

UNDERGROUND INJECTION CONTROL PERMIT APPLICATION
CLASS V Industrial/Commercial

**I. FACILITY NAME**

Phone \_\_\_\_\_

Type of Business \_\_\_\_\_

**Status (circle one):** Federal, State, Private, Public, other.

**II. FACILITY ADDRESS**

Street Address \_\_\_\_\_

P.O. Box \_\_\_\_\_

City or Town \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

DIRECTIONS TO YOUR FACILITY: \_\_\_\_\_

FEIN NUMBER \_\_\_\_\_

**III. OWNERSHIP INFORMATION**

Owner name \_\_\_\_\_ Phone \_\_\_\_\_

Street or P.O.Box \_\_\_\_\_

City or Town \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-Mail address: \_\_\_\_\_

**IV. OPERATOR INFORMATION**

Operator name \_\_\_\_\_ Phone \_\_\_\_\_

**V. APPLICANT REQUEST**

A. Reissue existing Class V UIC Permit  Yes  No

If yes provide permit number \_\_\_\_\_

B. Modify existing Class V UIC Permit  Yes  No

If yes provide permit number \_\_\_\_\_

C. Apply for Class V UIC Permit  Yes  No

*We will process your personal information in accordance with the State of West Virginia's Privacy Policy for appropriate and customary business purposes. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. The Division of Water and Waste Management will appropriately secure your personal information. Specific information collected in this permit application that has been determined to be personally identifiable information (PII), which is information about a person or entity that is readily identifiable to that specific person or entity, [i.e., Social Security Number or Federal Employer Identification Number (FEIN)], will be redacted from the application once its purpose has been met. The information will not be made available to the public. If you have any questions about our use of your personal information, please contact the DEP's Chief Privacy officer at [depprivacyofficer@wv.gov](mailto:depprivacyofficer@wv.gov).*

**VI. PRIOR PERMITS:** Please list the permit or order number(s), if this facility is currently or previously has been permitted, or ordered to comply, under the following programs:

PERMIT NUMBER/ORDER NO.

- A. Mining & Reclamation (Coal & Non-Coal related) \_\_\_\_\_
- B. National Pollutant Discharge Elimination System (NPDES) surface water  
(General, Individual and/or Industrial) \_\_\_\_\_
- C. State 401 Certification (Federal Permit or License) \_\_\_\_\_
- D. Oil & Gas Program \_\_\_\_\_
- E. UIC Mining prep. plant slurry \_\_\_\_\_  
UIC Mining AMD sludge \_\_\_\_\_
- F. Hazardous Waste (Hazardous waste disposal, treatment or storage) \_\_\_\_\_
- G. Municipal or Industrial Solid Waste Landfill \_\_\_\_\_
- H. Stormwater Program (Industrial or construction activity) \_\_\_\_\_
- I. Land Application of Sewage Sludge \_\_\_\_\_
- J. Small Package Plant (Home Aeration Unit) \_\_\_\_\_
- K. Groundwater Protection Plan \_\_\_\_\_
- L. Non-Compliance Orders \_\_\_\_\_
- M. State or Local Health Dept. (Permit to Construct) \_\_\_\_\_
- OTHER: \_\_\_\_\_

Use additional pages if necessary.....

**Septic Tanks installed after June 1, 1994 requires registration with the Office of Water Resources, list the septic tank seal no.**

**if you have one.** Note: A copy of any State or County Health Department Permit previously issued to this facility must be included with this application.

**NOTE: Septic Tanks are a type of injection well**

**VII. TYPE OF PERMIT REQUESTED**

- A. Area Permit (More than one disposal well per site) \_\_\_\_\_
- B. Site Permit (Only one disposal well) \_\_\_\_\_
- C. Total number of injection well(s) \_\_\_\_\_

**VIII. UIC LOCATION(S)**

Datum: NAD 27 \_\_\_\_\_ NAD 83 \_\_\_\_\_ Other \_\_\_\_\_

A.1 Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Method \_\_\_\_\_

**IX. INJECTION WELL TYPE** (See Section XIV Table C and Class V Injection Types insert)

A. Well Type(s) - enter code(s) \_\_\_\_\_

B. Number of wells per type. \_\_\_\_\_

C. What is the current method of disposal for the fluids, and is your waste stream solely sanitary Waste?

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**X. COMMENTS** (Provide any additional pertinent information in the space below.)

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**XI. CERTIFICATION**

All permit applications must be signed by a responsible corporate officer for a corporation, by a general partner for a partnership, by the proprietor of a sole proprietorship, and by a principal executive or ranking elected official for a public agency.

A. Name and title of person applying for permit:

\_\_\_\_\_

B. Signature and Date.

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

\_\_\_\_\_

**XII. FINANCIAL RESPONSIBILITY**

A. Name and title of person(s) who will:

- 1) assume financial responsibility in the event of contamination.\*
- 2) maintain resources necessary for proper closure of the well.\*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B. Signature(s) and date.

