#### **Technical Document BA25007**

#### 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)

X Approval			Application number	Legal land	description
☐ Approval ☐ Registration ☐ Authorization _		BA25007	SE 33-61-3 W5M		
☐ Amendmen	Complete Complete State				
Company of the Party Control o	N DISCLOSU	RE			
provisions of the		nation and Protection o	ricultural Operation Practices Act (AO f Privacy Act. This information is publ		
			is an offence and is subject to en	forcement ac	tion, including
		t, have read and under o the best of my knowl	rstand the statements above, and I a ledge.	cknowledge th	at the information
April as	3, 2025		Signature ()		
12 11 1	F - 1		- T / 1 = 1		
Corporate name (	if applicable)	ta.	Print name	ersma	
corporate name (	п аррпсавіе)		Print name		
SENERAL INF	ORMATION RE	QUIREMENTS			
	All the state of t		operation facilities and their dimension	ns. Indicate wh	ether any of the
and the state of	No.	existing facilities. (att	ach additional pages if needed)	Dim	ensions (m)
Proposed facil	ities				vidth, and depth)
Existing facilit	ies: list ALL existi	ng confined feeding op	peration facilities and their dimension:	s	
Existing facilit	And the second	ng confined feeding op	peration facilities and their dimensions  Dimensions (I	m)	NRCB USE ONLY
A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	And the second	ng confined feeding op	Dimensions (	m) depth)	NRCB USE ONLY
Existing facilit	ies	ng confined feeding op	Dimensions (i	m) depth)	NRCB USE ONLY
Existing facilit	Barn	ng confined feeding op	Dimensions (i	m) depth)	NRCB USE ONLY



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

If a new facility is replacing an old facility, please explain what will happen to the old facility and when. $\Box$ N/A
Increased numbers for permitted barn.
Construction completion date for proposed facilities
Additional information
Applicants existing barn is a liquid manure system, switching from liquid to solid in AOPA is considered a decrease in odour and manure production. Using the AOPA change in livestock type calculator the applicant is permitted to convert the 17,408 layers (liquid manure) to 28,485 layers (solid manure belt cage). Under AOPA applicants are not required to notify the NRCB to make these changes in category.
Previously issued Authorization BA23001 was approved to replace the existing barn with a new barn.

**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
Layers	17,408	12,832	30, 240



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. Provide: Water license number(s) or water conveyance agreement details \_\_\_\_\_ Signed this \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_.

Signature of Applicant or Agent



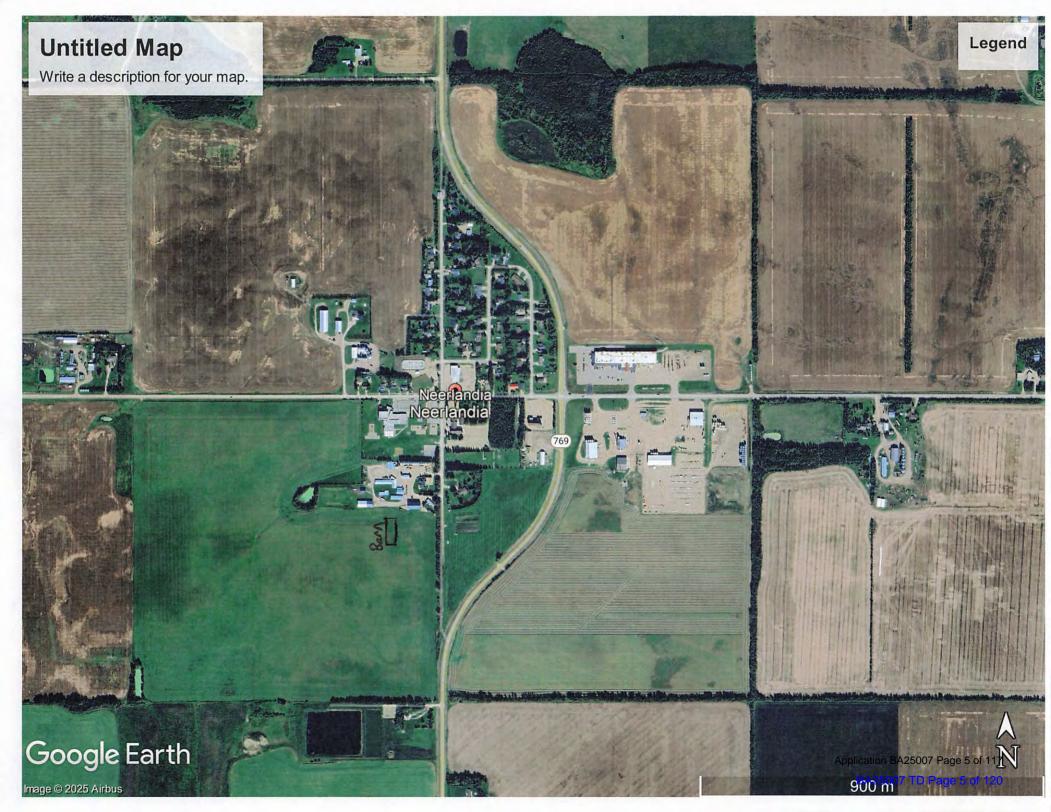
Application under the Agricultural Operation Practices Act for a confined feeding operation, manure collection area, and/or manure storage facility(ies)

#### 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, Oldinary [Alta. Reg. 171/2007], this basin is 7. <b>Provide</b> : Water license number(s)	currently closed to	
Signed this 28 day of April	, 20 <u>25</u>	// Signature of Applicant or Agent

BA25007 TD Page 4 of 120





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)

ropose	u z:			Propose	d 3:		
Facili	ty and environmental risk		Faci	lities			NRCB USE ONLY
information		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?	□ >1 m □ ≤1 m	□ >1 m □ ≤ 1 m	☐ >1 m ☐ ≤1 m	□ > 1 m □ ≤ 1 m	YES NO NO YES with exemption	Not in flood plain
n fer	How many springs are within 100 m of the manure storage facility or manure collection area?	0				YES NO YES with exemption	None known
Surface water information	How many water wells are within 100 m of the manure storage facility or manure collection area?	0				YES NO YES with exemption	Confirmed
. S	What is the shortest distance from the manure collection or storage facility to a surface water body? (e.g., lake, creek, slough, seasonal)	331 m				YES NO YES with exemption	229 m dugout
Groundwater	What is the depth to the water table?					YES NO YES with exemption	Confirmed
Ground	What is the depth to the groundwater resource/aquifer you draw water from?	500 Ft.				YES NO YES with	67.67 m ID 373467

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

Applicant is not completing new construction as a part of this application.



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

NRCB USE ONLY	AND SURFACE	WATER INFORMATI	ON						
		not within 100m of ap							
Well IDs:									
-									
Surface water related concerns from directly affected parties or referral agencies:									
Groundwater related concerns from directly affected parties or referral agencies:									
Water wells   ✓ N/A									
		ance requirements applied:	YES NO Condition	required: YES NO					
	N/A	_	_						
If applicable, exem	nption for 30 m dista	ince requirements applied:	YES NO Condition	required: YES NO					
Water Well Exem	nption Screening T	ool N/A							
)A/	Well ID	Doubles in some Company in a	Constitution Constitution	F99-					
Water	Well ID	Preliminary Screening Score	Secondary Screening Score	Facility					
Croundwater or a	surface water rela	tad comments:							
Groundwater or s	surface water refa	tea comments.							



### Water Well Drilling Report

View in Imperial Export to Excel

GIC Well ID GoA Well Tag No. Drilling Company Well ID

373467

The driller supplies the data contained in this report. The Province disclaims responsibility for its

GOWN ID			accided. The line		and report was be	rousilled in 6	public calabat			Date Report F	Received	1988/08/10
Well Identificati	on and Lo	cation						***			M	easurement in Metric
<i>Owner Name</i> ELGERSMAN, B	ERT E.		Address NEERLAND	IA		Town	)		Province	Cou	intry	Postal Code
Location 1/4 SE	or LSD	SEC 33	<i>TWP</i> 61	RGE 3	W of MER 5	Lot	Block	Plan		nal Description		
Measured from B	loundary of				GPS Coordin		•	•	· 1			
	п	1 from	<del></del>	į	_	4.315868		tude <u>-1</u>	14.383226	Elevation		<del></del>
<u></u>		from			How Location	n Obtained				How Elevation		1
<u>_</u>					Мар			=	1	Not Obtained	<u> </u>	
Drilling Informa	tion		<del></del>									<del></del>
Method of Drillin Rotary					Type of Wor New Well	rk						
Proposed Well U	Jse											
Formation Log				Mea	asurement in l	Metric	Yield Te	st Sum	mary		Me	easurement in Metric
Depth from	Water	Litholog	y Description						ump Rate	22.73 L/mlr		
ground level (m)	Bearing						Test D		Water Removal	<del></del>	Statt	c Water Level (m)
7.62	ļ	<del></del>	ay & Rocks			∤ [	1988/0	3/22	18.1	.8		43.89
37.49	ļ	Hard C	·			[	Weil Con	•				easurement in Metric
39,93		-	ndstone				Total Dep 109.73 m	th Drille	d Finished Well	•	Date 1 <b>03/22</b>	End Date
49,38	ļ	Hard C	lay							1986	103/22	1988/03/22
56.39		Shale					Borehole					
57.00		Soft Sa					Didi	neter (c 0.00	<u> </u>	From (m) 0.00		To (m) 109,73
102.11		Hard S						Casing (	if applicable)		sing/Line	
106.98	Yes	Water	Bearing Sands	tone			Steel	ize OD :	14.12 cm	Plastic	Size OD :	11.43 cm
							From (m 67.67 Perforated Annular S Placed Am Other Sea Screen Ty	ons  To  To  To  To  To  To  To  To  To  T	Diamete   Slot Wi (cm   (cm   ) 0.31   Machine   (ded Ring   0.00 m   (fr) pe   (0.00 cm   (fr) pe   (0.00 cm   (fr) pe   (0.00 cm   (fr) pe   (	er or   Slot L.) (cr 8   Cr 9   Cr 9	n)	0.635 cm 55.47 m 109.73 m  Hole or Slot Interval(cm) 7.62
Contractor Cert Name of Journey, UNKNOWN NA D	man respon	sible for	drilling/constr	uction of w	ell			Certifica	ation No			
Company Name								Сору о	Well report prov	vided to owner	Date app	proval holder signed

MAHAR, VERN DRILLING SERVICES



### Water Well Drilling Report

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.

View in Imperial Export to Excel

GIC Well (D GoA Well Tag No. 373467

Drilling Company Well ID

Date Report Received 1988/08/10

GOWN ID Well Identification and Location Measurement in Metric Address Town **Province** Postal Code Owner Name Country NEERLANDIA ELGERSMAN, BERT E. TWP RGE Block Plan Additional Description 1/4 or LSD SEC W of MER Lot Location SE 33 61 3 5 GPS Coordinates in Decimal Degrees (NAD 83) Measured from Boundary of Latitude 54.315868 Longitude -114.383226 Elevation m from How Location Obtained How Elevation Obtained m from Map Not Obtained 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 22.73 L/min Pump Installed Depth m Recommended Pump Intake Depth (From TOC) 91.44 m Make Туре Model (Output Rating) Did you Encounter Saline Water (>4000 ppm TDS) Depth Well Disinfected Upon Completion m Gas Depth m Geophysical Log Taken Remedial Action 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) 1988/03/22 12:00 AM 43.89 m Minutes:Sec Method of Water Removal Type Pump 18.18 L/min Removal Rate Depth Withdrawn From 76.20 m If water removal period was < 2 hours, explain why Water Diverted for Drilling Amount Taken Water Source Diversion Date & Time

Contractor Certification

Name of Journeyman responsible for drilling/construction of well

**UNKNOWN NA DRILLER** 

Company Name MAHAR, VERN DRILLING SERVICES Certification No

Copy of Well report provided to owner 

Date approval holder signed



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

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

				LY			
Neighbour name(s)	Legal land description	Distance (m)	Zoning (LUB) category	MDS category (1-4)	Distance (m)	Waiver attached (if required)	Meets regulations
SEE BELOW							
52 waivers for the com	nmunity of Neerlandia have bee	n provided					

#### 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)
SEE BELOW					
	- 14				

Total Applicant has provided adequate land base

Additional information (attach any additional information as required)

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

<sup>\*\*</sup> Available manure spreading area (excluding setback areas from residences, common bodies of water, water wells, etc. as identified in Agdex 096-5 Manure Spreading Regulations)

<sup>\*\*\*</sup> Brown, dark brown, black, grey wooded, or irrigated



NDCD LICE ONLY

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

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

			A A			AKCB USE ON	5)Y	
	Neighbour name(s) See map page 14	Legal land description	Distance (m)	Zoning (LUB) category	MDS category (1-4)	Distance (m)	Waiver attached (if required)	Meets regulations
(5)	Tiemstra	SW 34 61 3 W5	272 m	Cat 4	Cat 4		yes	Yes
0	Byron & Rachel Tuininga	NW 27 613 W5	560 m	Ag	Cat 1		N/A	Yes
0	Andrew & Irene Elgersma	NW27613W5	>560m	Ag	Cat 1		N/A	Yes
3	John ! Jean Nanninga	SE 32 61 3 W5	>560m	Ag	Cat 1		N/A	Yes
4	Lee & Teagin Elgersma	NW 27 613 W5	>560m	Ag	Cat 1		N/A	Yes

