



Oregon Department of  
Environmental Quality

Water Quality Division  
811 SW Sixth Avenue  
Portland OR 97204

## UNDERGROUND INJECTION CONTROL REGISTRATION APPLICATION FEES

(To be attached to Municipal Information  
UIC Registration form)

**DEQ USE ONLY**

Received: \_\_\_\_\_

Amount: \_\_\_\_\_

Check #: \_\_\_\_\_

UIC #: \_\_\_\_\_

**Please check each type that applies and submit TWO COPIES of this form with payment to DEQ Business Office at the address below. See pages 4 and 5 for detailed instructions on how to fill out this form.**

**1. LEAST ENVIRONMENTAL RISK TO GROUNDWATER**

<b>Types:</b>	<ul style="list-style-type: none"> <li>• Common roof drains (Residential, Commercial, Industrial); Roof drainage injection system not mixed with any other type of discharge</li> </ul> <p><i>Note:</i> Roof drainage injection system mixed with any other type become that type risk (box 2, below).</p>	\$100 for each injection system
_____ @ \$100 per UIC =		

**2. MODERATE ENVIRONMENTAL RISK TO GROUNDWATER**

<b>Types:</b>	<ul style="list-style-type: none"> <li>• Mixed roof/parking lot injection systems <i>Example:</i> Roof drained mixed with driveway, parking lot, alley, or road runoff.</li> <li>• Small jurisdictions owning a total of fewer than 50 injection systems</li> <li>• Owners with fewer than 50 injection systems (at one site or multiple locations)</li> <li>• Owners who do not store, handle, or use hazardous materials, toxics, or petroleum products</li> <li>• Sites that generate fewer than 1,000 trips per day (for contiguous lots or acreage under one owner)</li> <li>• Small/medium parking lots, residential roads</li> </ul>	\$125 for each injection system
_____ @ \$125 per UIC =		

**3. SIGNIFICANT POTENTIAL FOR ENVIRONMENTAL RISK**

<b>Types:</b>	<ul style="list-style-type: none"> <li>• Complex sites with significant potential for environmental risk</li> <li>• Large jurisdictions with 50 or more injection systems (city, county, state, or federal agencies, school districts – anyone with revenue collection ability)</li> <li>• Owners of 50 or more injection systems (Municipal, Commercial, or Industrial) at one site or multiple sites.</li> <li>• Owners of sites generating 1000 or more trips per day (ITE manual calculation) on all contiguous lots</li> <li>• Owners of sites with hazardous materials (storage, handling, generation or use), toxics, or petroleum products</li> <li>• Loading docks</li> <li>• Roof drain mixed with large parking lot drainage</li> <li>• Any site where monitoring is required</li> </ul> <p><i>Note:</i> You will be invoiced an annual monitoring processing fee of \$100 per injection system.</p>	\$300 for each injection system
_____ @ \$300 per UIC =		

Please return this form with payment to:

Oregon Department of Environmental Quality  
Attn: Business Office  
811 SW Sixth Avenue  
Portland, Oregon 97204

Total Amount Enclosed =

**DEQ USE ONLY**

Received: \_\_\_\_\_

Amount Received: \$ \_\_\_\_\_

**UNDERGROUND INJECTION CONTROL REGISTRATION  
Municipal Information**

*(Submit two copies. See pages 3 and 4 for detailed instructions.)*



Return form with your payment to:  
Oregon Department of Environmental Quality  
Attn: Business Office  
811 SW Sixth Avenue  
Portland OR 97204

**DEQ DATE STAMP**

Registration #: \_\_\_\_\_

**A. CONTACT INFORMATION**

1. Jurisdiction Name:	2. County:
3. Address:	City: Zip Code:
4. Section/Division submitting data:	5. Contact Name: Phone #:

