

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)

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.

Date of signing <u>April 29, 2025</u>	Signature
Corporate name (if applicable) <u>Springside Poultry Ltd.</u>	Print name <u>Elias Veldhuizen</u>

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)
<u>Broiler breeder barn</u>	<u>51 x 13.4</u>

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

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

NRCB USE ONLY

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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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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

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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 _____

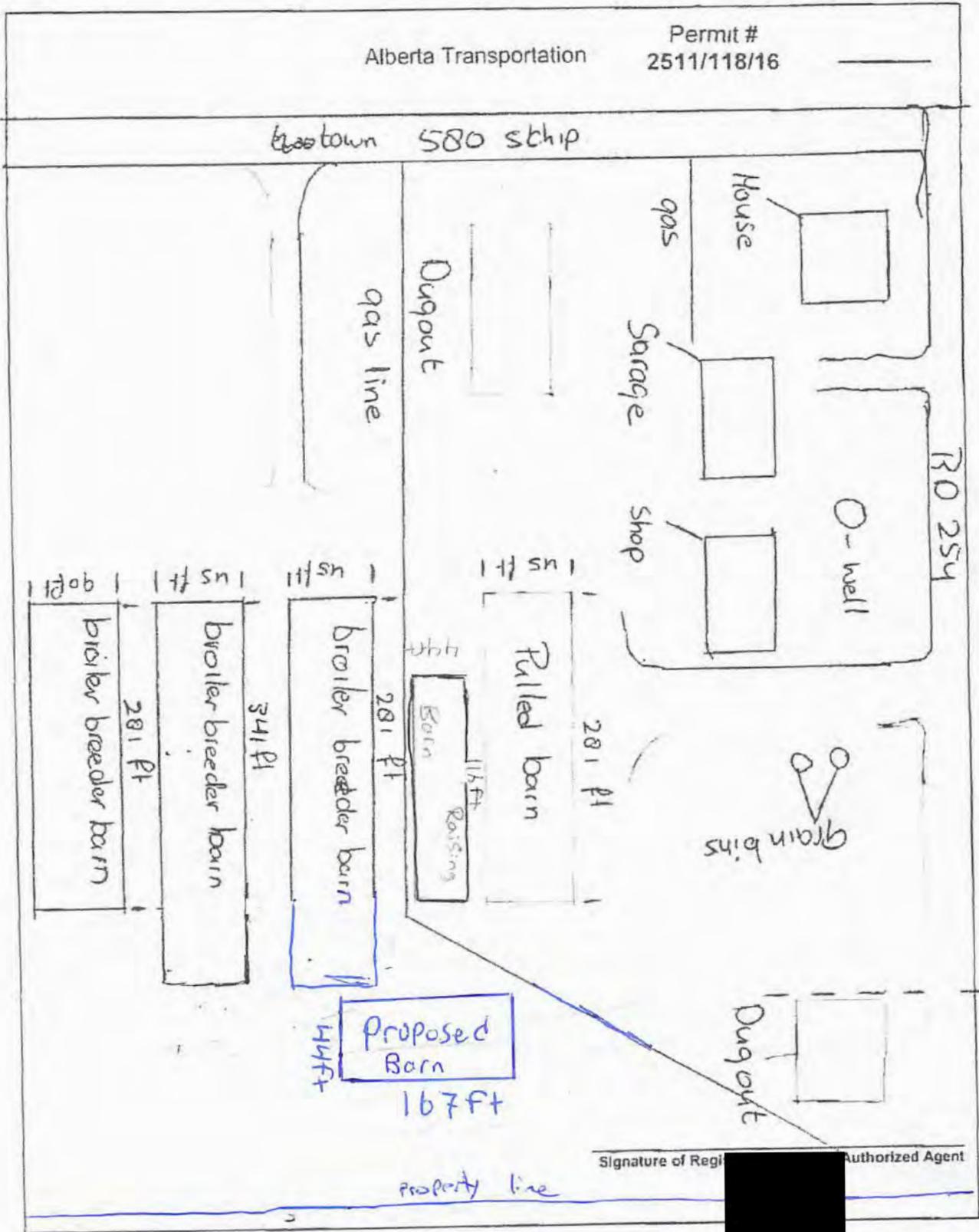
Signed this 29 day of April 29, 2025.

