

Schedule OFC: On-farm Storage Facility Permit

Location Area Map: Please indicate the approximate distance from the On-farm Storage Facility to each of the following:

Nearest residence _____ feet Nearest City Boundary _____ feet

Nearest hospital _____ feet Nearest Institution _____ feet

Nearest down gradient surface water – Name of lake, stream, etc. and approximate distance:

Plot Plan: Is a plot plan of the on-farm storage facility provided? Yes No

Construction Plans and Specifications: Please provide all applicable information requested below to supplement the information provided on the construction drawings. If additional space is needed, photocopies of this form or additional sheets may be attached.

Storage Tank Schedule for: Bulk liquid pesticides Bulk liquid fertilizers

Tank No.	Product Stored	Tank Capacity	Tank Dimensions	Material of Construction	Tank Type (flat or cone bottom, etc.)

Secondary Containment Structure:

Material of construction:_____ Dimensions:_____ Length _____ Width _____ Depth

If the secondary containment structure is exposed to precipitation, please verify by checking the box that the facility will handle precipitation accumulated within the secondary containment structure in accordance with the requirements of **8 Illinois Administrative Code 255.180 (i)**.

Bulk Dry Fertilizer and Bulk Dry Pesticide Storage: Please provide the information requested below for each bulk dry fertilizer and bulk dry pesticide storage structure. If additional space is need, please attach a separate sheet.

Structure #	Product Stored	Storage Capacity	Structure Dimensions (feet)		# of Bins	Materials of Construction		
			Width	Length		Building	Floor	Roof