**INSERT COUNTY LETTERHEAD**

***Letter 4.B.CAO (sent certified mail return receipt requested and regular mail)***

*Date*

CERTIFIED MAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Animal Operator Name (husband and wife)*

*Address*

**Re: FINAL NOTICE - Requirement to Implement Your Current Nutrient Management Plan**

Dear Mr. and Mrs. *Animal Operator Name,*

This letter is sent as a follow up to staff’s *[Date1]* site visit where they reassessed the implementation status of your Act 38 (commonly referred to as Pennsylvania’s Nutrient and Odor Management Act) Nutrient Management Plan. This was their second visit to verify that you implemented the required corrective action(s) as outlined in their earlier letter dated *[Date2]*. As of the date of this re-inspection, you have not met the plan implementation requirements outlined in the previous letter, as demonstrated on the attached inspection report for this visit.

As is indicated on the inspection report, you remain to be non-compliant on the following issue(s):

|  |  |  |
| --- | --- | --- |
| **Non-Compliance finding** | **Corrective action required** | **Timeframe to complete corrective action** |
| *[Finding3]* | *[Actions Required4]* | *[Date5]* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

The State Conservation Commission’s (SCC) program policies oblige you to implement the required corrective actions within the timeframe provided in the above schedule in order to regain compliance with the law. We are directed to revisit your operation in order to confirm that you have implemented the required corrective action*(s)* outlined above. *[NMS’s Name7]* plans to visit your animal operation on *[Date and Time6]* in order to reassess your operation. All compliance issues noted above are required to be corrected at the time of the next visit. Please make yourself available on that date so staff can discuss the corrective action(s) you have taken to address this *(these)* non-compliant issue(s). If you cannot meet on this date and time, please call *[Name7]* at least 5 days prior to this date so that they we can reschedule to a date that meets your schedule.

This is your **final notice** directing you to comply with these regulatory requirements. If you have not completely implemented the required corrective action(s) at the time of the next visit, our office will be obligated to refer this case to the SCC for enforcement action. Please be aware that the SCC is very firm in ensuring that animal operations fully implement their Nutrient Management Plans, so I highly encourage you to implement this (these) corrective action(s) within the timeframe provided in order to avoid possible enforcement actions such as fines, penalties and orders that the SCC may impose.

If you have any questions relating to this obligation, please contact me, or *[Name7*] at the conservation district office so that we can provide whatever additional information or direction you may need.

Sincerely,

*CD District Manager*

Enclosure: Inspection report

cc: File

*[Name], SCC Regional Coordinator*

*[Name], DEP Regional Office (if a CAFO)*

*Date1 =* Date of second site visit

*Date2 =* Date of first letter (standard letter 4.A.)

*Finding3 = Individually list the deficiencies you noted during your inspection*

*Actions Required4 = List individually the correction actions required to come back into compliance*

*Date5 =* establish a date you can realistically expect the compliance measure to be completed, use your professional judgment on establishing this date. The SCC Regional Coordinator can also assist in establishing this compliance date. This date should not go past 3 months unless it is an unusual circumstance.

*Date and Time6 = Set a date and time which should be about* 3-7 days following the farmer’s required date to fix the non-compliant issues

*Name7 = Name of CD staff person (typically the NMS) who will be performing the onsite visit*