data contained in this report. The Province disclaims responsibility for its accuracy. The information on this report will be retained in a public database.

GOWN ID

Well Identification and Location										Measurement in Metric	
Owner Name		Address			Town		Province		Country		Postal Code
MICHAUD, CLAUDE		LEGAL									
Location	1/4 or LSD	SEC	TWP	RGE	W of MER	Lot	Block	Plan	Additional Description		
	NE	32	57	25	4						
Measured from Boundary of					GPS Coordinates in Decimal Degrees (NAD 83)					Elevation _____ m	
_____ m from					Latitude 53.974512 Longitude -113.675955					How Elevation Obtained	
_____ m from					How Location Obtained					Not Obtained	
					Map						

Drilling Information	
Method of Drilling Rotary	Type of Work New Well
Proposed Well Use Stock	

Formation Log			Measurement in Metric	
Depth from ground level (m)	Water Bearing	Lithology Description		
3.96		Clay		
9.14		Gray Clay		
10.97		Gray Shale		
12.19		Gray Sandy Shale		
14.63		Gray Sandstone		
14.94		Coal		
26.21		Brownish Gray Shale		
26.52		Coal		
27.13		Gray Shale		
29.87		Gray Sandstone		
32.00		Gray Shale		
32.61		Coal		
35.05		Shale		
35.97		Gray Sandstone		
36.27		Coal		
36.58		Shale		

Yield Test Summary			Measurement in Metric	
Recommended Pump Rate 18.18 L/min				
Test Date	Water Removal Rate (L/min)	Static Water Level (m)		
1995/08/30	18.18	10.88		

Well Completion				Measurement in Metric	
Total Depth Drilled	Finished Well Depth	Start Date	End Date		
36.58 m		1995/08/25	1995/08/25		
Borehole					
Diameter (cm)		From (m)	To (m)		
0.00		0.00	36.58		
Surface Casing (if applicable)			Well Casing/Liner		
Plastic			Plastic		
Size OD : 15.24 cm		Size OD : 11.43 cm			
Wall Thickness : 1.270 cm		Wall Thickness : 0.635 cm			
Bottom at : 24.38 m		Top at : 24.08 m			
		Bottom at : 36.58 m			
Perforations					
From (m)		To (m)	Diameter or Slot Width (cm)	Slot Length (cm)	Hole or Slot Interval (cm)
26.21		35.97	0.318		30.48
Perforated by Saw					
Annular Seal Shale Trap & Bentonite					
Placed from 0.00 m to 24.38 m					
Amount _____					
Other Seals					
Type _____ At (m) _____					
Screen Type					
Size OD : 0.00 cm					
From (m)		To (m)	Slot Size (cm)		
Attachment _____					
Top Fittings _____			Bottom Fittings _____		
Pack					
Type _____ Grain Size _____					
Amount _____					

Contractor Certification	
Name of Journeyman responsible for drilling/construction of well	Certification No
UNKNOWN NA DRILLER	1
Company Name	Copy of Well report provided to owner
MAR-WAYNE WATER WELL DRILLING SERVICES LTD.	Date approval holder signed



Water Well Drilling Report

View in Imperial **Export to Excel**

GIC Well ID 260139
GoA Well Tag No.
Drilling Company Well ID
Date Report Received 1995/09/21

The driller supplies the data contained in this report. The Province disclaims responsibility for its accuracy. The information on this report will be retained in a public database.

GOWN ID

Well Identification and Location										Measurement in Metric	
Owner Name		Address		Town		Province		Country		Postal Code	
MICHAUD, CLAUDE		LEGAL									
Location	1/4 or LSD	SEC	TWP	RGE	W of MER	Lot	Block	Plan	Additional Description		
	NE	32	57	25	4						
Measured from Boundary of					GPS Coordinates in Decimal Degrees (NAD 83)					Elevation _____ m	
_____ m from					Latitude 53.974512 Longitude -113.675955					How Elevation Obtained	
_____ m from					How Location Obtained					Not Obtained	
					Map						

Additional Information										Measurement in Metric
Distance From Top of Casing to Ground Level _____ cm										
Is Artesian Flow _____										
Rate _____ L/min										
Is Flow Control Installed _____										
Describe _____										
Recommended Pump Rate 18.18 L/min										
Pump Installed _____										
Depth _____ m										
Recommended Pump Intake Depth (From TOC) 22.86 m										
Type _____										
Make _____										
H.P. _____										
Model (Output Rating) _____										
Did you Encounter Saline Water (>4000 ppm TDS) _____										
Depth _____ m										
Well Disinfected Upon Completion _____										
Gas _____										
Depth _____ m										
Geophysical Log Taken _____										
Remedial Action Taken _____										
Submitted to ESRD _____										
Sample Collected for Potability _____										
Submitted to ESRD _____										
Additional Comments on Well _____										
DRILLER REPORTS DISTANCE FROM TOP OF CASING TO GROUND LEVEL: 34 CM.										