**B. JURISDICTION DESCRIPTION (ATTACH DOCUMENTS AS NEEDED)**

- Location: Provide a map or GIS data clearly identifying the boundaries of your jurisdiction and zoning. Note the location of your drinking water wells and, if available, the delineated wellhead or source of water.  Map Attached  GIS data Attach well logs.
- Jurisdiction's drinking water source: \_\_\_\_\_ monthly average usage (gal/day): \_\_\_\_\_  
source: \_\_\_\_\_ monthly average usage (gal/day): \_\_\_\_\_  
Backup source: \_\_\_\_\_ monthly average usage (gal/day): \_\_\_\_\_
- Provide documentation (maps or GIS) showing which portions of the city are served by a sewer and stormwater system.  
 Map Enclosed  GIS data What surface water sub-basin is your jurisdiction located in? \_\_\_\_\_
- Attach a copy of: a) Your standard designs for injection systems  Attached  
b) Maintenance program and schedule for UIC systems  Attached
- Indicate if present:  UIC Spill prevention/response plan  Employee training on spill plan  Plug(s) or block(s) for UIC system  
 Spill clean up supplies: \_\_\_\_\_  Containment facilities: \_\_\_\_\_  
 Steep slope/hazard areas Submit a UIC storm water plan  Attached with application
- Do you provide info to the public regarding the need to register UICs within the state in your preliminary site plan review?  Yes  No
- Does an adequate confinement barrier or filtration medium exist in your jurisdiction to protect local groundwater resources?  
 YES  NO  DO NOT KNOW **If "YES," attach relevant documentation from DHS or USGS.**
- Provide data on your storm water discharges; attach analytical results.  Attached  Monitoring plan
- Are there UIC systems serving (located at) cleanup sites?  YES  NO **If "YES," attach a brief description of those sites.**  
 Floodplain  Sensitive groundwater areas  Existing brownfields  Site on the cleanup list, ECSI/LUST
- List any other DEQ or public agency permits applied for or issued (with permit number): \_\_\_\_\_
- Attach and sign a non-exposure certification (available on DEQ's UIC webpage at <http://www.deq.state.or.us/wq/groundwa/uicononexposure.pdf>).

**To expedite the registration of your facility, please fill out this form in its entirety.**

**C. SIGNATURE OF LEGALLY AUTHORIZED REPRESENTATIVE**

**I hereby certify that the information contained in this registration is true and correct to the best of my knowledge and belief.**

_____ Name of Legally Authorized Representative (Type or Print)	_____ Title
_____ Signature of Legally Authorized Representative	_____ Date

## UIC REGISTRATION FOR JURISDICTIONS

Oregon Department of Environmental Quality

(See following pages for detailed instructions)

### D. UNDERGROUND INJECTION CONTROL INFORMATION

**EPA Well Types**

5A19 Cooling Water Return	5R21 Aquifer Recharge	5W12 Water Treatment Plant Effluent	5X26 Aquifer Remediation
5D2 Stormwater	5W9 Untreated Sewage	5W20 Industrial process water	5X27 Other Wells
5D4 Industrial Storm Runoff	5W10 Cesspool	5W31 Septic System (well disposal)	5X28 Motor Vehicle Waste
5G30 Special Drainage Water	5W11 Septic System (gen)	5W32 Septic System (drainfield)	5X29 Abandoned Drinking Well
5A5 Electric Power Generator	5A6 Geothermal Heat	5A7 Closed Loop Heat Pump Return	5D3 Drillhole

*Provide the information below for **each** UIC system. Attach additional copies if necessary. Be sure to provide data on the zoning in the immediate area of the injection system, as this may influence the types of discharges associated with the site.*

**UIC SYSTEM # or NAME:** \_\_\_\_\_ **INSTALLATION YEAR:** \_\_\_\_\_

1. Latitude (decimal): _____ Longitude (decimal): _____	2. Type: <input type="checkbox"/> Dry well/sump <input type="checkbox"/> Drill hole <input type="checkbox"/> Infiltration trench <input type="checkbox"/> Other discharge
3. Distance to nearest:    Domestic/public water well: _____ Wetland: _____    Surface water(s): _____ Attach a well log for nearest water well & depth to first groundwater.	4. Waste type discharged: _____
5. Status: (see instructions for status definition) <input type="checkbox"/> Planning stage <input type="checkbox"/> Under construction <input type="checkbox"/> Active <input type="checkbox"/> Not in use <input type="checkbox"/> Temporarily Abandoned <input type="checkbox"/> Permanently Abandoned/Decommissioned (note date & method)	6. Characteristics: Depth: _____ ft                      Diameter: _____ ft Design drainage rate & volume: _____ Size of impervious area drained: _____ Type of treatment or BMPs used prior to discharge: _____
7. <input type="checkbox"/> Located in a delineated source water area or brownfield/cleanup site.	_____ _____

**UIC SYSTEM # or NAME:** \_\_\_\_\_ **INSTALLATION YEAR:** \_\_\_\_\_

1. Latitude (decimal): _____ Longitude (decimal): _____	2. Type: <input type="checkbox"/> Dry well/sump <input type="checkbox"/> Drill hole <input type="checkbox"/> Infiltration trench <input type="checkbox"/> Other discharge
3. Distance to nearest:    Domestic/public water well: _____ Wetland: _____    Surface water(s): _____ Attach a well log for nearest water well & depth to first groundwater.	4. Waste type discharged: _____
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7. <input type="checkbox"/> Located in a delineated source water area or brownfield/cleanup site.	_____ _____