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)	
owned land	SE 33-61-3 WF					
	NE 32-61-3 WS					
	NW 32-62-3 W5					
			Total			

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

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

Application Paggast updated February 26, 2021

<sup>\*\*</sup> Available manure spreading area (excluding setback areas from residences, common bodies of water, water wells, etc. as identified in Agdex 096-5 Manure Spreading Regulations)



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

NRCB USE ONLY							
MINIMUM DISTANCE SEPARATION							
Methods used to determine distance (if applicable):							
Margin of error (if applicable): +/-3 m							
Requirements (m): Category 1:	344 m <sub>Ca</sub>	tegory 2:	459 m Category 3: 573 m Category 4: 917 m				
Technology factor:							
Expansion factor:							
MDS related concerns from directly affected parties or referral agencies:							
Application meets setbacks to several homes zoned Cat 1 the homes in Neerlandia are all zoned Cat 4 and have provided waivers (below). Public notice with letters sent to landowners in Neerlandia, no responses or call were received.							
LAND BASE FOR MANURE		ST API	PLICATION				
Land base required:	4 ac		plicant has provided their owned land but also rents				
	2 ac	se	veral other parcels. Adequate land base provided.				
Area not suitable:	<u>a</u>		,				
Available area			Requirement met: 🗹 YES 🗆 NO				
Land spreading agreements require	red: YES	M NO					
Manure management plan:	☐ YES	NO	If yes, plan is attached:				
PLANS							
Submitted and attached constructi	ion plans:	☐ YES					
Submitted aerial photos:		YES					
Submitted photos:		☐ YES	No				
GRANDFATHERING							
Already completed:		YES	□ NO □ N/A				
If already completed, seePE	322001						



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

NRCB USE ONLY							
ALL SIGNATURES	IN FILE	YES [	]no				
DATES OF APPROV	DATES OF APPROVAL OFFICER SITE VISITS						
April 28, 2025							
CORRESPONDENC	E WITH MUNICIPAL	ITIFS AN	ID RFFFR	PAI A	AGFNO	CIFS	
Date deeming letters sen				., ,		0	
	Barrhead County				•		
	✓ response received		n/email		verbal		no comments received
Alberta Health Service	s:√n/a						
☐ letter sent	response received	☐ writter	n/email		verbal		no comments received
Alberta Environment a	nd Parks:						
letter sent	☐ response received	☐ writter	n/email		verbal	$\square$	no comments received
Alberta Transportation	n:						
☑ letter sent	response received	writter	n/email		verbal		no comments received
Alberta Regulatory Ser	rvices: N/A						
☐ letter sent	response received	☐ writter	n/email		verbal		no comments received
Other:	Ltd.					□ N/A	
letter sent	response received	☐ writter	n/email		verbal	abla	no comments received
Other:						□ N/A	
☐ letter sent	☐ response received	☐ writter	n/email		verbal		no comments received







0

Ap	plicant information	NRCB application number: BA 25 00 7			
Ор	erator/operation name:	Kelberal Farms Ltd.			
Ad	dress: <u>61512BR</u>	ge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2			
Leg	gal land location of conf	fined feeding operation: SE 33 61 3 W5			
abo	DS) to their residence force. In making this required in the copy of the copy	ence owner(s) named below to waive the required minimum distance separation or the Agricultural Operation Practices Act (AOPA) permit application identified lest, I have provided the owner(s) with an opportunity to review my permit the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance is" available on the NRCB website at www.nrcb.ca. I have also explained:			
•	have advised the own	set out in section 3 of the Standards and Administration Regulation of AOPA. I er(s) that section 3(6)(a) of the Standards and Administration Regulation allows waived by the owners of residences, if they agree in writing to grant a waiver;			
	That my proposed dev	relopment does not meet the required MDS to the owner's residence; and,			
٠	manure production, le	es only to this application as described. An increase in livestock capacity, annual vel of odour production, change to the site plan or change to a facility that would uld require a new waiver.			
Fol	lowing 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:				
	We currently	have a permit to house 17,408 laying hens.			
•	My application for a ne type and/or capacity a	ew AOPA permit proposes the following changes to the existing livestock category, t my CFO:			
	We are apply	ing for a permit to increase to 30,240 laying hers			
	manure storage volum	O facility(ies), or changes to the existing CFO facilities, including manure storage, ne and any other pertinent details, if any, are (attach a site layout plan if available):			
	With constructi	on of our new barn, we will have a solid manure			
	storage of a	capacity to hold it for I year.			
	ne applicant underst sidence sign this do	and that the waiver is not valid unless ALL registered owners of the cument.			
Per	mit Applicant:				
Res	sidence owner(s) to in	nitial: MS KS			

ALL Names on land title:	Nathan	Anthony Schouten	
	Karen	Jane Schouten	
Legal land location of residual	dence(s): Lot 1	Block 5, Plan 9123357	
Telephone number(s)1:		Email address(es)1:	
Address(es) <sup>1</sup> and Postal c	ode(s)1: _		
<sup>1</sup> Please note that personal	contact information	is for NRCB use ONLY and not publicly released	_
am/we are the legal landor	wner(s) of a residenc	ce(s) located at the above noted legal land location/addre	ss:
		num Distance Separation (MDS) Waivers";	900
		oplicant and understand its potential impacts to our residence(s);	
	e application does no	ot meet the MDS requirement to my/our residence(s), und	ler
I/we understand that t title as owners;	his waiver is not va	alid unless signed by ALL parties identified on the la	nd
I/we are not obligated	to waive the MDS re	equirement to our residence(s);	
I/we understand that if I/ providing written notice I (MDS) Waivers" Fact SI	to the NRCB approva	the MDS requirement, I/we can revoke the waiver, by al officer, as set out in the "Minimum Distance Separation	ı
//we understand that this		document.	
aving considered my/our ric	ohts. I/we hereby wa	sive the MDS requirement to my/our residence, with respe	nt to
pplication number <u>BA</u>		and made requirement to my/our residence, with respe	JL 10
pplication number DIT	2007		
Signatures of all residence	owner(s) on title		
		11 -1	
Printed names of all resider		Karen Schouten	

AF	pplicant information NRCB application number: BA 25 00 7
Op	perator/operation name: Kelberal Farms Ltd.
Ad	Idress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5E 33 6 1 3 W5
(M ab	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
٠	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.
Fol	lowing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  [With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
l th	te applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: March 10, 2035
Res	sidence owner(s) to initial:

Residence owner(s) information
ALL Names on land title: Jeremy Richard Peters  Feilifie Jacoba Peters
Legal land location of residence(s): Plan 0226077 Block 5 Lot 3
Telephone number(s)1: Email address(es)1:
Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
Please note that personal contact information is for NRCB use ONLY and not publicly released
l am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address.
<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> </ul>
<ul> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> </ul>
<ul> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> </ul>
<ul> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> </ul>
<ul> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> </ul>
<ul> <li>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</li> </ul>
/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 t
Application number BA 25007
Signatures of all residence owner(s) on title
Jereny Peters Feiltje Peters
Printed names of all residence owner(s) on title
Date: March 31, 2025

A	pplicant information NRCB application number: BA 25007
0	perator/operation name: Kelberal, Farms Ltd.
Ad	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ
Le	egal land location of confined feeding operation: 5E 33 61 3 W5
(Nab	have requested the residence owner(s) named below to waive the required minimum distance separation (IDS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified cove. In making this request, I have provided the owner(s) with an opportunity to review my permit oplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (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.
Fo	llowing 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:
	We currently have a permit to house 17,468 laying hens.
•	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: Date:
Res	sidence owner(s) to initial:C_1 T AT

A	LL Names on land title: Clifford , John Juininga
	ancela Tuininga
	JLOT 2. Black 5 Plan 912-3357
_6	egal land location of residence(s): Neerlandin County of Barcheau
Te	elephone number(s)1: Email address(es)1:
40	ddress(es)¹ and Postal code(s)¹:
F	Please note that personal contact information is for NRCB use ONLY and not publicly released
ar	n/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.
) (E	ing considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	dication number <u>BA</u> 25007
1	
,	signatures of all residence owner(s) on title
1	litterd Taininga Angela Tuininga
34	Printed names of all residence owner(s) on title

AF	oplicant information NRCB application number: BA 25 00 7
Op	perator/operation name: Kelberal Farms Ltd.
Ad	Idress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5E 33 61 3 W5
(M ab ap	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fo	llowing 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:
	We currently have a permit to house 17,468 laying hens.
•	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
•	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):  With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
I th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
	14 5
Per	mit Applicant: Date: Date:
Res	sidence owner(s) to initial: M.K.

A	L Names on land title: Mason Kippers
Le	gal land location of residence(s):
Te	lephone number(s)1: Email address(es)1:
Ac	dress(es)¹ and Postal code(s)¹:
1 F	lease note that personal contact information is for NRCB use ONLY and not publicly released
an	/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;
	/we are not obligated to waive the MDS requirement to our residence(s);
	//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
	/we understand that this waiver is a public document.
av	ng considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	lication number BA-25007
1-1-	
11	ignatures or all residence owner(s) on title
-	lason Kippers

A	oplicant information NRCB application number: BA 25 00 7
O	perator/operation name: Kelberal Farms Ltd.
Ac	Idress: 61512 B Rge. Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5E 33 61 3 W5
(Mab ap	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the <i>Agricultural Operation Practices Act</i> (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fo	llowing is a summary of the proposed development:
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•	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hens
•	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):  With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Pei	mit Applicant Date: March 10, 2025
Re	sidence owner(s) to initial: KH H <sup>3</sup>

Telephone nu Address(es) <sup>1</sup> a	ration of residence(s): 8320470 Block 1 Lot 6  mber(s)¹: _ Email address(es)¹: _
Address(es) <sup>1</sup> a	
	and Postal code(s)1:
Please note to	hat personal contact information is for NRCB use ONLY and not publicly released
am/we are the	legal landowner(s) of a residence(s) located at the above noted legal land location/address:
I/we have re	ead the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
I/we have di	scussed this application with the applicant and understand its potential impacts to our residence(s);
I/we unders	stand that the application does not meet the MDS requirement to my/our residence(s), under ural Operation Practices Act (AOPA);
I/we unders	stand that this waiver is not valid unless signed by ALL parties identified on the land ners;
I/we are no	t obligated to waive the MDS requirement to our residence(s);
providing wr	tand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver, by ritten notice to the NRCB approval officer, as set out in the "Minimum Distance Separation vers" Fact Sheet; and
I/we unders	tand that this waiver is a public document.
laving consider	red my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	mber <i>BA</i> 25007
r Programme Trans	
	all residence owner(s) on title
Kathlee Printed names	en Hellinga Henry Hellingae s of all residence owner(s) on title

A	plicant information NRCB application number: BA 25 00 7	
0	perator/operation name: Kelberal, Farms Ltd.	+
Ad	dress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 11	Ra
Le	gal land location of confined feeding operation: 5E 33 6 1 3 W5	
ab ap	ave requested the residence owner(s) named below to waive the required minimum distance sepands) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identions. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum paration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:	tified
٠	The MDS requirement set out in section 3 of the Standards and Administration Regulation of AO have advised the owner(s) that section 3(6)(a) of the Standards and Administration Regulation a this requirement to be waived by the owners of residences, if they agree in writing to grant a waive	llows
•	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, a manure production, level of odour production, change to the site plan or change to a facility that vincrease the MDS would require a new waiver.	nnual would
Fo	lowing is a summary of the proposed development:	
•	The current scope of my confined feeding operation (CFO), including the type, number, and cate livestock, if any, is:	gory of
	We currently have a permit to house 17,468 laying hens.	_
	My application for a new AOPA permit proposes the following changes to the existing livestock catype and/or capacity at my CFO:	ategory,
	We are applying for a permit to increase to 30,240 laying	hens
	The proposed new CFO facility(ies), or changes to the existing CFO facilities, including manure s manure storage volume and any other pertinent details, if any, are (attach a site layout plan if available construction of our new barn, we will have a solid manual	ilable):
	storage of a capacity to hold it for I year.	
l th	e applicant understand that the waiver is not valid unless ALL registered owners of dence sign this document.	f the
Per	nit Applicant: Date: March 10, 2025	
Res	idence owner(s) to initial:	

Res	idence owner(s) information
AL	L Names on land title: Jackson, Kayley Hoo. wreyer
Leç	gal land location of residence(s):
Tel	lephone number(s) <sup>1</sup> : Email address(es) <sup>1</sup>
Add	dress(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
¹ PI	lease note that personal contact information is for NRCB use ONLY and not publicly released
am	/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
	/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
	/we have discussed this application with the applicant and understand its potential impacts to our residence(s);
1	/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);
t	/we understand that this waiver is not valid unless signed by ALL parties identified on the land little as owners;
1	/we are not obligated to waive the MDS requirement to our residence(s);
F	/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.
avii	ng considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	ication number <u>BA 25007</u>
PPI	ication number <u>D71 0.5 0.5 7</u>
Si	ignatures of all residence owner(s) on title
) 4.	ckson Kayley Hoojimeyer
Pi	rinted names of all residence owner(s) on title
ate:	March 15 2025