Yield Test			Taken From Ground Level		Measurement in Metric
			Depth to water level		
Test Date	Start Time	Static Water Level	Pumping (m)	Elapsed Time	Recovery (m)
1995/08/30	12:00 AM	10.88 m		Minutes:Sec	
Method of Water Removal Type Pump Removal Rate 18.18 L/min Depth Withdrawn From 22.86 m If water removal period was < 2 hours, explain why				0:00	21.00
				1:00	18.75
				2:00	16.75
				3:00	15.40
				4:00	14.38
				5:00	13.37
				6:00	12.28
				7:00	12.20
				8:00	11.90
				9:00	11.70
				10:00	11.60
				12:00	11.45
	14:00	11.38			
	16:00	11.32			
	20:00	11.28			

Water Diverted for Drilling		
Water Source	Amount Taken	Diversion Date & Time
	L	

Contractor Certification	
Name of Journeyman responsible for drilling/construction of well	Certification No
UNKNOWN NA DRILLER	1
Company Name	Copy of Well report provided to owner
MAR-WAYNE WATER WELL DRILLING SERVICES LTD.	Date approval holder signed

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DISTANCE OF ANY MANURE STORAGE FACILITY (EXISTING OR PROPOSED) TO NEIGHBOURING RESIDENCES

			NRCB USE ONLY				
Neighbour name(s)	Legal land description	Distance (m)	Zoning (LUB) category	MDS category (1-4)	Distance (m)	Waiver attached (if required)	Meets regulations
① Scott Goerz	SE-5-58-25-W4	>300m					
② Chauvet E&C	SW-5-58-25-W4	>1080m					
③ Van Houten	SW4-58-25-W4	>400m					
④ De Champlain	NW-33-57-25-W4	>400m					
⑤ Lafleche C&M	SW-33-57-25-W4	>680m					

LAND BASE FOR MANURE AND COMPOST APPLICATION (complete only if an increase in livestock or manure production will occur)

				NRCB USE ONLY	
Name of land owner(s)*	Legal land description	Usable area** (ha)	Soil zone ***	Usable area (ha)	Agreement attached (if required)
Total					

* If you are **not** the registered landowner, you must attach copies of land use agreements signed by all landowners.

** Available manure spreading area (excluding setback areas from residences, common bodies of water, water wells, etc. as identified in Agdex 096-5)

*** Brown, dark brown, black, grey wooded, or irrigated

Additional information (attach any additional information as required)

Untitled Map

Write a description for your map.

Legend



Google Earth

Image © 2025 Airbus

Operator/operation name Erik Veldhuizen Springside Poultry Ltd

Address 57532 Rge Rd 254 Sturgeon ^{County} Postal Code T0A 1L1

Legal land location of confined feeding operation NE-32-057-25-W4

I have requested the residence owner(s) named below to waive the required minimum distance separation (MDS) to their residence for the *Agricultural Operation Practices Act* (AOPA) permit application identified above. In making this request, I have provided the owner(s) with an opportunity to review my permit application and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance Separation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained

- The MDS requirement set out in section 3 of the Standards and Administration Regulation of AOPA. I have advised the owner(s) that section 3(6)(a) of the Standards and Administration Regulation allows this requirement to be waived by the owners of residences, if they agree in writing to grant a waiver.
- That my proposed development does not meet the required MDS to the owner's residence, and
- That this waiver applies only to this application as described. An increase in livestock capacity, annual manure production, level of odour production, change to the site plan or change to a facility that would increase the MDS would require a new waiver.

Following is a summary of the proposed development:

- The current scope of my confined feeding operation (CFO), including the type, number, and category of livestock, if any, is

Breeder breeder 27 000 units
11 000 pullets

- My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:

Increase 8000 units

- The proposed new CFO facility(ies), or changes to the existing CFO facilities, including manure storage, manure storage volume and any other pertinent details, if any, are (attach a site layout plan if available):

Construct new barn

I, the applicant, understand that the waiver is not valid unless ALL registered owners of the residence sign this document.