**UIC SYSTEM # or NAME:** \_\_\_\_\_ **INSTALLATION YEAR:** \_\_\_\_\_

1. Latitude (decimal): _____ Longitude (decimal): _____	2. Type: <input type="checkbox"/> Dry well/sump <input type="checkbox"/> Drill hole <input type="checkbox"/> Infiltration trench <input type="checkbox"/> Other discharge
3. Distance to nearest:    Domestic/public water well: _____ Wetland: _____    Surface water(s): _____ Attach a well log for nearest water well & depth to first groundwater.	4. Waste type discharged: _____
5. Status: (see instructions for status definition) <input type="checkbox"/> Planning stage <input type="checkbox"/> Under construction <input type="checkbox"/> Active <input type="checkbox"/> Not in use <input type="checkbox"/> Temporarily Abandoned <input type="checkbox"/> Permanently Abandoned/Decommissioned (note date & method)	6. Characteristics: Depth: _____ ft                      Diameter: _____ ft Design drainage rate & volume: _____ Size of impervious area drained: _____ Type of treatment or BMPs used prior to discharge: _____
7. <input type="checkbox"/> Located in a delineated source water area or brownfield/cleanup site.	_____ _____

## UIC REGISTRATION INSTRUCTIONS FOR JURISDICTIONS

Use this form to register underground injection control (UIC) systems in your jurisdiction.

### A. CONTACT INFORMATION

1. Enter the legal name of the Jurisdiction.
2. Enter the county.
3. Enter the complete mailing address.
4. Indicate which Section or Division is providing the data on this form.
5. Enter the name and telephone of a contact for the jurisdiction; this would be the person to call in case there are any questions about this registration.

### B. JURISDICTION DESCRIPTION

1. Submit a sketch, map, or GIS data that *clearly* illustrates the boundaries of your jurisdiction and zoning. Identify the locations of drinking wells and, if possible, delineated wellhead protection and source water areas.
2. Indicate the source (s) of drinking water in your jurisdiction and estimate the monthly average usage in gallons per day.
3. Attach a map or the GIS data that show the areas of your jurisdiction that are served by a sewer and/or a stormwater system and note the surface water sub-basin in which you are located.
4. Attach a copy of your standard design(s) for injection systems. Specify what type of maintenance is performed on the UIC system and the frequency of such maintenance. If no maintenance occurs, indicate as such.
5. Check the appropriate boxes to provide information about the facility's ability to prevent spills or leaks of materials that may enter the UIC systems, as well as employees ability to respond to spills or leaks when they occur. DEQ requires that facilities have a written spill prevention and response plan and training on the plan so employees will know what to do in case of a spill. In addition, a way to plug or block the UIC drainage system (dry well, sump, drain hole, infiltration trench, etc.) in the event of a spill is required along with an adequate supply of appropriate spill containment and clean up material be maintained on site; containment areas should also be used for the storage of materials that could easily drain into the UIC system in the event of a leak or spill. Stormwater plans are required to be developed by 07/01/02. Large municipal monitoring report is due June 30, 2004.
6. Incorporate UIC registration into your preliminary site plan review process and give the public heads-up on federal and state requirements; cite the DEQ web site (<http://www.deq.state.or.us/wq/groundwa/uichome.htm>).
7. Indicate if an adequate confinement barrier or filtration medium exists to protect the local groundwater. This is not easy to determine and you may wish to contact a registered geologist for assistance, cite USGS reports, Oregon Water Resource Department studies, or the Department of Human Services (DHS), (541) 726-2587 (you will need information on township, range and section). Some examples of situations where the groundwater may not be protected include: dry wells that are drilled into or very near the groundwater table, areas where the soils are very porous so that drainage into a dry well or sump is quickly discharged to groundwater without contaminants being reduced by natural degradation (e.g., biological activity, soil attenuation), etc. Note: **DHS vulnerability studies can be submitted for this requirement.**
8. If you have data on your storm water or other discharges, attach relevant material.
9. Note if there are UIC systems in your jurisdiction that are located at publicly owned clean-up sites, steep slopes, floodplains, groundwater management areas or known hazard areas. Natural hazard data is available at the Oregon Department of Geology, (503) 731-4100, and known contamination sites can be acquired from the DEQ Profiler utility at <http://deq12.deq.state.or.us/fp20/>.
10. In order for DEQ to coordinate with other DEQ offices and public agencies, list all permits applied for or issued to this facility.
11. Forms are available on DEQ's UIC webpage at: <http://waterquality.deq.state.or.us/wq/groundwa/uichome.htm> or call (503)229-5189 to have a form mailed to you.

### C. SIGNATURE OF LEGALLY AUTHORIZED REPRESENTATIVE

The signature of a legally authorized representative must be provided in order to process this registration.