A	oplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
Ac	dress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5E 33 61 3 W5
(Mab	ave requested the residence owner(s) named below to waive the required minimum distance separation IDS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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	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.
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	We are applying for a permit to increase to 30,240 laying hers
	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):  [Nith construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
l th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant:  _ Date:
Res	sidence owner(s) to initial: IvA RVA

	L Names on land title: Rika and John van Assen
ALI	Block 1 Planio 621298
Leg	al land location of residence(s):
Tele	ephone number(s)1:
Add	dress(es)1 and Postal code(s)1:
¹ PI	ease note that personal contact information is for NRCB use ONLY and not publicly released
am/	we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
. 1	/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
. 1/	we have discussed this application with the applicant and understand its potential impacts to our residence(s);
	/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);
	we understand that this waiver is not valid unless signed by ALL parties identified on the land itle as owners;
L	we are not obligated to waive the MDS requirement to our residence(s);
p	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
. 1	we understand that this waiver is a public document.
Havir	ng considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Annl	ication number <u>BA 25007</u> .
ф	
Si	ign\(\frac{1}{2}\)tures of all residence owner(s) on title
í	John Van Assen RITA VANASSEN
	rinted names of all residence owner(s) on title
Date:	march 14,2025

A	oplicant information NRCB application number: BA 25007
0	perator/operation name: Kelberal Farms Ltd.
Ac	Idress: 61512 B Rge. Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5 = 33 6   3 W5
ab ap	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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,
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	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
th	e applicant understand that the waiver is not valid unless ALL registered owners of the
es	idence sign this document.
er	mit Applicant:
01	mit Applicant: Date: March 10, 2025
20	idence owner(s) to initial: M. V. B.

-	LL Names on land title: Matthew Anthony Nicolaus Vande Burgt
L	egal land location of residence(s): PLAN 8320470 BLOCK I LOT 8
T	elephone number(s)1: Email address(es)1:
A	ddress(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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.
a	ring considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	olication number BA 25007
	Signatures of all residence owner(s) on title
	Monthew Vande Burat

A	Applicant information	NRCB application number: BA 25007
0	Operator/operation name: 🗼	Kelberal Farms Ltd.
A	Address: 61512 B Rge	Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined	feeding operation: <u>SE 33 61 3</u> W5
at	bove. In making this request, pplication and a copy of the N	e owner(s) named below to waive the required minimum distance separation the Agricultural Operation Practices Act (AOPA) permit application identified. I have provided the owner(s) with an opportunity to review my permit Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance valiable on the NRCB website at www.nrcb.ca. I have also explained:
•	The MDS requirement set have advised the owner(s)	out in section 3 of the Standards and Administration Regulation of AOPA. In that section 3(6)(a) of the Standards and Administration Regulation allows wed by the owners of residences, if they agree in writing to grant a waiver;
		oment does not meet the required MDS to the owner's residence; and,
•	That this waiver applies on	ly to this application as described. An increase in livestock capacity, annual of odour production, change to the site plan or change to a facility that would
Fo	ollowing is a summary of the	proposed development:
	The current scope of my colivestock, if any, is:	onfined feeding operation (CFO), including the type, number, and category of
	We currently ha	ve a permit to house 17,408 laying hens.
	My application for a new Active and/or capacity at my	OPA permit proposes the following changes to the existing livestock category, CFO:
	We are applying	for a permit to increase to 30,240 laying hers
	manure storage volume and	cility(ies), or changes to the existing CFO facilities, including manure storage, d any other pertinent details, if any, are (attach a site layout plan if available):
	With construction	of our new bam, we will have a solid manure
	storage of a car	pacity to hold it for I year.
th	ne applicant understand sidence sign this docum	that the waiver is not valid unless ALL registered owners of the ent.
er	rmit Applicant	Signature // Date: March 10, 2025
les	sidence owner(s) to initial:	
	-	

Legal la	PLAN: Block COT and location of residence(s): 0820832 1 1
Telepho	ne number(s)1: Email address(es)1:
Address	(es)¹ and Postal code(s)¹: _
<sup>1</sup> Please	note that personal contact information is for NRCB use ONLY and not publicly released
	re the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
	have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
	ave 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 gricultural Operation Practices Act (AOPA);
	understand that this waiver is not valid unless signed by ALL parties identified on the land as owners;
I/we	are not obligated to waive the MDS requirement to our residence(s);
provi	Inderstand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver, by ding written notice to the NRCB approval officer, as set out in the "Minimum Distance Separation" (3) Waivers" Fact Sheet; and
I/we	understand that this waiver is a public document.
laving c	onsidered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Service A	on number <u>BA</u> 25007
Signa	ures of all residence owner(s) on title

Dear Property Owner(s),

Three years ago we sent waivers to sign to approve us to build a new poultry barn. The barn was approved and we are starting construction this spring. We are permitted to house 17,408 laying hens. Due to circumstances we need to update these waivers to get an updated permit to house the additional laying hens of 12,832 which comes to a total of 30,240 laying hens.

We will be housing one more flock in our old barn, after that the old barn is being decommissioned and will be used for storage.

Construction of the new barn will be completed in April 2026. We will still be doing dry manure storage to have the capacity to hold for 1 year.

Will be sending 2 pages, the first page you as the property owner(s) need to initial at the bottom of the page where it says Residence Owner(s) to initial. The  $2^{nd}$  page you need to fill out completely like before.

We will send a self addressed stamped envelope like before as well so you can mail it back to us

If you need us to clarify anything again please don't hesitate to call. Our number is Sorry for the inconvenience.

Sincerely,

Rodney & Jackie Elgersma

DEAR RODNEY & JACKIE,

WE (RICK & Gre) hope that this is THE FINAL

STAGE FOR YOUR Application AND THAT THERE

WILL BE NO OBJECTIONS FOR THE FUTURE

EXPANSION TO YOUR FARM.

WE WISH YOU ALL THE BEST

Rich & GRE HOFSINK

A	oplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
Ad	ddress: 61512B Rge. Rd. 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: SE 33 61 3 W5
(Nab	ave requested the residence owner(s) named below to waive the required minimum distance separation IDS) to their residence for the <i>Agricultural Operation Practices Act</i> (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (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,
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	With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year
res	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.  Date: March 10, 2025
GI	Signature Signature
Res	sidence owner(s) to initial:

Re	esidence owner(s) information
A	ILL Names on land title: Jeffrey and Jane Van Leeuwen
-	PLAN 0820832-1-2
L	egal land location of residence(s):
1	elephone number(s) <sup>1</sup> Email address(es) <sup>1</sup> :
A	ddress(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
la	m/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.
Ha	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number BA 25007
	phodulot hamber grid a sec ?
/	Signatures of all residence owner(s) on title
1	DEFFREY VAN LEEUWEN and JANE VAN LEEUWEN.
	Printed names of all residence owner(s) on title
Da	te: MARCH 10 2025.

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal, Farms Ltd.
A	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: <u>SE 33 61 3 W5</u>
ab	nave 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 bove. In making this request, I have provided the owner(s) with an opportunity to review my permit opplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (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,
٠	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.
Fo	llowing is a summary of the proposed development:
٠	The current scope of my confined feeding operation (CFO), including the type, number, and category of livestock, if any, is:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hens
٠	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): With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
I th	e applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: Date:
Res	sidence owner(s) to initial:

	ALL Names on land title: Ronald Gray
	Legal land location of residence(s): Lot 3 Block 1 Plan 7921605
	Telephone number(s)1: W/A
,	Address(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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.
На	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number BA 25007
	Signatures of all residence simples of the
-	Printed names of all residence owner(s) on title
Da	1

	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal, Farms Ltd.
Ad	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ
Le	gal land location of confined feeding operation: 5E 33 61 3 W5
ab	ave requested the residence owner(s) named below to waive the required minimum distance separation IDS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance opportunity to review my permit plication (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.
Fol	lowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
esi	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
err	mit Applicant:  Date: March 10, 2025
les	idence owner(s) to initial:

L	egal land location of residence(s): NE-28-62-35
7	elephone number(s)1: Email address(es)1:
A	address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> : _
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
_	m/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:  /we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
	//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.
la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	polication number $BA = 35007$
h	Silication number JDM 8300 /
	Signatures of all residence owner(s) on title

Applicant Information	NRCB application number: BA 25 00 7
Operator/operation name: Kelbe	oral Forms Ltd.
Address: 61512.B Rae. Rd. 33	
Address: 10101415 Hap- na.35	3 J
Legal land location of confined feeding	
(MDS) to their residence for the Agric above. In making this request, I have application and a copy of the Natural	r(s) named below to waive the required minimum distance separation bultural Operation Practices Act (AOPA) permit application identified provided the owner(s) with an opportunity to review my permit Resources Conservation Board (NRCB) Fact Sheet Minimum Distance on the NRCB website at www.nrcb.ca. I have also explained:
have advised the owner(s) that so	section 3 of the Standards and Administration Regulation of AOPA. I ection 3(6)(a) of the Standards and Administration Regulation allows the owners of residences, if they agree in writing to grant a waiver;
That my proposed development d	loss not meet the required MDS to the owner's residence; and,
<ul> <li>That this waiver applies only to the manure production, level of odour increase the MDS would require a</li> </ul>	is application as described. An increase in livestock capacity, annual r production, change to the site plan or change to a facility that would a new waiver.
Following is a summary of the propos	ed development:
The current scope of my confined livestock, if any, is:	feeding operation (CFO), including the type, number, and category of
We currently have a	permit to house 17,468 laying hens.
type and/or capacity at my CFO:	ermit proposes the following changes to the existing livestock category,
We are applying for	a permit to increase to 30,240 laying liens
manure storage volume and any	es), or changes to the existing CFO facilities, including manure storage, other pertinent details, if any, are (attach a site layout plan if available):
	our new barn, we will have a solid manure
storage of a capacit	by to hold it for I year
I the applicant understand that I residence sign this document.	the waiver is not valid unless ALL registered owners of the
Permit Applicants	Date: March 10, 2025
Pacidonas amendal to milliols	Application BA25007 Page 37 of

BA25007 TD Page 40 of 120

Re	sidence owner(s) information
A	L Names on land title: William Van Assen
_	Martine Van Assen
Le	gal land location of residence(s): Plan 982 1048 Block 1 Lot 6
Te	lephone number(s)1: Email address(es)1:
Ac	dress(es)¹ and Postal code(s)¹:
F	lease note that personal contact information is for NRCB use ONLY and not publicly released
	we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
	/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Walvers";
	we have discussed this application with the applicant and understand its potential impacts to our residence(s);
	//we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);
	/we understand that this waiver is not valid unless signed by ALL parties identified on the land itle as owners;
	/we are not obligated to waive the MDS requirement to our residence(s);
N.	/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
1	we understand that this waiver is a public document.
v	ng considered my/our rights, I/we hereby walve the MDS requirement to my/our residence, with respect to
p	ication number BA 25007
ĺ	
S	gnatures of all residence owner(s) on title
7	11 Van Assen Martine Vantseen

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
Α	ddress: 61512 B Rge Rd 33 County Of Barrhand, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: <u>SE 33 61 3</u> W5
at	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 cove. In making this request, I have provided the owner(s) with an opportunity to review my permit opplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
٠	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.
Fo	sllowing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
•	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):
	With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant
?es	sidence owner(s) to initial:

gal land location of residence(s): NW-34-0b1-03-5 2T03-1-7921bc
ephone number(s)1:
dress(es)1 and Postal code(s)1:
ease note that personal contact information is for NRCB use ONLY and not publicly released
/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
/we have discussed this application with the applicant and understand its potential impacts to our residence(s);
/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);
we understand that this waiver is not valid unless signed by ALL parties identified on the land itle as owners;
we are not obligated to waive the MDS requirement to our residence(s);
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
we understand that this waiver is a public document.
ng considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
cation number BA 25007
Cation number Divides 1
gnatures of all residence owner(s) on little
led Otten Saakie otten

Applicant infor	mation	NRCB application number: BA 25007
Operator/operat	tion name: <u>Kelberal, I</u>	Farms Ltd.
Address: 615	12 B Rge Rd 33 Cou	nty Of Barrhead, AB Postal Code: TOG 1R2
Legal land locati	ion of confined feeding opera	ation: SE 33 61 3 W5
I have requested (MDS) to their re above. In making application and a	d the residence owner(s) nar esidence for the Agricultural of g this request, I have provide a copy of the Natural Resour	med below to waive the required minimum distance separation Operation Practices Act (AOPA) permit application identified ed the owner(s) with an opportunity to review my permit rees Conservation Board (NRCB) Fact Sheet "Minimum Distance NRCB website at www.nrcb.ca. I have also explained:
<ul> <li>The MDS re have advise</li> </ul>	quirement set out in section d the owner(s) that section 3	3 of the Standards and Administration Regulation of AOPA. I (6)(a) of the Standards and Administration Regulation allows ners of residences, if they agree in writing to grant a waiver;
		t meet the required MDS to the owner's residence; and,
manure prod	iver applies only to this applious duction, level of odour product MDS would require a new w	cation as described. An increase in livestock capacity, annual ction, change to the site plan or change to a facility that would valver.
Following is a su	mmary of the proposed deve	elopment:
The current s	scope of my confined feeding my, is:	g operation (CFO), including the type, number, and category of
We curr	ently have a pen	mit to house 17,468 laying hens.
My application type and/or c	on for a new AOPA permit pro capacity at my CFO:	oposes the following changes to the existing livestock category,
we are	applying for a pe	ermit to increase to 30,240 laying hens
manure stora	ge volume and any other per	ranges to the existing CFO facilities, including manure storage, rtinent details, if any, are (attach a site layout plan if available):  which have a Solid manure
	^	hold it for I year.
the applicant esidence sign	understand that the wait this document.	ver is not valid unless ALL registered owners of the
ermit Applicant:	Signature	_ Date: _ March 10, 2025
esidence owne	U	N.V.

