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AGRICULTURE.DELAWARE.GOV



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**** FOR DNMP USE ****

Form Number

Date Entered

NUTRIENT MANAGEMENT ANNUAL REPORT PERIOD 2020

1. PARTICIPANT INFORMATION

2. MANAGEMENT PLAN TYPE

Applicant Name	
Mailing Address	
Phone	
Email	
Operation Name	
Operation Address	
Name, Number & Expiration of NM Certification Holder in the Operation	

Plan Types:

- Nutrient Management Plan (NMP) - Crops with or without Animals
- Animal Waste Management Plan (AWMP – No Crops)
- CAFO (Concentrated Animal Feeding Operation Plan)

Management Plan Type	
NM Consultant Name	
Start Date of Most Current Plan	
Expiration Date of Most Current Plan	
Total Acres Included in the Plan	
Years of Plan	

3. WATERSHED – Geographical Location(s) of Operation

%	Watershed	%	Watershed	%	Watershed

4. ANIMAL TYPES Not Applicable

Animal Type	Total Number	Animal Type	Total Number
Poultry (capacity per flock)		Swine	
Dairy		Horse	
Beef		Other (Specify):	

5. MANURE EXPORT FOR LAND APPLICATION Not Applicable

Manure Type	Amount Exported	Circle One		Name of Receiver
		Tons	Gals	
		Tons	Gals	

Note: Include additional sheets if necessary

6. MANURE/POULTRY MORTALITY EXPORT FOR ALTERNATIVE USE Not Applicable

Manure Type	Amount Exported	Circle One		Name of Receiver
		Tons	Gals	
		Tons	Gals	

Example: Mushroom Industry, Greener Solutions, etc...

7. LAND APPLICATION OF MANURE Not Applicable

Please indicate the total amount of manure, litter, or process wastewater land applied during the calendar year and the total number of acres to which it was applied. Manure types include: Chicken, Dairy, Swine, Horse, & Beef. If applications do not match these types, please specify type below.

Manure Type	Dry Manure Applied		Liquid Manure Applied	
	Total Tons	Total Acres	Total Gallons	Total Acres

8. SUMMARY OF NUTRIENT APPLICATIONS Not Applicable

Please indicate the total number of pounds (lbs.) of commercial Nitrogen and Phosphorous applied during the calendar year and the total number of acres to which it was applied.

Nitrogen		Phosphorous	
Total Pounds	Total Acres	Total Pounds	Total Acres

9. MANURE GENERATED BY ANIMAL TYPE

Animal Type	Amount	Circle One	
		Tons	Gallons

10. CROP YIELD GOALS

Did overall average crop yield meet or exceed the planned yield	Yes	No	N/A	If No, Reason:
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goal average?

11. REQUIREMENT TO SUBMIT MANURE ANALYSIS

Please attach or send a copy of your manure analysis performed by an approved laboratory within the last calendar year.

Last Manure Sample Date: _____

12. SUMMARY OF DISCHARGES FROM PRODUCTION AREAS

	Circle One	
Did the farm have a discharge as defined by the Delaware CAFO Regulations within the last 12 months?	Yes	No
If YES, please fill out the table below		

<i>Date of Discharge</i>	<i>Approximate Time of Discharge</i>	<i>Approximate Volume of Discharge</i>	<i>Circle One</i>	
			Tons	Gallons

This report is provided as truthful and accurate to the best of my knowledge.

_____ Signature _____ Date