Permit Applicant: _____

Signature

Date

29-April 2025

Residence owner(s) to initial: _____

ALL Names on land title Scott Goetz

Legal land location of residence(s) Berkson Quad Sec Twp Rge Mer
SE corner SE 5 S8 25 4

Telephone number(s) [REDACTED]

Email address(es) [REDACTED]

Address(es)* and Postal code(s)* [REDACTED]

Please note that personal contact information is for NRCB use ONLY and not publicly released

I am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address

- I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers".
- I/we have discussed this application with the applicant and understand its potential impacts to our residence(s).
- I/we understand that the application **does not** meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA).
- I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;
- I/we are not obligated to waive the MDS requirement to our residence(s).
- I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver by providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Separation (MDS) Waivers" Fact Sheet, and
- I/we understand that this waiver is a public document.

Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to

Application number BA25013

Signatures of all residence owner(s) on title

Scott Goetz

Printed names of all residence owner(s) on title

Date May 08, 2025

Manure Transfer Agreement

Springdale Poultry LTD of Sturgeon County, Alberta
(CFO Farm Name) (Area/Town)

For a Confined Feeding Operation Located at, or to be located at:

NE - 32 - 57 - 25 - West of 4 Meridian
(LSD) (Qtr) (Sec) (T) (R) (4, 5, or 6)

This agreement between

Springdale Poultry LTD of 57532 RD 254, Sturgeon, AB, T0G 1L1
(CFO Farm Name) (Address) (Town) (Province) (Postal Code)

and

Visscher Farms Ltd of Box 510, Legal, AB, T0G 1L1
(Party transferring/receiving manure) (Address) (Town) (Province) (Postal Code)

is for the intent that the above party agrees to pick up and remove the manure, composting materials or compost associated with _____
(CFO Farm Name)

Term of Agreement:

Start Date: 23-01-17, 2017
 End Date: _____, 2017

Or

- ☒ One year from the start date
☒ Automatic renewal with 1 year notice of termination

Note: If this is for an application for a permit pertaining to the *Agricultural Operation Practices Act (AOPA)*, the party transferring or receiving the manure shall manage the manure, composting materials or compost according to the AOPA and its associated regulations.

CFO Farm:

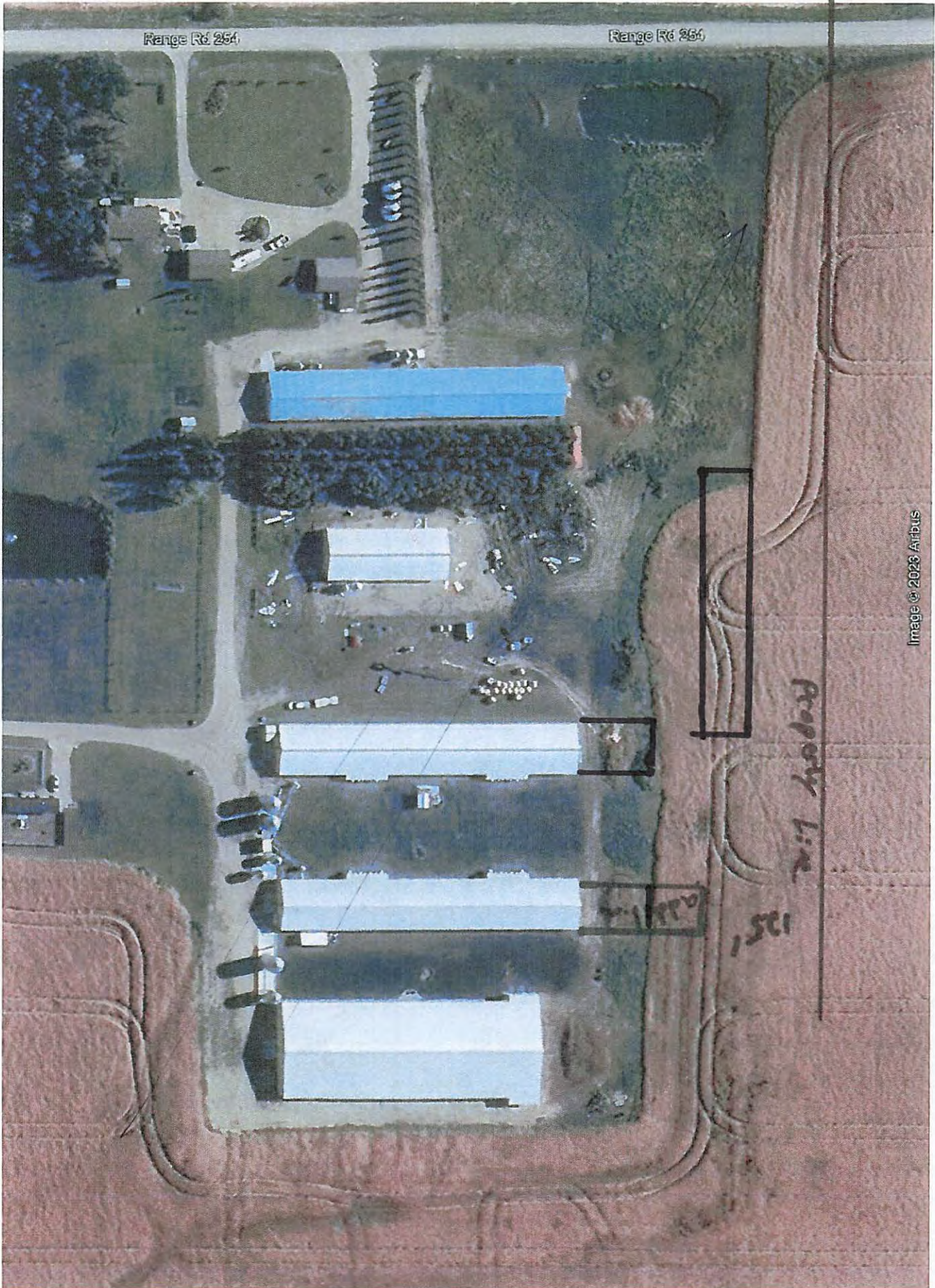
Date: Jan 20 2017 Print Name: Springdale Signature: _____