Residence owner(s) information
ALL Names on land title: Netty Vanassen
Legal land location of residence(s): 8-1-9821048
Telephone number(s)1: Email address(es)1:
Address(es)¹ and Postal code(s)¹:
1 Please note that personal contact information is for NRCB use ONLY and not publicly released
am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/addres
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.
aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect
oplication number <u>BA 25007</u>
Signatures of all residence owner(s) on the
Printed names of all residence owner(s) on title
nte: Netty Van Assen
March 19/25

A	Applicant information NRCB application number: BA 25007
C	perator/operation name: Kelberal Farms Ltd.
A	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
L	egal land location of confined feeding operation: 5E 33 61 3 W5
al	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 pove. 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 apparation (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.
Fo	llowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hens
	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):  With construction of our new barn, we will have a solid manure
	Alaman of a smill little of
I th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Per	mit Applicant:
Res	idence owner(s) to initial: AK RMK

<ul> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>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</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect Application number BA 25007</li> </ul>	7.5	ALL Names on land title: Andrew & Rhea Knol
Address(es)¹ and Postal code(s)¹:  **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 Application number BA 25007	1	Legal land location of residence(s):
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 Application number BA 25007  Signatures of all residence owner(s) on title	1	Telephone number(s) <sup>1</sup> Email address(es) <sup>1</sup> :
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 Application number BA 25007	A	Address(es)¹ and Postal code(s)¹:
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 Application number BA 25007		
<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>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</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect Application number BA 25007</li> </ul>	1	Please note that personal contact information is for NRCB use ONLY and not publicly released
<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>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</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect Application number BA 25007</li> </ul>	l a	m/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address
<ul> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>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</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect Application number BA 25007</li> </ul>		
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Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect Application number BA 25007  Signatures of all residence owner(s) on title		I/we understand that this waiver is a public document.
Application number BA 25007  Signatures of all residence owner(s) on title	Ha	
Signatures of all residence owner(s) on title		
A 3	4hl	plication number DA 85007
A 3		
Andrew Knol Rhea Knol	- 8	Signatures of all residence owner(s) on title
	4	ndrew Knol Rhea Knol

A	pplicant information NRCB application number: BA 25007
0	perator/operation name: Kelberal Farms Ltd.
Ad	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: 5E 33 61 3 W5
ab	lave requested the residence owner(s) named below to waive the required minimum distance separation (IDS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (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.
Fo	llowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hens
	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): With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
er	mit Applicant: Date: March 10, 2095
les	sidence owner(s) to initial:

Legal land location of residence(s): 3332 MC (1)  Telephone number(s)1: Email address(es)1:						
Address(es)¹ and Postal code(s)¹:  ¹ Please note that personal contact information is for NRCB use ONLY and not publicly released						
<sup>1</sup> Please note that personal contact information is for NRCB use ONLY and not publicly released						
, , and including a contract of the contract o						
I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";						
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I/we understand that this waiver is a public document.						
aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect t						
pplication number <u>BA 250</u> 07						
A						
Signatures of all residence/owner(s) on title  John P. Leonard						
Printed names of all residence owner(s) on title						
ate: Mar. 11/25						

A	Applicant information NRCB application number: BA 25007				
C	perator/operation name: Kelberal Farms Ltd.				
A	ddress: 61512 B Rae Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2				
L	egal land location of confined feeding operation: 5 = 33 61 3 W5				
(Nata	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 cove. In making this request, I have provided the owner(s) with an opportunity to review my permit opplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance apparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:				
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•	That my proposed development does not meet the required MDS to the owner's residence; and,				
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	We are applying for a permit to increase to 30,240 laying hers				
	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):  With construction of our new barn, we will have a solid manure				
	storage of a capacity to hold it for I year.				
th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.				
Per	mit Applicant: Date: _March_10, 2025				
Res	sidence owner(s) to initial: &w \mathcal{SW}				

	ALL Names on land title: LOBELT WIELENGA  UENNA WIELENGA					
	Legal land location of residence(s):PLAN 05 Z0Z47 BCOCRZ LOT B NEERLAN					
	Telephone number(s)1: _ Email address(es)1: _					
	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :					
111	Please note that personal contact information is for NRCB use ONLY and not publicly released					
	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.					
ła	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to					
	plication number <u>BA 25007</u>					
-	<u> </u>					
	Signatures of all residence owner(s) on title					
	Printed names of all residence owner(s) on title					

	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal, Farms, Ltd.
A	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: 5E 33 61 3 W5
(N ab	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 bove. In making this request, I have provided the owner(s) with an opportunity to review my permit opplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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I th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Peri	mit Applicant  Signature   Date: March 10, 2025
Res	idence owner(s) to initial:

Residence owner(s) information

	ALL Names on land title: Danie   van Heyst + Cornen van Heyst
	Legal land location of residence(s): Lot A Block 2 B Plan 3332MC
	Telephone number(s)1: Email address(es)1:
1	Address(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	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 NECE Fact Chart William 201
	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;
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	I/we understand that this waiver is a public document.
На	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number BA 25007
1	Signatures of all residence owner(s) on title
	Paniel van Heyst Carmen van Heyst
	Printed names of all residence owner(s) on title
Dat	e: March 11, 2025

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
Ad	idress: 61512 B Rge. Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: 5 = 33 6 1 3 W5
ab ap	lave requested the residence owner(s) named below to waive the required minimum distance separation (IDS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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•	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.
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	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
'er	mit Applicant:  Date: March 10, 3025
les	idence owner(s) to initial:

_	L Names on land title: <u>Richard Peters</u> Teiltje Jacoba Peters					
Leg	retutje sacoba Peters					
Leg						
	ral land location of residence(s): 10+ 1 Bladc2 Plan 762 0663 NiV 34-61- 3 W5					
Tele	ephone number(s)1: Email address(es)1: _					
Add	iress(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :					
<sup>1</sup> Ple	ease note that personal contact information is for NRCB use ONLY and not publicly released					
	we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:					
	we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";					
1/0	we have discussed this application with the applicant and understand its potential impacts to our residence(s);					
Lii	we understand that the application does not meet the MDS requirement to my/our residence(s), under ne Agricultural Operation Practices Act (AOPA);					
tit	we understand that this waiver is not valid unless signed by ALL parties identified on the land tle as owners;					
I/v	we are not obligated to waive the MDS requirement to our residence(s);					
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I/w	we understand that this waiver is a public document.					
	g considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to					
pplic	cation number BA 25007					
' Sign	natures of all residence owner(s) on title					
	Richard Peters Feilifie Peters					
	nted names of all residence owner(s) on title					

Applicant in	formation	NRCB application number: BA 25007				
Operator/ope	ration name: <u>Kelberal Farr</u>	ms Ltd.				
Address: 6	1512 B Rge Rd 33 County	Of Barrhead, AB Postal Code: TOG 1RQ				
Legal land lo	cation of confined feeding operation	: SE 33 61 3 W5				
(MDS) to the above. In ma application a	r residence for the Agricultural Open king this request, I have provided th and a copy of the Natural Resources	below to waive the required minimum distance separation ration Practices Act (AOPA) permit application identified be owner(s) with an opportunity to review my permit Conservation Board (NRCB) Fact Sheet "Minimum Distance CB website at www.nrcb.ca. I have also explained:				
have adv	ised the owner(s) that section 3(6)(a	the Standards and Administration Regulation of AOPA. I a) of the Standards and Administration Regulation allows of residences, if they agree in writing to grant a waiver;				
• That my	proposed development does not me	eet the required MDS to the owner's residence; and,				
manure p		on as described. An increase in livestock capacity, annual , change to the site plan or change to a facility that would er.				
Following is a	summary of the proposed develop	ment:				
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	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:					
we ar	c applying for a perm	nit to increase to 30,240 laying hens				
manure s	torage volume and any other pertine	ges to the existing CFO facilities, including manure storage, ent details, if any, are (attach a site layout plan if available):  bam, we will have a solid manure				
Storag	storage of a capacity to hold it for I year.					
I the applic		is not valid unless ALL registered owners of the				
Permit Applic	ant: Signature	Date: March 10, 2025				
Residence o	wner(s) to initial:					

ALL Names on land title: Wayne Weidinhammer
Legal land location of residence(s): Lot 3 , BUX 2, Plan 892-2145
Telephone number(s)1: Email address(es)1:
Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
<sup>1</sup> 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:
<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> </ul>
<ul> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> </ul>
<ul> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> </ul>
<ul> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> </ul>
<ul> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> </ul>
<ul> <li>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</li> </ul>
<ul> <li>I/we understand that this waiver is a public document.</li> </ul>
Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Application number BA 25007
Signatures of all residence owner(s) on title
Vayne Weidenhammer
Printed names of all residence owner(s) on title
Date:

Арр	licant information NRCB application number: BA 25007				
Ope	rator/operation name: Kelberal Farms Ltd.				
Addr	ress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ				
Lega	al land location of confined feeding operation: 5E 33 61 3 W5				
(MDS abov appli	re requested the residence owner(s) named below to waive the required minimum distance separation (S) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified re. In making this request, I have provided the owner(s) with an opportunity to review my permit cation and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance aration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:				
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Г	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 no not not seem to be made and the manual m				
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	storage of a capacity to hold it for I year.				
I the	applicant understand that the waiver is not valid unless ALL registered owners of the dence sign this document.				
Perm	it Applicant: Date: March_ID, 2025				
Resid	dence owner(s) to initial:				

Res	sidence owner(s) information
Al	L Names on land title: Mark Wierensa
Le	gal land location of residence(s): Plan 8922/45 Block 2 Lot 4
Те	lephone number(s)1: Email address(es)1:
Ad	dress(es)¹ and Postal code(s)¹: _
1 P	lease note that personal contact information is for NRCB use ONLY and not publicly released
lam	/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);
•	we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;
.	/we are not obligated to waive the MDS requirement to our residence(s);
1	/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
. 1	/we understand that this waiver is a public document.
Havi	ng considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	ication number BA 25007
S	ignatures of all residence owner(s) on title
	Tarle Wierenga rinted names of all residence owner(s) on title
Date	March 14, 2025

	Lesamotion		NRCB applica	ation number: _	BA 25007	
Applicant	information	VII				
Operator/c	peration name:	Kelberal F	arms Rad.		The second second	
		1	J		stal Code: TOG	1182
Legal land	location of cont	ined feeding opera	tion: 5 = 3	3613	NS_	
I have req (MDS) to above. In application Separation	uested the residence for their residence for making this required and a copy of the (MDS) Waiver	ence owner(s) nam or the Agricultural ( uest, I have provide the Natural Resour s" available on the	ned below to wark Operation Practice d the owner(s) with ces Conservation NRCB website at	e the required as Act (AOPA) th an opportun Board (NRCB) www.nrcb.ca.	minimum distance s permit application id ity to review my per ) Fact Sheet "Minim I have also explaine	mit um Distance ed:
The N have this re	IDS requirement advised the own equirement to be	t set out in section a er(s) that section 3 waived by the own	3 of the Standard (6)(a) of the Stan ters of residences	s and Administ dards and Adm s, if they agree	ration Regulation of inistration Regulation in writing to grant a	AOPA. I on allows waiver;
- That	ny proposed de	velopment does no	t meet the require	ed MDS to the	owner's residence; a	and,
That i	this waiver appli	1 1 4 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	cation as describ	ad An increase	e in livestock capaci change to a facility t	ty, annual
Following	is a summary o	f the proposed dev	elopment:			
• The c	current scope of	my confined feedin	g operation (CFC		type, number, and	
type	and/or capacity	at my CFO:			o the existing livesto	
man Juli:	ure storage volu <u>In construc</u>	me and any other p	rew bam, u	ie will have	ilities, including mar ch a site layout plan re, a Solid M	A STATE OF THE PARTY OF THE PAR
I the ap	plicant under	stand that the wolcoument.	aiver is not val	id unless AL	L registered own	ers of the
Permit A	onlicant			Date: Ma	reh 10, 2025	
remit A	ррисан	Signature	n	,		
Resider	nce owner(s) to	initial:	/	ule		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		H				