#### Definition of Legally Authorized Representative:

- |  |   |
|--|---|
| ◆ <b>Corporation</b> — president, secretary, treasurer, vice-president, or any person who performs principal business functions; or a manager of one or more facilities that is authorized in accordance to corporate procedure to sign such documents | ◆ <b>Sole Proprietorship</b> — Owner(s) <b>Limited Liability Company</b> — Member   |
| ◆ <b>Partnership</b> — General partner   | ◆ <b>Trusts</b> — Acting trustee  |
|  | ◆ <b>City, County, State, Federal, or other Public Facility</b> — Principal executive officer or ranking elected official |

## UIC REGISTRATION INSTRUCTIONS FOR JURISDICTIONS

### D. UNDERGROUND INJECTION CONTROL (UIC) INFORMATION

**Please submit a facility map that clearly identifies the location of each UIC system (specific point of discharge or injection, e.g. dry well, sump, drain hole, infiltration trench, etc.) by number or name.**

For each UIC system, provide the number or name and its installation date. The installation date will be on your well log or permit. Your city or county building department may also have this information for your site. If the installation date is not known, provide the Oregon Resources Department (WRD) card number and/or the well identification number, or estimate when the UIC system was installed. Also, for **each** UIC system provide the following:

1. Enter the latitude and longitude of the approximate center of the facility or site in decimal degrees if possible; degrees/minutes/seconds format is acceptable. Latitude and longitude can be obtained from United States Geological Survey (USGS) quadrangle or topographic maps by calling 1-888 ASK-USGS, or by accessing DEQ's web site at <http://www.deq.state.or.us/wq/wqlmaps/wqlmapshome.htm>. Click on "Enter LLID Interactive Maps Application" at bottom of the page to start the locational application. If a GPS unit is used to determine lat/long, set the datum to the state standard, NAD83; otherwise, location data will not be accurate.
2. Type of UIC system.
3. Provide the depth in feet to the winter high water table. If that information is unavailable or unknown, provide the average depth to groundwater in feet from your well log. If you do not have your log, you may be able to access it through the Oregon Water Resources Department (WRD) web site at <http://www.wrd.state.or.us/groundwater/index.shtml>, or by calling (503) 986-0900. The Natural Resource Conservation Service or U.S. Geological Survey in your area may also have groundwater information.
4. What is the type of fluid discharged?
5. Whether the UIC system is being planned, under construction, active, inactive, temporarily abandoned, or permanently abandoned (decommissioned). A UIC system is considered "temporarily abandoned" when it is taken out of service but still exists. Owners of temporarily abandoned UICs intend to bring them back into service at a future date. A watertight cap or seal that prevents any materials from entering the UIC must cover temporarily abandoned UICs. A UIC is considered "permanently abandoned" when it is completely filled so that movement of water within the UIC is permanently stopped. With the exception of hand-dug UIC systems, a licensed water well constructor, or the landowner under a Landowner's Water Well Permit, must perform a permanent abandonment. Please see Oregon Administrative Rule (OAR) 690-220-0005 or visit WRD's web page for the rule at [http://arcweb.sos.state.or.us/rules/OARS\\_600/OAR\\_690/690\\_220.html](http://arcweb.sos.state.or.us/rules/OARS_600/OAR_690/690_220.html). WRD has also developed a well guide that may be of use: *Consumer's Guide to Water Well Construction, Maintenance and Abandonment* available at <http://www.wrd.state.or.us/publication/wellcon99/index.shtml#abandoning>. You may also contact WRD at (503) 986-0900. If the UIC system has been permanently abandoned/decommissioned, provide the date and method of closure. If you are planning to decommission the system, submit a *DEQ Pre-Closure Notification Form*.
6. The following design characteristics:
  - ◆ Depth and diameter in feet
  - ◆ Design drainage rate and volume, if known
  - ◆ Size of the impervious area in square feet drained by the UIC system. An impervious area is an area that does not allow rain to soak into the ground. It includes paved areas, concrete pads, buildings, and compacted areas such as graveled or dirt roads. For example, if the UIC system is used for roof drainage, estimate the square footage of the building the roof drain serves.
  - ◆ Type of treatment or BMPs used prior to subsurface discharge to protect groundwater. If there is no treatment prior to the UIC system, write "no treatment."
7. Note if the system is:
  - a) Located in a delineated source water area with 2 year time of travel, or
  - b) Located on a redeveloped brownfield or has had past contamination problems.

### REGISTRATION SUBMITTAL AND QUESTIONS

**Please return this form with your payment to:**

Department of Environmental Quality  
Attn: Business Office  
811 SW 6<sup>th</sup> Avenue  
Portland OR 97204

**For more information, contact:**

David Cole, DEQ-WQ Division  
2020 SW 4<sup>th</sup> Avenue, Portland, OR 97201  
Phone (503) 229-6371  
Fax: (503) 229-6957

DEQ's UIC web page: <http://www.deq.state.or.us/wq/uic/uic.htm>