Date: _____ Print Name: _____ Signature: _____

Party transferring/receiving manure:

Date: Jan 20 2017 Print Name: Visscher Farms Ltd Signature: _____

Date: _____ Print Name: _____ Signature: _____



Part 2 — Technical Requirements

Application under the *Agricultural Operation Practices Act* for a confined feeding operation, manure collection area and/or manure storage facility(ies)

SOLID MANURE, COMPOST, & COMPOSTING MATERIALS: Barns, feedlots, & storage facilities - Concrete liner

(complete a copy of this section for **EACH** barn, feedlot, and storage facility for solid manure, composting materials, or compost with a concrete liner)

Facility description / name (as indicated on site plan)

1. Breeder barn
- 2.

Manure storage capacity

	Length (m)	Width (m)	Depth below grade to the bottom of the liner (m)	NRCB USE ONLY Estimated storage capacity (m ³)
1.	51	13.4	0	
2.				
TOTAL CAPACITY				

☐ I plan to use a short-term solid manure storage (STMS) as part of my manure storage and handling plan for this CFO. The AOPA requirements for STMS are set out in the NRCB

Surface water control systems

Describe the run-on and runoff control system

under roof eavestrough

Liner protection

Describe how the physical integrity of the liner will be maintained

Monitor for cracks and fix

NRCB USE ONLY

Requirements met: ☐ YES ☐ NO

Part 2 — Technical Requirements

Application under the *Agricultural Operation Practices Act* for a confined feeding operation, manure collection area and/or manure storage facility(ies)

SOLID MANURE, COMPOST, & COMPOSTING MATERIALS: Barns, feedlots, & storage facilities - Concrete liner (cont.)

Concrete liner details

Concrete thickness 4 inch	Method of sulphate protection: T50
Concrete strength 25 MPA	Concrete reinforcement size and spacing 12" o/c

Concrete requirements can be found in Technical Guideline Agdex 096-93

Guideline minimums:

Solid manure: 25MPa (D)

Solid manure (wet): 30MPa (C)

Method of sulphate protection:

Type 50 or Type 10 with fly ash or equivalent

NRCB USE ONLY

Requirements met: ☐ YES ☐ NO

Condition required: ☐ YES ☐ NO

Report attached: ☐ YES ☐ NO

Additional information (attach as required)

NRCB USE ONLY

Nine month manure storage volume requirements met ☐ YES ☐ YES With STMS ☐ NO

Depth to water table: _____ Requirements met: ☐ YES ☐ NO

Depth to Uppermost groundwater resource: _____ Requirements met: ☐ YES ☐ NO

ERST completed: ☐ see ERST page for details

Surface water control systems

Requirements met: ☐ YES ☐ NO Details/comments:

Concrete liner details

Leakage detection system required: ☐ YES ☐ NO If yes, please explain why.