Re	sidence owner(s) information
A	LL Names on land title: Frank & Mindy Chipps
L	egal land location of residence(s): Plan 8320470 Block 2 Lot 2
Т	elephone number(s) Email address(es)1:
A	ddress(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
aı	m/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.
la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number <u>BA 25007</u>
4	Silvation names, and a silvation is a silvation of the si
	Signatures of all residence owner(s) on title
	Frank Chipps Mindy Chipps
	Printed names of all residence owner(s) on title
-	te: March 17, 2025

Ар	plicant information NRCB application number: BA 25 00 7
Ор	erator/operation name: Kelberal Farms Ltd.
Add	dress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ
Leg	al land location of confined feeding operation: 5E 33 6   3 W5
abo	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	lowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers.
	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):    Just Construction of Our new barn, We will have a Solid manure
	Storage of a capacity to hold it for I year.
	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: Date: Date:
Re	sidence owner(s) to initial:

_	Geraldine Warenga
L	gal land location of residence(s): Plan 8320470 Back 2 Lot 3
T	elephone number(s) Email address(es)1:
A	ddress(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
aı	n/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.
ta	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Αр	olication number BA 25007
7	
	Julius Weierg Geralaire Weierge
	THE COURT OF THE PROPERTY OF T

App	licant information NRCB application number: BA 25 00 7
Ope	rator/operation name: Kelberal, Farms Ltd.
Add	ress: 61512 B Rap. Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Lega	al land location of confined feeding operation: 5E 33 61 3 W5
(MD)	we requested the residence owner(s) named below to waive the required minimum distance separation S) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified we. In making this request, I have provided the owner(s) with an opportunity to review my permit ication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance aration (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.
Follo	owing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:  We are applying for a permit to increase to 30,240 laying hers
	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):    With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
I th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Perr	mit Applicant: Date: Date:
Res	idence owner(s) to initial:

L	egal land location of residence(s):
7	elephone number(s)1:
A	ddress(es)¹ and Postal code(s)¹:
7	Please note that personal contact information is for NRCB use ONLY and not publicly released
la	m/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.
Ha	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number <u>BA 25007</u>
4	plication number Dri 8500 /
	orginatures or an residence owner(s) on title

App	licant information NRCB application number: BA 25 00 7
Оре	rator/operation name: Kelberal, Farms Ltd.
	ress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leg	al land location of confined feeding operation: 5E 33 61 3 W5
l ha (ME abo	ve requested the residence owner(s) named below to waive the required minimum distance separation (S) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ve. In making this request, I have provided the owner(s) with an opportunity to review my permit lication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	owing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
l th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Pe	rmit Applicant:
Re	sidence owner(s) to initial:

Α	LL Names on land title: <u>Ivan + Shrah Van Assen</u>
L	egal land location of residence(s):
T	elephone number(s)1: Email address(es)1: _
A	ddress(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
а	m/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.
la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Ap	plication number BA 25007
	Ivan Van Assen Carah Van Assen
	Printed names of all residence owner(s) on title
Оа	te: March 12, 2025

Applicant information	NRCB application number: BA 25 00 7
Operator/operation name: Kelberal Far	ms Ltd.
Address: 61512 B Rae Rd 33 County	Of Barrhead, AB Postal Code: TOG 1R2
Legal land location of confined feeding operation	5E 33 61 3 W5
(MDS) to their residence for the Agricultural Operabove. In making this request, I have provided the application and a copy of the Natural Resources	below to waive the required minimum distance separation eration Practices Act (AOPA) permit application identified the owner(s) with an opportunity to review my permit a Conservation Board (NRCB) Fact Sheet "Minimum Distance CB website at www.nrcb.ca. I have also explained:
have advised the owner(s) that section 3(6)	f the Standards and Administration Regulation of AOPA. I (a) of the Standards and Administration Regulation allows to fresidences, if they agree in writing to grant a waiver;
That my proposed development does not me	eet the required MDS to the owner's residence; and,
	on as described. An increase in livestock capacity, annual n, change to the site plan or change to a facility that would er.
Following is a summary of the proposed develop	oment:
<ul> <li>The current scope of my confined feeding of livestock, if any, is:</li> </ul>	peration (CFO), including the type, number, and category of
We currently have a permi	t to house 17,408 laying hens.
<ul> <li>My application for a new AOPA permit proportype and/or capacity at my CFO:</li> </ul>	oses the following changes to the existing livestock category,
We are applying for a pen	mit to increase to 30,240 laying hens
manure storage volume and any other pertin	ges to the existing CFO facilities, including manure storage, nent details, if any, are (attach a site layout plan if available):  Sham, We will have a Solid manure
storage of a capacity to h	old it for I year.
	r is not valid unless ALL registered owners of the
Permit Applicant:	_ Date: _ March 10, 2025
Residence owner(s) to initial:	A

Legal land location of residence(s):  Telephone number(s)¹:  Email address(es)¹:  Address(es)¹ and Postal code(s)¹:  **Please note that personal contact information is for NRCB use ONLY and not publicly released 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.  *Beautiful Authority (Authority (	ALL Names on land title: No.	than and Amonda
Address(es)¹ and Postal code(s)¹:  **Please note that personal contact information is for NRCB use ONLY and not publicly released arm/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address l/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers"; l/we have discussed this application with the applicant and understand its potential impacts to our residence(s); l/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA); l/we understand that this waiver is not valid unless signed by ALL parties identified on the lantitle as owners; l/we are not obligated to waive the MDS requirement to our residence(s); l/we understand that if l/we choose to waive the MDS requirement, l/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 l/we understand that this waiver is a public document.	Teitsn	Pu
Address(es)¹ and Postal code(s)¹:  **Please note that personal contact information is for NRCB use ONLY and not publicly released arm/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address l/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers"; l/we have discussed this application with the applicant and understand its potential impacts to our residence(s); l/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA); l/we understand that this waiver is not valid unless signed by ALL parties identified on the lantitle as owners; l/we are not obligated to waive the MDS requirement to our residence(s); l/we understand that if l/we choose to waive the MDS requirement, l/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 l/we understand that this waiver is a public document.		
Address(es)¹ and Postal code(s)¹: _  If Please note that personal contact information is for NRCB use ONLY and not publicly released arm/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address l/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers"; l/we have discussed this application with the applicant and understand its potential impacts to our residence(s); l/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA); l/we understand that this waiver is not valid unless signed by ALL parties identified on the lantitle as owners; l/we are not obligated to waive the MDS requirement to our residence(s); l/we understand that if l/we choose to waive the MDS requirement, l/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 l/we understand that this waiver is a public document.	Legal land location of residence(s)	
Please note that personal confact information is for NRCB use ONLY and not publicly released arm/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address l/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers"; l/we have discussed this application with the applicant and understand its potential impacts to our residence(s); l/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA); l/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners; l/we are not obligated to waive the MDS requirement to our residence(s); l/we understand that if l/we choose to waive the MDS requirement, l/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 l/we understand that this waiver is a public document.	Telephone number(s)1:	Email address(es)1:
arm/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address l/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers"; l/we have discussed this application with the applicant and understand its potential impacts to our residence(s); l/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA); l/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners; l/we are not obligated to waive the MDS requirement to our residence(s); l/we understand that if l/we choose to waive the MDS requirement, l/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 l/we understand that this waiver is a public document.  aving considered my/our rights, l/we hereby waive the MDS requirement to my/our residence, with respective providers and like the legal land location/address like approved to the notice of the legal land location/address like approved to the minimum Distance Separation (MDS) Waivers" Fact Sheet; and like understand that this waiver is a public document.	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :	
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.	<sup>1</sup> Please note that personal contact	information is for NRCB use ONLY and not publicly released
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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect	am/we are the legal landowner(s) o	f a residence(s) located at the above noted legal land location/address:
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.		
the Agricultural Operation Practices Act (AOPA);  I/we understand that this waiver is not valid unless signed by ALL parties identified on the lantitle 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.	I/we have discussed this application	on with the applicant and understand its potential impacts to our residence(s);
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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect		
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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect		er is not valid unless signed by ALL parties identified on the land
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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect	I/we are not obligated to waive	the MDS requirement to our residence(s);
aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respec	providing written notice to the NF	RCB approval officer, as set out in the "Minimum Distance Separation
	I/we understand that this waiver	is a public document.
pplication number <u>BA 25007</u>	aving considered my/our rights, I/w	e hereby waive the MDS requirement to my/our residence, with respect to
	polication number BA 2500	7
Signatures of all residence owner(s) on title	Signatures of all residence owner(s)	on title
NATHAN TETTSMA Amanda Teitsma.		

AF	oplicant information NRCB application number: BA 25 00 7
Op	perator/operation name: Kelberal, Farms Ltd.
Ad	dress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5E 33 61 3 W5
(M) ab	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	lowing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hens
	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): With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Per	mit Applicant: Date:March_10, 2025
es	sidence owner(s) to initial:

	Names on land title: <u>Clarence</u> & Johanna Groot
Lega	I land location of residence(s):333⊋MC
Tele	phone number(s)1:
Addr	ess(es)¹ and Postal code(s)¹: _
Plea	ase note that personal contact information is for NRCB use ONLY and not publicly released
	e are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
	ve have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
	e have discussed this application with the applicant and understand its potential impacts to our residence(s);
1/w	re understand that the application does not meet the MDS requirement to my/our residence(s), under a Agricultural Operation Practices Act (AOPA);
I/w titl	re understand that this waiver is not valid unless signed by ALL parties identified on the land e as owners;
I/w	re are not obligated to waive the MDS requirement to our residence(s);
pro	e understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver, by widing written notice to the NRCB approval officer, as set out in the "Minimum Distance Separation DS) Waivers" Fact Sheet; and
I/w	e understand that this waiver is a public document.
	considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to ation number $BA 25007$
	signing authority for Clarence:
	agures of all residence owner(s) on title
C	larence = Johanna Groot
Prin	red names of all residence owner(s) on title
ite:	March 22, 2025

	icant information NRCB application number: BA 25 00 7
Oper	ator/operation name: Kelberal Farms Ltd.
Addre	ess: 61512 B Rap Rd 33 County Of Barrhoad, AB Postal Code: TOG 1R2
Legal	land location of confined feeding operation: 5E 33 6 1 3 W5
(MDS above applie	e requested the residence owner(s) named below to waive the required minimum distance separation to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified e. In making this request, I have provided the owner(s) with an opportunity to review my permit ration and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance ration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
• Ti	ne MDS requirement set out in section 3 of the Standards and Administration Regulation of AOPA. I ave advised the owner(s) that section 3(6)(a) of the Standards and Administration Regulation allows is requirement to be waived by the owners of residences, if they agree in writing to grant a waiver;
• T	nat my proposed development does not meet the required MDS to the owner's residence; and,
• Th	hat this waiver applies only to this application as described. An increase in livestock capacity, annual anure production, level of odour production, change to the site plan or change to a facility that would crease the MDS would require a new waiver.
Follow	ing is a summary of the proposed development:
	be current scope of my confined feeding operation (CFO), including the type, number, and category of estock, if any, is:  De currently have a permit to house 17,408 laying hens.
.16	application for a new AOPA permit proposes the following changes to the existing livestock category, see and/or capacity at my CFO:  Le are applying for a permit to increase to 30,240 laying hers
_	11 J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
100	e proposed new CFO facility(ies), or changes to the existing CFO facilities, including manure storage, nure storage volume and any other pertinent details, if any, are (attach a site layout plan if available):  ith construction of our new barn, we will have a solid manure
91	orage of a capacity to hold it for I year
the a	pplicant understand that the waiver is not valid unless ALL registered owners of the nce sign this document.
ermit /	Applicant Date: March 10, 2025
eside	nce owner(s) to initial:

