

Inventory Review Fee Payment Method:	
<input type="checkbox"/> Online	Order # _____
<input type="checkbox"/> 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)

Veterinary, Kennel and Pet Grooming Subsurface Wastewater Disposal Systems

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)
Mailing Address:		(City)	(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:		Phone:		Email:	
Contact Type: (check all that apply)	<input type="checkbox"/> Owner/Operator	<input type="checkbox"/> Owner	<input type="checkbox"/> Operator	<input type="checkbox"/> Facility Manager	<input type="checkbox"/> Developer
	<input type="checkbox"/> Legal Representative	<input type="checkbox"/> Official Representative	<input type="checkbox"/> Contractor	<input type="checkbox"/> DEQ District Engineer / Project Manager	
	<input type="checkbox"/> Other _____				
Title:		Organization:			
Mailing Address:			(City)	(Zip Code)	

Contact Name:		Phone:		Email:	
Contact Type: (check all that apply)	<input type="checkbox"/> Owner/Operator	<input type="checkbox"/> Owner	<input type="checkbox"/> Operator	<input type="checkbox"/> Facility Manager	<input type="checkbox"/> Developer
	<input type="checkbox"/> Legal Representative	<input type="checkbox"/> Official Representative	<input type="checkbox"/> Contractor	<input type="checkbox"/> DEQ District Engineer / Project Manager	
	<input type="checkbox"/> Other _____				
Title:		Organization:			
Mailing Address:			(City)	(Zip Code)	

DWQ Use Only for Date Received Stamp and eDocs Number:	SWPZ? <input type="checkbox"/> Yes <input type="checkbox"/> No
	System Name:
	Contact Information:

LAND OWNERSHIP AT FACILITY

<input type="checkbox"/> Private – For Profit	<input type="checkbox"/> Private – Not for Profit	<input type="checkbox"/> Private - Farm	<input type="checkbox"/> Private - Other
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<input type="checkbox"/> Govt – Federal	<input type="checkbox"/> Govt – State	<input type="checkbox"/> Govt – Local	<input type="checkbox"/> Other
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**FACILITY DESCRIPTION
(see Instructions)**

6-Digit NAICS Code:		Corresponding NAICS Title:	
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Describe the primary business activity conducted at the facility:

WASTEWATER DISPOSAL SYSTEM STATUS (indicate number of systems in appropriate category)

Proposed	Under Construction / Modification	Active	Temporarily Abandoned	Permanently Abandoned

**WASTEWATER DISPOSAL SYSTEM CONSTRUCTION AND SUBSURFACE DETAILS
(see Instructions)**

**WASTEWATER CHARACTERIZATION
(see Instructions)**

**HYDROGEOLOGIC CHARACTERIZATION
(see Instructions)**

COMMENTS

Use this space for additional contact information and/or other important information about the wastewater disposal system.

SIGNATURE OF OWNER / OPERATOR or LEGAL REPRESENTATIVE

Name & Title (print or type)	Phone Number
Signature	Date Signed

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/dwq_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
Veterinary, Kennel and Pet Grooming Subsurface Wastewater Disposal Systems
(UIC Well Code: 5A15)

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 (<https://atlas.utah.gov>) or another online map service ([Bing Maps](#), [Google Maps](#), [MapQuest](#))

To use the Atlas Utah to locate your facility, go to this web site <https://atlas.utah.gov/> 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/operator or legal representative of the owner/operator of the wastewater disposal system for which the UIC Inventory Information is being submitted. The owner/operator 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.

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: <https://www.naics.com/search/> or you can download 2017 NAICS files at: <https://www.census.gov/eos/www/naics/downloadables/downloadables.html>

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. **NOTE: This information may have been submitted in an application for a construction / operating permit issued by the local health department or by the DWQ Engineering section. If this is the case, state this on the form.**

Wastewater Disposal System Operating Status

Self-explanatory

Wastewater Disposal System Construction and Subsurface Details

Submit a plan view (not to exceed 11" x 17") of the facility property showing the location of the wastewater disposal system. 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; construction dimensions; depth of well and screened interval if vertical construction; and depth of engineered bottom if horizontal construction. **NOTE: This information may have been submitted in an application for a construction / operating permit issued by the local health department or by the DWQ Engineering section. If this is the case, state this on the form.**

Wastewater Characterization

In the space provided or on an attached sheet, provide a narrative describing the quality of the wastewater to be discharged. The wastewater from the various sources at the facility needs to be fully characterized for volume and constituents that may potentially impact the underlying groundwater quality (e.g. contaminants with Maximum Contaminant Levels - MCLs) or impair the operation of the septic system (e.g. feathers, hair, bedding, other excessive solids, etc.). Describe any pretreatment performance standards that address concentrations of constituents that may cause exceedance of MCLs in a receiving underground source of drinking water (USDW). **NOTE: This information may have been submitted in an application for a construction / operating permit issued by the local health department or by the DWQ Engineering section. If this is the case, state this on the form.**

Hydrogeologic Characterization

In the space provided or on an attached sheet, provide information regarding the hydrogeology in the vicinity of the proposed onsite wastewater disposal system 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. **NOTE: This information may have been submitted in an application for a construction / operating permit issued by the local health department or by the DWQ Engineering section. If this is the case, state this on the form.**

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.