



THE COMMONWEALTH OF MASSACHUSETTS  
 EXECUTIVE OFFICE OF ENERGY AND  
 ENVIRONMENTAL AFFAIRS

**Department of Agricultural Resources**

251 Causeway Street, Suite 500, Boston, MA 02114  
 617-626-1700 fax 617-626-1850 www.Mass.gov/AGR



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IAN A. BOWLES  
 Secretary

TIMOTHY P. MURRAY  
 Lieutenant Governor

DOUGLAS W. PETERSEN  
 Commissioner

**2009 AGRICULTURAL COMPOSTING REGISTRATION ANNUAL REPORT**

**IMPORTANT:**

**THIS ANNUAL REPORT IS DUE ON OR BEFORE THE CLOSE OF BUSINESS ON FEBRUARY 28, 2009. FAILURE TO COMPLETE THIS ANNUAL REPORT WILL RESULT IN THE EXPIRATION OF YOUR AGRICULTURAL COMPOSTING REGISTRATION.**

**Any information provided in this report is available to the public through the Massachusetts Public Records Law.**

1. **Name(s)** (Enter the legal name of the composting operation land owner):

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2. **Address:**

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City State Zip County

3. **Telephone Number:**

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4. **Fax Number:**

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5. **E-mail Address:**

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6. **Farm Name:**

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7. **Farm Location:**

(If different from above address)

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8. **Identify the percentages of compost used:**

On-farm \_\_\_\_\_% Off-farm \_\_\_\_\_%

9. **Indicate whether any of the compost you produce is sold.**

Yes  No  (Fill in circle)



12. **Compostable Materials:** Identify which materials you plan to compost during the next year. Indicate source (farm or off farm), rate of accumulation (daily, weekly, monthly, yearly), and quantity in tons or cubic yards. Please note that your registration from DAR may limit the material you are allowed to compost.

MATERIAL	SOURCE	RATE OF ACCUMULATION	QUANTITY
<input type="radio"/> Agricultural Waste (list types) _____ _____ _____ _____			
<input type="radio"/> Leaf and yard waste			
<input type="radio"/> Wood wastes			
<input type="radio"/> Clean newspaper or cardboard			
<input type="radio"/> Clean, compostable (i.e. thin) shells, and clean bones			
<input type="radio"/> Non-agricultural sources of manures and animal bedding materials			
<input type="radio"/> Less than 20 cubic yards or less than 10 tons per day of vegetative material			
<input type="radio"/> Less than ten cubic yards or less than five tons per day of food material			

13. **Describe any changes in the compost “recipe” or ratio of compostables that occurred since your last application or report.**

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**DIRECTIONS: IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS YES, PLEASE EXPLAIN YOUR ANSWER ON A SEPARATE SHEET.**

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|-----|---|------------------------------|-----------------------------|
| 14. | Have the dimensions of the composting site changed?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 15. | Is the composting site within 400 feet of a public water supply?  | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 16. | Is the composting site within 250 feet of any private well?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 17. | Is the composting site within 100 feet of any wetlands?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 18. | Is the composting site within 100 feet of any surface waters?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 19. | Is the composting site within 250 feet of any neighbors' homes?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 20. | Have you changed the method, frequency, or equipment used for aerating the composting piles within the past year?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 21. | Have you faced any challenges in maintaining adequate moisture or temperature levels in the composting pile?  | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 22. | Have you experienced any illegal dumping of waste materials at your composting site?  | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 23. | Have you had any problems with or complaints regarding drainage, leachate, runoff from precipitation; erosion and sediment runoff; odor; noise, flies, and other pests; fire; pathogens; litter, or dust?   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 24. | Have any of your composting procedures changed since your last report?  | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 25. | Have you had any difficulties removing physical contaminants from raw materials?  | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| 26. | Have there been any changes in the boundaries of the composting site, the locations of composting materials and storage areas, the uses of land adjoining the composting site, vegetative buffers between the composting site and adjacent properties, or the use of public and private roads for drop-off of off-farm materials? | Yes<br><input type="radio"/> | No<br><input type="radio"/> |

**Please  
Initial**

\_\_\_\_\_ I certify that the information contained on this annual report and any attached explanations is true and accurate to the best of my knowledge and belief.

\_\_\_\_\_ I understand that if the Department finds that any portion of this agricultural composting annual report application includes false or misleading information, or the operation of the registered composting facility is in violation of the regulations, or is acting not in the best interest of Massachusetts agriculture, the Department may suspend or revoke my registration under 330 CMR 25.06.

\_\_\_\_\_ I further understand that if my registration is revoked or suspended, my composting site will no longer be exempt and I will be required to activate my contingency plan or comply with the Department of Environmental Protection Regulations for Determination of Need for Site Assignment as set forth in 310 CMR 16.05(4).

\_\_\_\_\_  
**Land Owner Signature**

\_\_\_\_\_  
**Date**

Mail the completed annual report and any attached explanations to:

William Blanchard  
Agricultural Composting Coordinator  
Massachusetts Department of Agricultural Resources  
251 Causeway Street, Suite 500  
Boston, MA 02114