Email address(es)¹:  Address(es)¹ and Postal code(s)¹:  ¹ Please note that personal contact information is for NRCB use ONLY and not publicly released  l am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location  l/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";  l/we have discussed this application with the applicant and understand its potential impacts to our residence the Agricultural Operation Practices Act (AOPA);  l/we understand that the application does not meet the MDS requirement to my/our residence the Agricultural Operation Practices Act (AOPA);  l/we understand that this waiver is not valid unless signed by ALL parties identified on title as owners;  l/we are not obligated to waive the MDS requirement to our residence(s);  l/we understand that if l/we choose to waive the MDS requirement, l/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Set (MDS) Waivers" Fact Sheet; and  l/we understand that this waiver is a public document.  Having considered my/our rights, l/we hereby waive the MDS requirement to my/our residence, with Application number BA 25007	
<ul> <li>1 Please note that personal contact information is for NRCB use ONLY and not publicly released.</li> <li>I am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location.</li> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence in the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sei (MDS) Waivers" Fact Sheet; and</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with</li> </ul>	
I am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location.  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 in the Agricultural Operation Practices Act (AOPA);  I/we understand that this waiver is not valid unless signed by ALL parties identified on 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 providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sei (MDS) Waivers" Fact Sheet; and  I/we understand that this waiver is a public document.	
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<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence the understand that the application does not meet the MDS requirement to my/our residence the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified or title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sei (MDS) Waivers" Fact Sheet; and</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with</li> </ul>	
<ul> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence in the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified or title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sei (MDS) Waivers" Fact Sheet; and</li> <li>I/we understand that this waiver is a public document.</li> <li>Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with</li> </ul>	ilion/address
<ul> <li>I/we understand that the application does not meet the MDS requirement to my/our residence the Agricultural Operation Practices Act (AOPA);</li> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified or title as owners;</li> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> <li>I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sei (MDS) Waivers" Fact Sheet; and</li> <li>I/we understand that this waiver is a public document.</li> </ul>	sidoneo(e):
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 providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sel (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	nce(s), under
I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sej (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	on the land
I/we understand that if I/we choose to waive the MDS requirement, I/we can revoke the waiver providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Sej (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	
Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with	ver, by Separation
	with respect to
SULLEN LIST OF THE PROPERTY OF	
Shirley Van Boek Printed names of all residence owner(s) on title	

A	Applicant information NRCB ap	oplication number: BA 25 00 7
0	Operator/operation name: Kelberal Farms Lt	d
Ac	Address: 61512 B Rge. Rd 33 County Of Bar	rhead, AB Postal Code: TOG 1R2
Le	Legal land location of confined feeding operation: 5E	33 61 3 W5
ab ap	I have requested the residence owner(s) named below to (MDS) to their residence for the <i>Agricultural Operation Pra</i> above. In making this request, I have provided the owner(s application and a copy of the Natural Resources Conserva Separation (MDS) Waivers" available on the NRCB websit	ectices Act (AOPA) permit application identified s) with an opportunity to review my permit
	<ul> <li>The MDS requirement set out in section 3 of the Standhave advised the owner(s) that section 3(6)(a) of the Standhave advised the owners of the Standhave advised the owners of resider</li> </ul>	Standards and Administration Regulation allows
•	That my proposed development does not meet the requ	uired MDS to the owner's residence; and,
•	<ul> <li>That this waiver applies only to this application as described manure production, level of odour production, change increase the MDS would require a new waiver.</li> </ul>	cribed. An increase in livestock capacity, annual to the site plan or change to a facility that would
Fo	Following is a summary of the proposed development:	
	<ul> <li>The current scope of my confined feeding operation (C livestock, if any, is:</li> </ul>	FO), including the type, number, and category of
	We currently have a permit to be	use 17,468 laving hens.
	5	
	My application for a new AOPA permit proposes the fo type and/or capacity at my CFO:	llowing changes to the existing livestock category,
	My application for a new AOPA permit proposes the formula to the second se	llowing changes to the existing livestock category,
	My application for a new AOPA permit proposes the fotype and/or capacity at my CFO:  We are applying for a permit to  The proposed new CFO facility(ies), or changes to the manure storage volume and any other pertinent details	llowing changes to the existing livestock category,  Increase to 30,240 laying livestock category,  existing CFO facilities, including manure storage, if any, are (attach a site layout plan if available):
	My application for a new AOPA permit proposes the fotype and/or capacity at my CFO:  We are applying for a permit to  The proposed new CFO facility(ies), or changes to the manure storage volume and any other pertinent details with construction of our new barn,	existing CFO facilities, including manure storage, if any, are (attach a site layout plan if available):  We will have a Solid manure
•	My application for a new AOPA permit proposes the fotype and/or capacity at my CFO:  We are applying for a permit to  The proposed new CFO facility(ies), or changes to the manure storage volume and any other pertinent details	existing CFO facilities, including manure storage, if any, are (attach a site layout plan if available):  We will have a Solid manure  for 1 year.
. I thres	<ul> <li>My application for a new AOPA permit proposes the fotype and/or capacity at my CFO:         We are applying for a permit to     </li> <li>The proposed new CFO facility(ies), or changes to the manure storage volume and any other pertinent details with construction of our new barn, storage of a capacity to hold it.</li> <li>I the applicant understand that the waiver is not verificant.</li> </ul>	existing CFO facilities, including manure storage, if any, are (attach a site layout plan if available):  We will have a Solid manure  for 1 year.

R	esidence owner(s) information
	ALL Names on land title: Anna De Vries
1	_egal land location of residence(s):
	Felephone number(s)1: Email address(es)1:
,	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> : _
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
18	m/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.
На	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Ap	plication number BA 25007
	Signatures of an residence owner(s) on title
	Anna. De Vries Printed names of all residence owner(s) on title
	Printed names of all residence owner(s) on title
Da	te: April 22 2025

Ap	plicant information NRCB application number: BA 25 00 7
Ор	erator/operation name: Kelberal Farms Ltd.
Add	dress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leg	pal land location of confined feeding operation: 5E 33 6   3 W5
abc app	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the <i>Agricultural Operation Practices Act</i> (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Foll	owing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
•	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):  With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Per	mit Applicant: Date: Date:
Res	idence owner(s) to initial: HWT A55

	Legal land location of residence(s): Lot b Block 2 Plan 1921349
-	Telephone number(s) <sup>1</sup> : Email address(es) <sup>1</sup> :
1	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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;
	//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.
a	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number $BA$ 25007
	production indinder Diff & Down
	Signatures of all residence owner(s) on title

A	pplicant information NRCB application number: BA 25 007
Ċ	perator/operation name: Kelberal Farms Ltd.
A	ddress: 61512 B Rae Rd 33 County Of Bourhard, AB Postal Code: TOG 1RQ
L	egal land location of confined feeding operation: 5E 33 61 3 W5
ala	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 bove. In making this request, I have provided the owner(s) with an opportunity to review my permit opplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance operation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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•	That this waiver applies only to this application as described. An increase in livestock capacity, annual manure production, level of odeur production, change to the site plan or change to a facility that would increase the MDS would require a new waiver.
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	The current scope of my confined feeding operation (CFO), including the type, number, and category of ivestock, if any, is:
	We currently have a permit to house 17,468 laying hens
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):
	storage of a capacity to hold it for y year.
tr es	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
er	mit Applicant Date: March 21, 3025
0.5	siderice owner(s) to initial:

F	esidence owner(s) information
	ALL Names on land title: Andrew ! Irene Elgersma
	egal land location of residence(s): NW · 34 · 61 · 03 · W 5 Plan 1922 1344 He
-	Telephone number(s)1: Email address(es)1:
	Address(es)1 and Postal code(s)1:
7	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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) Walvers";
R	live 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.
la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	filestich number BA 25007
Ī	And Flores 1 T
	Findrew Elgersma Irene Elgersma Printed names of all residence owner(s) on title
a	March 21, 2025

Ap	olicant information NRCB application number: BA 25007
OF	erator/operation name: Kelberal Farms Ltd.
Ad	Iress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ
Le	al land location of confined feeding operation: 5 = 33 61 3 W5
(M ab	ove requested the residence owner(s) named below to waive the required minimum distance separation (S) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified (New Line making this request, I have provided the owner(s) with an opportunity to review my permit dication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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	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.
Fo	owing 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:
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	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
	e applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Pe	mit Applicant: Date:Date:
Re	sidence owner(s) to initial: ### ##

1	ILL Names on land title: Harrison + Jonine Hoekstra
L	egal land location of residence(s): Plan 3332MC BLOCK 3 LOT 51/2/4
T	elephone number(s) <sup>1</sup> :
A	ddress(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
4	m/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.
a	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number BA 25007
J	Silication number 1971 8300 7
	Sygnatures of all residence owner(s) on title
	Garison Goekstra Janine Hoekstra

App	licant information NRCB application number: BA 25007
Ope	rator/operation name: Kelberal Farms Utd.
Add	ress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ
Lega	al land location of confined feeding operation: 5E 33 61 3 W5
abov appli	re requested the residence owner(s) named below to waive the required minimum distance separation (S) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified re. In making this request, I have provided the owner(s) with an opportunity to review my permit ideation and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance aration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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	That my proposed development does not meet the required MDS to the owner's residence; and,
1	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 no not not not not not not not not not
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	The current scope of my confined feeding operation (CFO), including the type, number, and category of ivestock, if any, is:
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	We are applying for a permit to increase to 30,240 laying hers
r	The proposed new CFO facility(ies), or changes to the existing CFO facilities, including manure storage, nanure storage volume and any other pertinent details, if any, are (attach a site layout plan if available):    Jith construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
I the	applicant understand that the waiver is not valid unless ALL registered owners of the dence sign this document.
Perm	it Applicant: Date: Date:
Resi	dence owner(s) to initial:

1	ALL Names on land title: DYLLAN SEAN DERUITER
1	egal land location of residence(s): Plan 3332 MC Block 4 Lot A
7	Felephone number(s)1:
A	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> : _
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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.
-la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Αр	plication number <u>BA 25007</u>
	Signatures of all residence owner(s) on title
	Dyllan Sean DeRuiter
	Printed names of all residence owner(s) on title

Ар	plicant information NRCB application number: BA 25 00 7
Ор	erator/operation name: Kelberal, Farms Ltd.
Ad	dress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leg	gal land location of confined feeding operation: 5 = 33 6   3 W5
(MI abo	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	lowing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date:Date:
Res	sidence owner(s) to initial:

R	esidence owner(s) information
	ALL Names on land title: Bryan + Catharina Vanderleest
I	egal land location of residence(s):
	elephone number(s)1: Email address(es)1:
1	ddress(es)¹ and Postal code(s)¹: _
7	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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.
Ha	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	olication number BA 25007
, P	- Control Manual Dirica Control
	Signatures of all residence owner(s) on title
y	an Vanderleest Cathasina Vanderleest.
(	Printed names of all residence owner(s) on title
	14-6-1-12 0-6-
Ja	e: March 13 2025

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
A	odress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: 5E 33 61 3 W5
ab ap	have requested the residence owner(s) named below to waive the required minimum distance separation (IDS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified cove. 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 apparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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	Storage of a capacity to hold it for I year.
th	e applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
er	mit Applicant:
es	sidence owner(s) to initial: <u>JTF</u> <u>SSF</u>

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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect opplication number BA 25,007		ALL Names on land title: Jereny France and Symone France
Address(es)¹ and Postal code(s)¹:	1	egal land location of residence(s): LSD B:4 P:3332MC
Please note that personal contact information is for NRCB use ONLY and not publicly released 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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to polication number BA 25,007		elephone number(s)1: Email address(es)1:
I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";  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.  aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to polication number BA 25,007	1	address(es)¹ and Postal code(s)¹: _
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population number BA 25,007  Signalures of all residence owner(s) on title		providing written notice to the NRCB approval officer, as set out in the "Minimum Distance Separation
poplication number BA 25,007  poplication number BA 25,007  poplication number BA 25,007  poplication number BA 25,007		I/we understand that this waiver is a public document.
poplication number BA 25,007  Signatures of all residence owner(s) on title	la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
peronic France & name Error	0	signatures of all residence owner(s) on title
the children trave	1	Printed names of all residence owner(s) on title
	10	e: March 10 2025

A	oplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
Ac	Idress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: SE 33 61 3 W5
Ih (M ab ap	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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Fol	lowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  [Nith construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
the	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Perr	nit Applicant:  Date: March 10, 2025
Resi	idence owner(s) to initial: ROV QD.