Signature of Applicant or Agent

ROADSIDE DEVELOPMENT APPLICATION FOR DEVELOPMENT NEAR A PROVINCIAL HIGHWAY

Alberta Transportation

Permit # 2511/118/16



Signature of Registered Authorized Agent



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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)

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
_____ 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 : _____ cm		
Wall Thickness :	0.160 cm	Wall Thickness : _____ cm		
Bottom at :	27.43 m	Top at : _____ m		
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				At (m)
Bentonite Chips/Tabl				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 VELDHUIZEN, ERIC		Address RR 1 SITE 2 BOX 21				Town LEGAL		Province AB	Country CA	Postal Code 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		
_____ m from					Latitude <u>53.974500</u> Longitude <u>-113.676000</u>				How Elevation Obtained		
_____ m from					How Location Obtained				Not Obtained		
					Not Verified						

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					Pump Installed Yes		Depth _____ m				
Recommended Pump Intake Depth (From TOC) _____ 25.30 m					Type SUB @ 83 FEET.		Make 240 VOLT		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 Taker. _____					Submitted to ESRD _____						
Additional Comments on Well _____					Sample Collected for Potability _____			Submitted to ESRD _____			

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

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

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 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 <u>53.974512</u> Longitude <u>-113.675955</u>				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	<u>18.18 L/min</u>		
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 :	<u>15.24 cm</u>	Size OD :	<u>11.43 cm</u>	
Wall Thickness :	<u>1.270 cm</u>	Wall Thickness :	<u>0.635 cm</u>	
Bottom at :	<u>24.38 m</u>	Top at :	<u>24.08 m</u>	
		Bottom at :	<u>36.58 m</u>	
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 <u>Saw</u>				
Annular Seal <u>Shale Trap & Bentonite</u>				
Placed from <u>0.00 m</u> to <u>24.38 m</u>				
Amount _____				
Other Seals				
Type		At (m)		

Screen Type				
Size OD : <u>0.00 cm</u>				
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 UNKNOWN NA DRILLER	Certification No 1
Company Name MAR-WAYNE WATER WELL DRILLING SERVICES 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 260139
GoA Well Tag No.
Drilling Company Well ID
Date Report Received 1995/09/21

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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 <u>53.974512</u> Longitude <u>-113.675955</u>					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 _____					Is Flow Control Installed _____						
Rate _____ L/min					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 Taker. _____					Submitted to ESRD _____						
Additional Comments on Well _____					Sample Collected for Potability _____					Submitted to ESRD _____	
DRILLER REPORTS DISTANCE FROM TOP OF CASING TO GROUND LEVEL: 34 CM.											

Yield Test			Taken From Ground Level		Measurement in Metric	
Test Date	Start Time	Static Water Level	Depth to water level			
1995/08/30	12:00 AM	10.88 m	Pumping (m)	Elapsed Time	Recovery (m)	
				Minutes:Sec		
Method of Water Removal				0:00	21.00	
Type Pump _____				1:00	18.75	
Removal Rate _____ 18.18 L/min				2:00	16.75	
Depth Withdrawn From _____ 22.86 m				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	
If water removal period was < 2 hours, explain why						

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

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

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

Neighbour name(s)	Legal land description	Distance (m)	NRCB USE ONLY				
			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 ESC	SW-5-58-25-W4	>1080m					
③ Van Houten	SW4-58-25-W4	>400 m					
④ De Champlain	NW-33-57-25-W4	>400m					
⑤ Lafleche CSM	SW-33-57-25-W4	>680 m					

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

Name of land owner(s)*	Legal land description	Usable area** (ha)	Soil zone ***	NRCB USE ONLY	
				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 T0u 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

Broiler 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:  Date 29-April 2025

Signature

Residence owner(s) to initial: 

ALL Names on land title Scott Goetz

Legal land location of residence(s) Belton 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 [REDACTED]

Scott Goetz

Printed names of all residence owner(s) on title

Date May 08, 2025

Manure Transfer Agreement

Springside 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

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

and

Vesscher Farms Ltd of Box 510, Legal, AB, T0B 1L0
(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, 20 17
End Date: _____, 20 _____

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:

