Inventory Review Fee Payment Method:						
Online						
Order #						
☐ Check						
Check #						
(For DWQ use only)						

# Utah Underground Injection Control (UIC) Inventory Information

Well Subclass:						
Facility ID: UTU-						
Date Entered:By:						
(For DWQ use only)						

# **Storm Water Drainage Wells**

		Storm wate	i Diai	nay	JC VV	CII3				
Owners / operators of existing and new Class V injection wells authorized-by-rule shall submit inventory information (UAC R317-7-6). This form is designed to assist the regulated community in complying with this requirement. Please complete all fields.										
FACILITY LOCATION										
Facility Name:							Date:			
Physical Address:	(City)								(City)	
Mailing Address:						(City, State)			(Zip Code)	
Geographic Location:	Select a method described in the Instructions at the end of this form to acquire a map showing the location of your UIC facility. Submit the map along with this form.									
County:										
FACILITY CONTACT										
Contact Name:			Phor	ne:			Email:			
Contact Type: (check all that	☐ Owner/Operator	☐ Owner	□ Оре	rator	☐ Facility		cility Mana	ıger	☐ Developer	
	☐ Legal Representative	☐ Official Represe	entative	□с	ontract	or [	DEQ Dis	EQ District Engineer / Project Manager		
apply)	Other									
Title:			Organiz	ation:						
Mailing Address:						(0	City, State)		(Zip Code)	
Contact Name:				Phor	ne:			Email:		
Contact Type:	☐ Owner/Operator	☐ Owner	□ Оре	rator		☐ Fa	cility Mana	ıger	☐ Developer	
(check all that	☐ Legal Representative	☐ Official Represe	entative	□с	ontract	or [	DEQ Dis	trict Engir	neer / Project Manager	
apply)	Other									
Title:			Organiz	ation:						
Mailing Address:						(0	City, State)		(Zip Code)	
DWQ Use Only for Date Received Stamp and eDocs Number:				SWPZ?						
				System Name:						
				5,5.5						
					Contact Information:					

LAND OWNERSHIP AT FACILITY									
☐ Private – For Profit ☐ Private – Not for Profit ☐ P			Private - F	vate - Farm					
Govt - Federal Govt - State Govt - Loca				cal	☐ Other				
FACILITY DESCRIPTION (see Instructions)									
6-Digit NAICS Code: Corresponding NAICS Title:									
Describe the primary busing	ness activity conducted	at the facility:							
STORM WATER	DRAINAGE WEI	L OPERATIN	G STATU	S (indicate number	of wells in appropriate category)				
				•					
Proposed	Under Construction / Modification	Active	Tem	oorarily Abandoned	Permanently Abandoned				
STORM WAT				AND SUBSU	JRFACE DETAILS				
		(see Instr	uctions)						
STORM WATER CHARACTERIZATION									
(see Instructions)									
HVDD 0.550 COLO CULTO COTTO COLO									
HYDROGEOLOGIC CHARACTERIZATION (see Instructions)									
COMMENTS  Use this page for additional context information and/or other important information about those subscurface storm victor drainings wells									
Use this space for additional contact information and/or other important information about these subsurface storm water drainage wells.									
SIGNATURE OF OWNER / OPERATOR or LEGAL REPRESENTATIVE									
	Name & Title (print or ty	me & Title (print or type)		Phone Number					
	Signature			Date Signed					
L.	<u> </u>				<u>~</u>				

# Online Credit Card Payment of UIC Inventory Review Fee

To pay the UIC Inventory Review Fee online:

- 1. Go to this website: https://secure.utah.gov/cart/dwg\_cart/products.html , the Products page.
- 2. Click on 'Payment for UIC Inventory Review Fee' under the UIC Inventory Review heading.
- 3. On the Product Detail page, enter the number of facilities (**not** the number of injection wells) for which you are submitting the UIC Inventory Review Fee. Click on the 'Add to cart' button.
- 4. On the Your Cart page, confirm the quantity and amount then click on the Checkout button.
- 5. On the Enter Your Shipping Address page, enter the contact information for the owner / operator of the UIC facility listed on the first page of the UIC Inventory Information Form in the Please Enter Shipping Info block even though nothing will be shipped out.
- 6. In the Additional Information block at the bottom of the page, enter the UIC Facility Name from the first page of the UIC Inventory Information Form.
- 7. Click on 'Proceed to Payment' button and complete the credit card information then click on the 'Continue' button.

# **Electronic Submittal of UIC Inventory Information Form**

To submit the UIC Inventory Information Form using DWQ's Electronic Submissions web service:

- 1. Scan your completed, signed, and dated UIC Inventory Information Form and save as a .pdf document on your computer.
- 2. Go to this website: https://deq.utah.gov/water-quality/water-quality-electronic-submissions
- 3. Enter 'UIC Inventory Information Form' in the 'Purpose of Submission' box.
- 4. Complete the 'Submitted By' section.
- 5. Select the file you created in Step 1, and hit the 'Click here to submit' button.