	ALL Names on land title: Richard David Delries
	Joanne Evangeline Delvies (aka Johann
	Legal land location of residence(s): NW 34 - 61 - 3 - 5 Plan 7931605 Block (
1	Felephone number(s)1: Email address(es)1:
1	Address(es)¹ and Postal code(s)¹:
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/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);
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ła	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	olication number BA 25007
Ī	
	Signatures of all residence owner(s) on title
1	Richard DaVries Joanne E DeVries

1	Applicant information NRCB application number: BA 25 00 7
(	Operator/operation name: Kelberal Farms Ltd.
A	Address: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1RQ
L	egal land location of confined feeding operation: 5E 33 6   3 W5
l (la a	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 bove. In making this request, I have provided the owner(s) with an opportunity to review my permit pplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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	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.
F	ollowing 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:
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1 +1	
res	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Pe	rmit Applicant: Date: March 10, 2025
Re	sidence owner(s) to initial:

	desidence owner(s) information
	ALL Names on land title: Wilma Marian Wierenga
	O .
1	egal land location of residence(s): WW-34-061-03-5
7	Felephone number(s) <sup>3</sup> Email address(es) <sup>1</sup> : _
1	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
l a	m/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
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	I/we understand that this waiver is a public document.
Ha	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	olication number <u>BA</u> 25007
	Signatures of all residence owner(s) on title  William M. William na
-	Printed names of all residence owner(s) on title
ate	. April 1, 2025

A	pplicant information NRCB application number: BA 25 00 7
C	perator/operation name: Kelberal Farms Ltd.
A	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
L	egal land location of confined feeding operation: <u>SE 33 61 3</u> W5
(N ab	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 pove. 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 apparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca. I have also explained:
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	M
•	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
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	Storage of a capacity to hold it for I year.
I th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Peri	mit Applicant: Date: March 10, 2025
Res	idence owner(s) to initial:

1-	Marlene Janssen
1	egal land location of residence(s): portion of NE 33 61 03 5
	Felephone number(s) <sup>1</sup> Email address(es) <sup>1</sup> :
A	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
7	Please note that personal contact information is for NRCB use ONLY and not publicly released
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	I/we understand that this waiver is a public document.
На	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number $BA$ 25007
7	Signatures of all residence owner(s) on title
	Bertha Janssen Mulene Bassen
	Printed names of all residence owner(s) on title

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
A	ddress: 61512 B Rae Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: 5E 33 61 3 W5
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	Storage of a capacity to hold it for I year.
th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
er.	mit Applicant:  Date: March 10, 2025
les	sidence owner(s) to initial: BJP PP

	ALL Names on land title: Benjamin John Peters  Bichard Peters
-	76,672
1	egal land location of residence(s): Plan 3332 MC Block 4 Lot L
	Telephone number(s) <sup>1</sup> Email address(es) <sup>1</sup> :
F	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	m/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
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	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;
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la	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number BA 25007
-	Signatures of all residence owner(s) on title
e	ijamin John Peters Richard Peters
	Printed names of all residence owner(s) on title
	A

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
A	ddress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: 5E 33 61 3 W5
at	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 cove. 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 apparation (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.
Fo	llowing 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:
	We currently have a permit to house 17,408 laying hens.
٠	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
I th	the applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Peri	mit Applicant: Date:March_10, 2025
Res	sidence owner(s) to initial: TV SV

ALL Names on land title:	las Vanlaar 3 Sally Vanlaar
Legal land location of residence(s):	LOT M BIK 4 PI 3332MC
Telephone number(s) <sup>1</sup>	Email address(es) <sup>1</sup> :
Address(es)1 and Postal code(s)1: _	
1 Please note that personal contact in	nformation is for NRCB use ONLY and not publicly released
	a residence(s) located at the above noted legal land location/address:
	heet "Minimum Distance Separation (MDS) Waivers";
	n with the applicant and understand its potential impacts to our residence(s);
	ion does not meet the MDS requirement to my/our residence/s) under
I/we understand that this waive title as owners;	er is not valid unless signed by ALL parties identified on the land
I/we are not obligated to waive	the MDS requirement to our residence(s);
I/we understand that if I/we choos providing written notice to the NR0 (MDS) Waivers" Fact Sheet; and	se to waive the MDS requirement, I/we can revoke the waiver, by CB approval officer, as set out in the "Minimum Distance Separation
I/we understand that this waiver is	s a public document.
laving considered my/our rights, I/we	hereby waive the MDS requirement to my/our residence, with respect to
Application number BA 25007	
Signatures of all residence owner(s) o	
Toblas Van Var  Printed names of all residence owner(s) of	3 Sally Vernlager
Date: 19/wwch/202	5

Ap	plicant information NRCB application number: BA 25 00 7
Op	perator/operation name: Kelberal Farms Utd.
Ad	dress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leç	gal land location of confined feeding operation: 5E 33 61 3 W5
abo	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Foll	owing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  [Nith construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
the	e applicant understand that the waiver is not valid unless ALL registered owners of the dence sign this document.
)ern	nit Applicant: Date: Date: Date:
Resi	idence owner(s) to initial:

L	egal land location of residence(s): NW 34-61-3-W5 LOTB BLOCK 5 PLAN 33
T	elephone number(s) <sup>1</sup> : Email address(es) <sup>1</sup> :
A	ddress(es)¹ and Postal code(s)¹: _
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
	n/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;
	/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.
lav	ing considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	lication number BA 25007
Í	
-	Signatures of All residence owner(s) on title

App	licant information	NRCB application number: BA 25 00 7
Ope	rator/operation name: <u>Kelb</u>	eral Farms Ltd.
Addı	ess: 61512 B Rge Rd 3	3 County Of Barrhead, A.B Postal Code: TOG 1R2
Lega	I land location of confined feeding	ng operation: 5 = 33 6   3 W5
abov appli	<ul> <li>to their residence for the Agrie</li> <li>In making this request, I have cation and a copy of the Natura</li> </ul>	er(s) named below to waive the required minimum distance separation cultural Operation Practices Act (AOPA) permit application identified a provided the owner(s) with an opportunity to review my permit Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance on the NRCB website at www.nrcb.ca. I have also explained:
t	ave advised the owner(s) that s	section 3 of the Standards and Administration Regulation of AOPA. I ection 3(6)(a) of the Standards and Administration Regulation allows the owners of residences, if they agree in writing to grant a waiver;
• 1	hat my proposed development	does not meet the required MDS to the owner's residence; and,
Г	That this waiver applies only to the nanure production, level of odou ncrease the MDS would require	nis application as described. An increase in livestock capacity, annual or production, change to the site plan or change to a facility that would a new waiver.
Follo	wing is a summary of the propos	sed development:
• T	he current scope of my confined vestock, if any, is:	d feeding operation (CFO), including the type, number, and category of
1	We currently have o	e permit to house 17,408 laying hens.
t	pe and/or capacity at my CFO:	permit proposes the following changes to the existing livestock category,
1	we are applying for	a permit to increase to 30,240 laying hens
n	nanure storage volume and any	es), or changes to the existing CFO facilities, including manure storage, other pertinent details, if any, are (attach a site layout plan if available):
0	storage of a cupaci	ty to hold it for I year.
I the	applicant understand that lence sign this document.	the waiver is not valid unless ALL registered owners of the
Perm	it Applicant:	_ Date:
Resid	lence owner(s) to initial:	AN JA

ALL Names on land title:	imes Aciseh
	issica Aarsen
egal land location of residence(s	s):
Felephone number(s)1:	Email address(es)1:
Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :	
Please note that personal contact	Information is for NRCB use ONLY and not publicly released
am/we are the legal landowner(s) of	of a residence(s) located at the above noted legal land location/address:
	Sheet "Minimum Distance Separation (MDS) Waivers";
I/we have discussed this applicati	ion with the applicant and understand its potential impacts to our residence(s);
I/we understand that the application Agricultural Operation Practi	ation does not meet the MDS requirement to my/our residence(s), under tices Act (AOPA);
I/we understand that this wait title as owners;	ver is not valid unless signed by ALL parties identified on the land
I/we are not obligated to waive	e the MDS requirement to our residence(s);
I/we understand that if I/we choo providing written notice to the NI (MDS) Waivers" Fact Sheet; and	ose to waive the MDS requirement, I/we can revoke the waiver, by RCB approval officer, as set out in the "Minimum Distance Separation d
I/we understand that this waiver	r is a public document.
aving considered my/our rights, I/w	we hereby waive the MDS requirement to my/our residence, with respect to
pplication number <u>BA</u> 2500	The state of the s
Signatures of all residence owner(s)	
Jessica Aarse	a James Agraen

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal, Farms Idd.
A	ddress: 61512B Rap. Rd 33 County Of Barrhand, AB Postal Code: TOG 1RQ
Le	egal land location of confined feeding operation: SE 33 61 3 W5
ab ap	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 cove. In making this request, I have provided the owner(s) with an opportunity to review my permit oplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (MDS) Waivers" available on the NRCB website at www.nrcb.ca.1 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.
Fo	llowing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:  We are applying for a permit to increase to 30,240 laying hers
	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):  Nith construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
l th	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: March 12, 2025
Res	sidence owner(s) to initial:

Residence owner(s) information	
ALL Names on land title: Carolym	Hilda Uricranga
Legal land location of residence(s): NW-	34-061-03-5 2-6-8921821
Telephone number(s)1:	Email address(es)1:
Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :	
<sup>1</sup> Please note that personal contact information	is for NRCB use ONLY and not publicly released
am/we are the legal landowner(s) of a residen	ce(s) located at the above noted legal land location/address:
I/we have read the NRCB Fact Sheet "Mini-	mum Distance Separation (MDS) Waivers";
<ul> <li>I/we have discussed this application with the a</li> </ul>	pplicant and understand its potential impacts to our residence(s);
<ul> <li>I/we understand that the application does need the Agricultural Operation Practices Act (AC)</li> </ul>	not meet the MDS requirement to my/our residence(s), under DPA);
<ul> <li>I/we understand that this waiver is not v title as owners;</li> </ul>	alid unless signed by ALL parties identified on the land
<ul> <li>I/we are not obligated to waive the MDS</li> </ul>	requirement to our residence(s);
<ul> <li>I/we understand that if I/we choose to waive providing written notice to the NRCB approv (MDS) Waivers" Fact Sheet; and</li> </ul>	e the MDS requirement, I/we can revoke the waiver, by val officer, as set out in the "Minimum Distance Separation
I/we understand that this waiver is a public	document.
Having considered my/our rights, I/we hereby wa	aive the MDS requirement to my/our residence, with respect to
Application number BA 25007	
Signatures of all residence owner(s) on title	
Printed names of all residence owner(s) on title	9C.
Date: Mar, 12 /2025	

A	pplicant information NRCB application number: BA 25007
0	perator/operation name: Kelberal Farms Ltd.
A	ddress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	egal land location of confined feeding operation: SE 33 61 3 W5
ab ap	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 bove. In making this request, I have provided the owner(s) with an opportunity to review my permit oplication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance apparation (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.
Fo	llowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hens
•	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):  With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
res	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: Date: Date: Date:
Res	sidence owner(s) to initial:

ALL Names on land title: anne Marie Veenstra
Legal land location of residence(s): NE 33-061-03-5 3-6-892 1821
Telephone number(s)1: Email address(es)1: _
Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
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:
<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> </ul>
<ul> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> </ul>
<ul> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> </ul>
<ul> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> </ul>
<ul> <li>I/we are not obligated to waive the MDS requirement to our residence(s);</li> </ul>
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 t
Application number BA 25007
Signatures of all residence owner(s) on title
anno Harre Veenstre
Printed names of all residence owner(s) on title
Date: March 24/2024

Ap	plicant information NRCB application number: BA 25007
Ор	erator/operation name: Kelberal Farms Ltd.
Ad	dress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leg	gal land location of confined feeding operation: SE 33 61 3 W5
abo	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the <i>Agricultural Operation Practices Act</i> (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	lowing 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:  We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:  We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure storage of a capacity to hold it for I year.
	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
Per	mit Applicant:
Res	sidence owner(s) to initial:

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	Resid	ence owner(s) information
Legal land location of residence(s):  Telephone number(s)¹:  Email address(es)¹:  Address(es)¹ and Postal code(s)¹:  **Please note that personal contact information is for NRCB use ONLY and not publicly released 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 BA 25007  Signatures of all residence owner(s) on title  Fig. 4 Con Dasse Race Grace Van Dasse Race	ALL	
Telephone number(s)¹:  Address(es)¹ and Postal code(s)¹:  ¹ Please note that personal contact information is for NRCB use ONLY and not publicly released 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 BA 35007  Signatures of all residence owner(s) on title  Fig. 2 Contact Co	_	GRACE CAN DASSELAM
Address(es)¹ and Postal code(s)¹:  ¹ Please note that personal contact information is for NRCB use ONLY and not publicly released 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, BA 25007  Signatures of all residence owner(s) on title  Crace Van Dasselaar	Lega	al land location of residence(s):
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, BA 25007  Signatures of all residence owner(s) on title  Pieter Van Dasselaar Grace Van Dasselaar	Tele	phone number(s)1: Email address(es)1:
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, BA 25007  Signatures of all residence owner(s) on title  Prefer Van Dasselaar Grace Van Dasselaar	Addr	ess(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
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, BA 25007  Signatures of all residence owner(s) on title  Prefer Van Dasselaar Grace Van Dasselaar	1 Ple	ase note that personal contact information is for NRCB use ONLY and not publicly released
// We have discussed this application with the applicant and understand its potential impacts to our residence(s);  // We understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);  // We understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;  // We are not obligated to waive the MDS requirement to our residence(s);  // We understand that if // We choose to waive the MDS requirement, // 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  // We understand that this waiver is a public document.  Having considered my/our rights, // We hereby waive the MDS requirement to my/our residence, with respect to Application number, BA 25007  Signatures of all residence owner(s) on title  Fig. Let Van Dasselaar Grace Van Dasselaar  // Crace Van Dasselaar	l am/v	ve are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
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, BA 25007  Signatures of all residence owner(s) on title  Crace Van Dasselaar  Grace Van Dasselaar	• 1/1	ve have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
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, BA 25007  Signatures of all residence owner(s) on title  Pieter Van Dasselaar Grace Van Dasselaar	· 1/v	we have discussed this application with the applicant and understand its potential impacts to our residence(s);
title as owners;  //we are not obligated to waive the MDS requirement to our residence(s);  //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  //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, BA 25007  Signatures of all residence owner(s) on title  Piefer Van Dasselaar Grace Van Dasselaar		
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, BA 25007  Signatures of all residence owner(s) on title  Pieter Van Dasselaar Grace Van Dasselaar		
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, BA 25007  Signatures of all residence owner(s) on title  Pieter Van Dasselaar Grace Van Dasselaar	• 1/1	we are not obligated to waive the MDS requirement to our residence(s);
Having considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to  Application number, BA 25007  Signatures of all residence owner(s) on title  Pieter Van Dasselaar Grace Van Dasselaar	pr	oviding written notice to the NRCB approval officer, as set out in the "Minimum Distance Separation
Application number BA 25007  Signatures of all residence owner(s) on title  Pieter Van Dasselaar Grace Van Dasselaar	• 1/1	we understand that this waiver is a public document.
Signatures of all residence owner(s) on title Pieter Van Dasselaar Grace Van Dasselaar	Havin	g considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Signatures of all residence owner(s) on title Pieter Van Dasselaar Grace Van Dasselaar	Appli	cation number .BA 25007
Pieter Van Dasselaar Grace Van Dasselaar		
	Sig	gnatures of all residence owner(s) on title
	P	leter Van Dasselaar Grace Van Dasselaar
	Pri	
Date: March 31 2025		M \ a a a a a =

