SECTION I: GENERAL Put today's date, or leave blank CR-ERNS Number:						
Date of In	itial Release:		Date of I	Date of Initial Call to NRC:		
Type of Report: Indicate below the type of report you are submitting. First Anniversary Written Notification of a Change to Initial Notification Follow-up Report Follow-up Report Follow-up Report						
quantity and ra		ons in 40 CFR 302.8			n are continuous and stable in submitted information is	
		-		Name and Position		
	 Date			Signature		
			Be sure to sign		ne of Livestock Operation	
Name of Fac Person n Charge of Facility or Vessel	Charge Facility Vessel Name of Person in Charge Position Vessel					
acility	Telephone No. () Alternate Telephone No. () Street County					
Address or Vessel Port of	Street	·				
Registration Leave blank if you don't have one Dun and Bradstreet Number for Facility Find your operation, then right click, select drive to here, paste						
Facility/Vess Location	el Latitude	Deg Min	SecSec _	Ves	coordinates on form sel LORAN Coordinates	
Part B. Population Information Enter decimal degrees (i.e98.7634) and leave other boxes blank, if you don't know Deg Min Se						
Population Density	Choose the range that describes the population density within a one-mile radius of your facility or vessel (Indicate by placing an "X" in the appropriate blank below). 0 - 50 persons 101 - 500 persons more than 1000 persons 51 - 100 persons 501 - 1000 persons					
Sensitive Populations and Ecosystems Within One Mile Radius	Sensitiv (e.g., schools, hosp	ve Populations or E pitals, wetlands, wi	•		and direction from facility	