

Agriculture Odor Inspection Report

Facility Name:	Date:	Time:	Repeat Non-Compliance	<input type="checkbox"/>
Owner:	Inspection Type:			
Address:	<input type="checkbox"/> Routine	<input type="checkbox"/> Follow-up		
City/State/zip:	<input type="checkbox"/> Complaint	<input type="checkbox"/> Other	Non-Compliance	<input type="checkbox"/>
An Odor inspection was conducted at your facility on this date. Items found to be in non-compliance with IDAPA 02.04.16 are identified below.				

ITEM/DESCRIPTION	Type	Comments	Non-Compliance	Comments:
1. Facility Waste Handling				
a. Freestall Flush	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Freestall Scrape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Alley Flush	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Alley Scrape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Open Lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Transfer Station	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Separation System				
a. Mechanical – # of Systems:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Concrete – # of Cells:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Earthen – # of Cells:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Facility Waste Containment				
a. Earthen Storage – # of Cells:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Concrete – # of Cells:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Evaporative – # of Cells:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Metal Structure – # of Cells:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Open Lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Solid Storage Area				
a. Concrete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Earthen/Open Lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Composting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Land Application				
a. Sprinkler Irrigation System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1. Type:				
b. Flood/Gravity Irrigation System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Liquid/Slurry Manure Spreader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Solid Manure Spreader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Incorporation Practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Feed Storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Mortality Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Facility Monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

The Idaho Agriculture Odor Management Act provides that agricultural operations manage odors to a level normally associated with accepted agricultural practices in Idaho by utilizing Best Management Practices

INSPECTOR SIGNATURE	PRODUCER SIGNATURE
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