Ap	plicant information NRCB application number: BA 25 00 7
Ор	erator/operation name: Kelberal Farms Ltd.
Ad	dress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leg	gal land location of confined feeding operation: 5E 33 61 3 W5
(MI abo	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	lowing 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:
	We currently have a permit to house 17,468 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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):  [With construction of our new barn, We will have a solid manure
	Storage of a capacity to hold it for I year.
	ne applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant: Date: March 10, 2025
Res	sidence owner(s) to initial:

R	tesidence owner(s) information
	ALL Names on land title: Lambertus Terence and Janny Lena
	DeVries.
	Legal land location of residence(s): _
	Telephone number(s) <sup>1</sup> Email address(es) <sup>1</sup> :
	Address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
*	<sup>1</sup> Please note that personal contact information is for NRCB use ONLY and not publicly released
1	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.
Н	aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
A	pp <u>lication number</u> BA 25007
	Signatures of all residence owner(s) on title
1	ombertus Terence DeVries Janny Lena DeVries Printed names of all residence owner(s) on title
D	ate: Apr. 1 2 2025

Ар	plicant information NRCB application number: BA 25 00 7
Ор	erator/operation name: Kelberal Farms ktd.
Ad	dress: 61512B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Leg	gal land location of confined feeding operation: 5E 33 61 3 W5
(MI abo	ave requested the residence owner(s) named below to waive the required minimum distance separation DS) to their residence for the <i>Agricultural Operation Practices Act</i> (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit olication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fol	lowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:  We are applying for a permit to increase to 30,240 laying hers
	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):    With construction of our new barn, we will have a solid manure
	storage of a capacity to hold it for I year.
	te applicant understand that the waiver is not valid unless ALL registered owners of the sidence sign this document.
Per	mit Applicant:  Date: March 10, 2025
Res	sidence owner(s) to initial:
	6. S. on behalf of NERC (chairman).

Re	esidence owner(s) information
A	ALL Names on land title: NEERLANDIA CHRISTIAN REFORMED CHURCH.
L	egal land location of residence(s): 5W 34 - 61 - 3 - W5
7	Telephone number(s)1: Email address(es)1:
P	address(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
1	Please note that personal contact information is for NRCB use ONLY and not publicly released
la	m/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.
На	aving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
Ar	oplication number BA 25007
1	Signatures of all residence owner(s) on title
	Signatures of all residence owner(s) on title  STEVEN DEVRIES, CLERK, NEERLANDIA CHRISTIAN REFORMED CHURCH  Printed names of all residence owner(s) on title
-	ate: APR. 14, 2025
Di	ate: //P/s. 11, and
	BARRY STRYDHORST, CHAIRMAN, NEERLANDIA CAPOLICATION BARRETOR PROCEDO OHURCH. MDS Waiver BARRY STRYDHORST, CHAIRMAN, NEERLANDIA CAPOLICATION BARRETOR PROCEDO OHURCH.

Applicant information	NRCB application number: BA 25 00 7
Operator/operation name: Kell	peral Farms Utd.
Address: 61512 B Rge Rd 3	33 County Of Barrhead, AB Postal Code: TOG 1R2
Legal land location of confined fee	ding operation: <u>5E 33 61 3 W5</u>
I have requested the residence ow (MDS) to their residence for the Agabove. In making this request, I ha application and a copy of the Natur	rner(s) named below to waive the required minimum distance separation gricultural Operation Practices Act (AOPA) permit application identified are provided the owner(s) with an opportunity to review my permit ral Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance ble on the NRCB website at www.nrcb.ca. I have also explained:
have advised the owner(s) that	in section 3 of the Standards and Administration Regulation of AOPA. I t section 3(6)(a) of the Standards and Administration Regulation allows by the owners of residences, if they agree in writing to grant a waiver;
That my proposed development	nt does not meet the required MDS to the owner's residence; and,
<ul> <li>That this waiver applies only to manure production, level of od increase the MDS would require</li> </ul>	o this application as described. An increase in livestock capacity, annual lour production, change to the site plan or change to a facility that would re a new waiver.
Following is a summary of the prop	posed development:
livestock, if any, is:	ned feeding operation (CFO), including the type, number, and category of
We currently have	a permit to house 17,468 laying hens.
type and/or capacity at my CF	A permit proposes the following changes to the existing livestock category, 0: for a permit to increase to 30,240 laying hens
manure storage volume and a	y(ies), or changes to the existing CFO facilities, including manure storage, ny other pertinent details, if any, are (attach a site layout plan if available):  Pour new barn, we will have a solid manure
storage of a capaci	city to hold it for I year.
	at the waiver is not valid unless ALL registered owners of the
Permit Applicant:	gnature Date: March 10, 2035
Residence owner(s) to initial:	PVA.

PARKE	######################################
	esidence owner(s) information Trustees of : Neerlandia Canadian Reformed Church and Manse
	ALL Names on land title: <u>Pieter Dejong</u> , John Kippers,  Peter Van Assen
1	Monge - 5026-49 St Neerlandia, AB. TOG IRO Legal land location of residence(s): Church - 4705-50 Ave Neerlandia, AB TOG IRO
7	elephone number(s)1: See attachment Email address(es)1: See attachment
. /	address(es)1 and Postal code(s)1: 5ee attachment
7	Please note that personal contact information is for NRCB use ONLY and not publicly released
la	m/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
0	I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";
0	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);
0	I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;
0	I/we are not obligated to waive the MDS requirement to our residence(s);
0	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
U	I/we understand that this waiver is a public document.
На	ving considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	plication number RA AFOOT
1.	
	ete Dejong John Kippers Peter Van Assen

#### April 15, 2025

#### Attachment to Waiver Declaration

#### Pieter Dejong



#### John Kippers



#### Peter VanAssen



Applicant information	NRCB application number: BA 25 00 7
Operator/operation name: Kelberal F	arms Ltd.
Address: 61512 B Rae Rd 33 Coun	ty Of Barrhead, AB Postal Code: TOG 1R2
Legal land location of confined feeding operat	tion: 5E 33 61 3 W5
above. In making this request, I have provided application and a copy of the Natural Resource	ned below to waive the required minimum distance separation operation Practices Act (AOPA) permit application identified the owner(s) with an opportunity to review my permit ces Conservation Board (NRCB) Fact Sheet "Minimum Distance NRCB website at www.nrcb.ca. I have also explained:
<ul> <li>The MDS requirement set out in section 3 have advised the owner(s) that section 30</li> </ul>	6 of the Standards and Administration Regulation of AOPA. I 6)(a) of the Standards and Administration Regulation allows ers of residences, if they agree in writing to grant a waiver;
<ul> <li>That my proposed development does not</li> </ul>	meet the required MDS to the owner's residence; and,
<ul> <li>That this waiver applies only to this applic manure production, level of odour product increase the MDS would require a new was</li> </ul>	ration as described. An increase in livestock capacity, annual tion, change to the site plan or change to a facility that would aiver.
Following is a summary of the proposed devel	lopment:
<ul> <li>The current scope of my confined feeding livestock, if any, is:</li> </ul>	operation (CFO), including the type, number, and category of
We currently have a pern	nit to house 17,408 laying hens.
<ul> <li>My application for a new AOPA permit pro type and/or capacity at my CFO:</li> </ul>	poses the following changes to the existing livestock category,
the first transfer of the control of	rmit to increase to 30,240 laying hens.
manure storage volume and any other per	anges to the existing CFO facilities, including manure storage, tinent details, if any, are (attach a site layout plan if available):  wham, we will have a solid manure
Storage of a capacity to	
the applicant understand that the waiv residence sign this document.	ver is not valid unless ALL registered owners of the
Permit Applicant:	Date: March 10, 2025
Residence owner(s) to initial:	W

LL Names on land title: <u>Le</u>	ed + Andrew Wierenge
egal land location of residence(	s): NE-33-61-3-45
elephone number(s)1:	Email address(es)1:
ddress(es)1 and Postal code(s)1	:_
Please note that personal contac	t information is for NRCB use ONLY and not publicly released
n/we are the legal landowner(s)	of a residence(s) located at the above noted legal land location/address:
	Sheet "Minimum Distance Separation (MDS) Waivers";
	tion with the applicant and understand its potential impacts to our residence(s);
	ation does not meet the MDS requirement to my/our residence(s) under
I/we understand that this waititle as owners;	iver is not valid unless signed by ALL parties identified on the land
I/we are not obligated to waiv	e the MDS requirement to our residence(s);
I/we understand that if I/we cho	oose to waive the MDS requirement, I/we can revoke the waiver, by
I/we understand that this waive	
ing considered my/our rights. I/v	ve hereby waive the MDS requirement to my/our residence, with respect to
olication number BA 2500	
neadon number Dit 2500	
Signatures of all residence owner(s	o) on title
ent Wierenca	andreg Wierenag
Printed names of all residence own	er(s) on title

A	oplicant information NRCB application number: BA 25.007
0	perator/operation name: Kelberal Farms Ltd.
Ac	Idress: 61512 B Rge Rd 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5E 33 6   3 W5
ab ap	ave requested the residence owner(s) named below to waive the required minimum distance separation (DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance paration (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.
Fo	llowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
er	mit Applicant: Date:
es	sidence owner(s) to initial:

Residence owner(s) information
ALL Names on land title: Daniel Schuring, Carline Schuring
Legal land location of residence(s): NW-34-61-3-5 Neerlandia
Telephone number(s)1:
Address(es)¹ and Postal code(s)¹:
<sup>1</sup> Please note that personal contact information is for NRCB use ONLY and not publicly released
am/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address
<ul> <li>I/we have read the NRCB Fact Sheet "Minimum Distance Separation (MDS) Waivers";</li> </ul>
<ul> <li>I/we have discussed this application with the applicant and understand its potential impacts to our residence(s);</li> </ul>
<ul> <li>I/we understand that the application does not meet the MDS requirement to my/our residence(s), under the Agricultural Operation Practices Act (AOPA);</li> </ul>
<ul> <li>I/we understand that this waiver is not valid unless signed by ALL parties identified on the land title as owners;</li> </ul>
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 t
Application number BA 25007
Daniel Schuring, Carline Schuring
Printed names of all residence owner(s) on title
Date: March 30/25

A	pplicant information NRCB application number: BA 25 00 7
0	perator/operation name: Kelberal Farms Ltd.
Ac	odress: 61512 B Rge. Rd. 33 County Of Barrhead, AB Postal Code: TOG 1R2
Le	gal land location of confined feeding operation: 5 = 33 6   3 W5
ab	ave requested the residence owner(s) named below to waive the required minimum distance separation (DS) to their residence for the Agricultural Operation Practices Act (AOPA) permit application identified ove. In making this request, I have provided the owner(s) with an opportunity to review my permit plication and a copy of the Natural Resources Conservation Board (NRCB) Fact Sheet "Minimum Distance eparation (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.
Fo	llowing 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:
	We currently have a permit to house 17,408 laying hens.
	My application for a new AOPA permit proposes the following changes to the existing livestock category, type and/or capacity at my CFO:
	We are applying for a permit to increase to 30,240 laying hers
	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): With construction of our new barn, we will have a solid manure
	Storage of a capacity to hold it for I year.
th	e applicant understand that the waiver is not valid unless ALL registered owners of the idence sign this document.
er	mit Applicant: Date: Date:
les	idence owner(s) to initial:

	L Names on land title: Koun & Beatrice Tiemstra
Le	gal land location of residence(s): Plan 9623435, Block 7, Lot 1
Te	lephone number(s)1: Email address(es)1:
Ac	dress(es) <sup>1</sup> and Postal code(s) <sup>1</sup> :
† F	lease note that personal contact information is for NRCB use ONLY and not publicly released
	n/we are the legal landowner(s) of a residence(s) located at the above noted legal land location/address:
<b>L</b>	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.
lav	ring considered my/our rights, I/we hereby waive the MDS requirement to my/our residence, with respect to
	olication number BA 25007
.1-1	
4	Signatures of all residence owner(s) on title
	Kevin Tiemstra Beatrice Tiemstra