# Submit UIC Inventory Review Fee and Inventory Information Form by Mail

To submit both the form and fee by mail, send your completed, signed and dated form along with a check made payable to **Utah Division of Water Quality** to:

Utah Department of Environmental Quality Division of Water Quality, ATTN: UIC P.O. Box 144870 Salt Lake City, Utah 84114-4870

# Instructions for Completing the Utah Underground Injection Control Inventory Information Form

for

# **Storm Water Drainage Wells**

(UIC Well Code: 5H1)

Owners or operators of all Class V injection wells, existing and new, must submit inventory information according to Section R317-7-6.4(C) of the Utah Administrative Rules for the Underground Injection Control Program. Required information includes: facility name and location; name and address of legal contact; ownership of facility; nature and type of injection wells; and operating status of injection wells. The Utah UIC Inventory Information Form is designed to assist owners or operators to comply with this requirement, to collect sufficient information regarding the injection activity such that authorization-by-rule status can be assessed, and to coordinate UIC Program regulatory action with other agencies having regulatory authority over the subject facility. Inventory information must be submitted prior to injection for new wells.

This submission does not relieve the applicant of any liability for ground water cleanup or any claim for resource damage if ground water contamination is traced to the injection wells shown on this form. Nor does authorization-by-rule under the UIC Program relieve the applicant, in any way, of obligations to comply with other applicable regulatory requirements, or to obtain other necessary applicable permits or authorizations from local or other agencies. The applicant may contact the local health department for compliance with local requirements.

#### **Facility Location:**

Physical Address: Enter street address of facility or other description of physical location of facility that would enable someone to drive to the location of the facility. You may also choose to provide a photocopy of a road map (no greater than 11" x 17", preferably 8 ½" x 11") with the facility location indicated if a street address is not available.

Geographic Location: Submit a map from Atlas Utah (<a href="https://atlas.utah.gov">https://atlas.utah.gov</a>) or another online map service (<a href="mailto:Bing Maps">Bing Maps</a>, <a href="Google Maps">Google Maps</a>, <a href="Maps">MapQuest</a>)

To use the Atlas Utah to locate your facility, go to this web site <a href="https://atlas.utah.gov/">https://atlas.utah.gov/</a> Use the stacked layer symbol in the upper right hand corner of the map to select the base map (Hybrid, Lite, Terrain, Topo, or Color IR) you would like to use in locating your facility. Then locate your facility by using the Find Address, Find Point of Interest or Find City in the search fields at the left of the map. Use the + and – signs in the upper left hand corner of the map to zoom to your facility boundary. Using the pull down menu for the blue Print button in the upper left hand corner of the screen, select either Portrait or Landscape orientation for the map of your facility. While the service is preparing the printout the Print button will be gray and read 'Printing'. Once the Printout is finished the button will read 'Printout'. Click on Printout to open the map.

#### **Facility Contact:**

At least one of the contacts listed must be the owner or legal representative of the Class V injection well(s) for which the UIC Inventory Information is being submitted. The owner or the legal representative must be the signatory for the form. Provide additional contacts capable of providing reliable information regarding the operation of the facility. \*PLEASE NOTE: OWNER OR LEGAL REPRESENTATIVE REFERS TO THE OWNER OR LEGAL REPRESENTATIVE OF THE SUBJECT SITE/FACILITY. THIS IS THE PERSON WHO IS ULTIMATELY RESPONSIBLE FOR THE ONGOING OPERATION AND MAINTENANCE OF THE WELL. THIS IS NOT THE OWNER OF THE CONSTRUCTION COMPANY OR CONSULTING FIRM THAT IS INSTALLING THE WELL OR SUBMITTING THE FORM.\*

#### Land Ownership at Facility:

Self-explanatory

#### **Facility Description:**

Enter the 6-digit 2017 North American Industry Classification System (NAICS) code and the title of the 6-digit code describing the primary activity at your facility. You can find your NAICS code using the search tools at: <a href="https://www.census.gov/naics/">https://www.census.gov/naics/</a> or you can download 2017 NAICS files at: <a href="https://www.census.gov/eos/www/naics/downloadables/downloadables.html">https://www.census.gov/eos/www/naics/downloadables/downloadables.html</a>

Include a description of the business activities performed at the facility. You may include the NAICS code description. You may wish to include additional narrative for clarity.

#### **Storm Water Drainage Well Operating Status**

Self-explanatory

# Storm Water Drainage Well Construction and Subsurface Details

Submit a plan view (not to exceed 11" x 17") of the facility property showing the location of the injection well(s). Also, submit a vertical cross-section (not to exceed 11" x 17") showing the details of the injection well(s). Provide a narrative description including such details as unique injection well ID number; construction type; if pre-fab construction, indicate type - pre-cast concrete dry well, commercially manufactured storm water infiltration devices such as subsurface detention vaults, chambers, or other devices designed to capture and infiltrate storm water into the subsurface; construction dimensions; depth of well and screened interval if vertical construction; and depth of engineered bottom if horizontal construction.

#### **Storm Water Characterization**

In the space provided or on an attached sheet, provide a narrative describing the storm water capture area from which the storm water is derived. Describe the BMPs (educational, operational, maintenance, structural) employed in this area to minimize contamination of the storm water.

#### **Hydrogeologic Characterization**

In the space provided or on an attached sheet, provide information regarding the hydrogeology in the vicinity of the storm water injection wells such that DWQ can assess the potential for impact to groundwater and surface water resources. Include information such as depth to groundwater,

distance to nearest surface water body, description of subsurface material, proximity to utility trenches, proximity to drinking water wells (public and private), etc.

## Comments

Include additional contact information and/or any other relevant information not already addressed in the other sections of this form.

## Signature of Owner / Operator

In keeping with the requirement of Section R317-7-6.4(C) of the Utah Administrative Rules for the Underground Injection Control Program that the owner or operator must submit inventory information, the UIC Inventory Information Form **must** be signed by the **owner or operator (or his/her legal representative)** of the injection well(s) for which the inventory information is being submitted.