Kansas Water Pollution Control Permit

KDHE Livestock Permit

Closure Request Form

Please be advised:

I ____________________________________________, as the authorized signatory of ____________________________

Printed Name

________________________________________________________, a confined animal feeding facility located in

Facility Name Continued

the____________________________________________ Section

of ______________________________ County, Kansas, having a Kansas Water Pollution Control Permit number

County

________________________________________________________ with the State of Kansas, do request to close all, or a portion, of the

Permit Number

existing livestock facilities associated with this Permit. ____________________________________________

Facilities Requested to be Closed

__________________________________________

Facilities Requested to be Closed Continued

Signed: ____________________________________________ Date: __________________________

If you have any questions about this form please contact with the Livestock Waste Management Section at

785-296-6432 or kdhe.feedlots@ks.gov

Please return this completed form to the Livestock Waste Management Section at:

Kansas Department of Health and Environment
Livestock Waste Management Section
1000 SW Jackson St., Suite 430
Topeka, KS 66612-1367

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