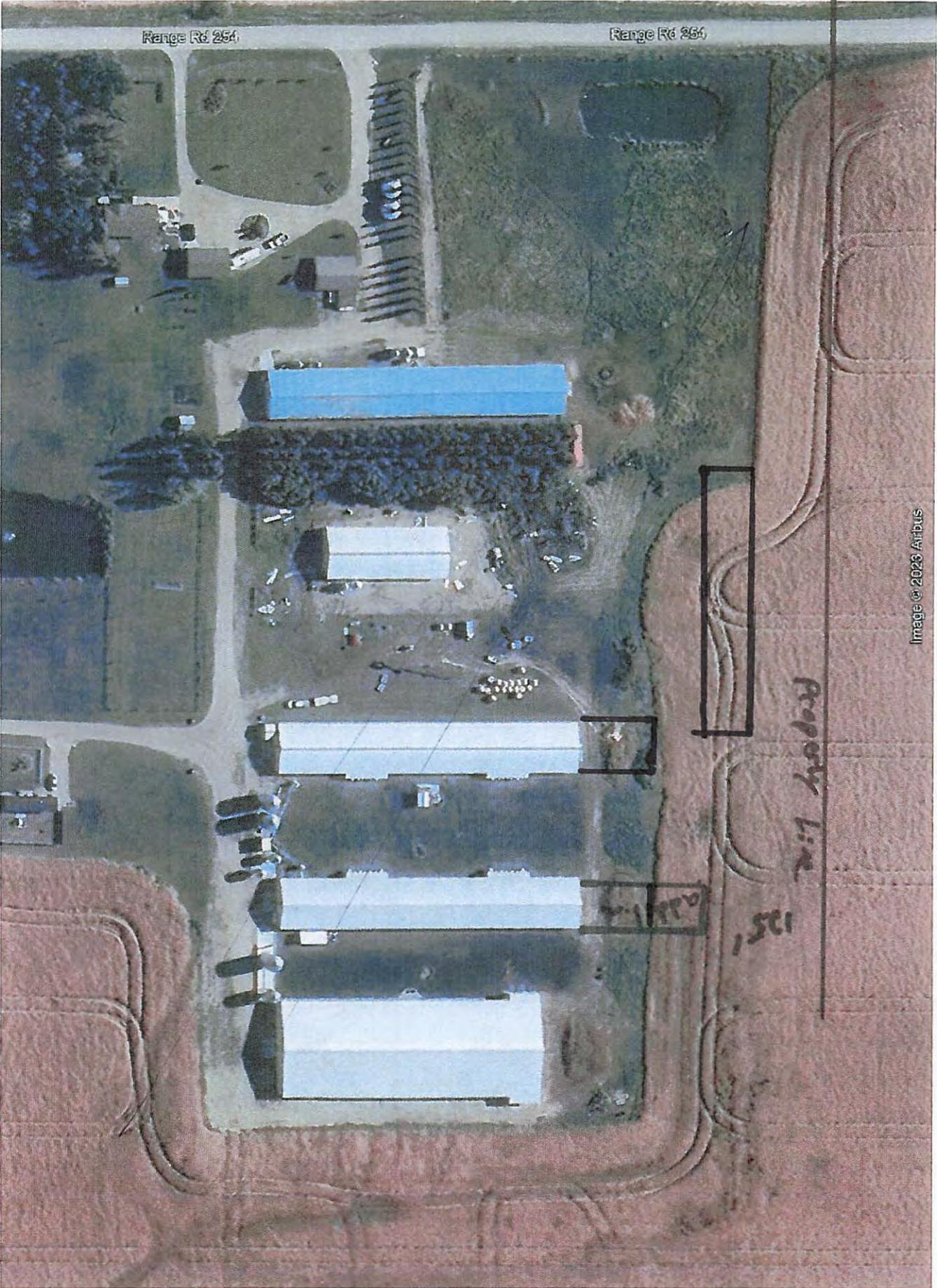
Date: Jan 20 2017 Print Name: Springside Signature: [Redacted]

Date: _____ Print Name: _____ Signature: _____

Party transferring/receiving manure:

Date: Jan 20 2017 Print Name: Vesscher Farms Ltd Signature: [Redacted]

Date: _____ Print Name: _____ Signature: _____



Range Rd 254

Range Rd 254

Image © 2023 Airbus

Property Line

125'

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.