\_\_\_\_\_

\_\_\_\_\_

E-Mail address: \_\_\_\_\_

***\*NOTE: If the financial responsibility is to be assumed by a Corporation or church trustees, you must submit the supporting documents, Federal Employee Identification Number (FEIN), if applicable, and a list of names of the corporate officers/trustees who have signature authority for the permit and specify the person(s) that you want to appear on the permit as the financial responsible party(ies). The list and permit can be modified as needed.***

In accordance with 47CSR13, 13.7.g, the UIC program requires a financial statement, surety bond, or other documents that statethe financial status of the permittee. This statement is necessary to insure that the permittee has the financial assets required to properly close the injection system, and is a requirement of all Underground Injection Control industrial permits EXCEPT 5D3 permits (improved sinkholes and SRC injections by direct push methods). This requirement may be satisfied by filling out and returning page 15 with the completed application.

### **XIII. AREA OF REVIEW, OPERATING DATA, CONSTRUCTION DETAILS, & MONITORING PLAN**

Section XIII must be addressed in detail and submitted with the application for a Class V Injection Well.

A. Map of Well\Area of Review - Submit a topographic map, extending at least one mile beyond the property boundary, showing the Class V injection well(s) (i.e. septic system, dry well, cesspool) for which a permit is being sought. The map must show location of all ground water supply sources, including all public and private drinking water wells, springs, and surface water bodies within at least one-quarter mile of the point of injection for the facility's subsurface distribution system. The application must provide a list of all groundwater users within the 1/4 mile boundary. The applicant must provide well details where available.

B. Operating Data - **Submit a comprehensive narrative describing, in detail, the process(es) and/or activities which generate the waste stream disposed of in the Class V injection well (septic system\other subsurface distribution system).** Indicate average and maximum daily rate of disposal, injection pressure, and an estimate of the total volume of fluids entering the well(s) daily. Also include an analysis of the chemical and biological characteristics of the fluid being discharged and an evaluation of any effects that the system\well has on these characteristics (i.e. dilution, adsorption, neutralization, settling). **Describe measures, which will be taken to prevent spills or additions of unintentional wastes to enter the permitted waste stream (oil, grease, solvents etc.)**

C. Construction Details - Submit schematic or other appropriate drawings of the surface and subsurface construction details of the well(s) and surrounding facilities including waste water system layout. Indicate the depth, diameter, and other dimensions of the well(s) or septic system. The drawing should include the leach field and surrounding buildings and/or dwellings associated with the waste water system layout.

DOES THIS FACILITY HAVE GREASE TRAPS ASSOCIATED WITH THE SUBSURFACE DISTRIBUTION SYSTEM? YES/NO

If So, How Many? \_\_\_\_\_ and:

Do You Inspect The Grease Trap(S) Monthly To Ensure That They Are Working Properly?  
YES/NO

Do You Clean And Remove Excess Grease And Solids Periodically From The Grease Trap(S)?  
YES/NO

Applicant: Provide information for parts B and C, and complete the groundwater users survey (form attached, page 14) from part A; The UIC program will detail the monitoring program to be followed and plugging and abandonment procedures in the permit.

**Septic Tank(s) Information:**

Material\_\_\_\_\_

Liquid Depth\_\_\_\_\_

Liquid Capacity\_\_\_\_\_gal

Length\_\_\_\_\_ Width\_\_\_\_\_ Depth\_\_\_\_\_

Distance to: Dwelling\_\_\_\_\_ft Water Supply\_\_\_\_\_ft

Nearest Property Line\_\_\_\_\_ft

**Soil Adsorption System:**

Type Drain Line Material\_\_\_\_\_

Trench Width\_\_\_\_\_ Trench Depth\_\_\_\_\_

Total Adsorption Area in Trench Bottom\_\_\_\_\_ sq.ft.

Diameter of Drain Line\_\_\_\_\_In.

Type Filter Media \_\_\_\_\_ No. Of Drain Lines \_\_\_\_\_

Length of Each Line\_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ft.

Depth Filter Media Over Drain Line\_\_\_\_\_In.

Distance of Disposal Field to: Dwelling:\_\_\_\_\_ft; Water Supply:\_\_\_\_\_ft; Nearest Property Line:\_\_\_\_\_ft.

D. Percolation Rate - Provide the average time for water to fall 1 inch, utilizing standard methods, in the adsorption area.

E. Existing Permits - List and provide copies of any state and/or local permits for the waste disposal facility.

F. Plugging and Abandonment - Submit a plan detailing procedures for abandonment of the Class V well when the useful life is complete.

**Note: fill out as much of this as you can – your local sanitarian may assist you in obtaining these details. Re-applicants - Were there any changes to the disposal system since the last application was filed?**

**G. Groundwater Protection Plan (GPP) - Please contact WV DEP Groundwater program at 304.926.0499 to see if your facility is required to have a GPP.** A blank GPP form is included with the application on page 16. If required, the GPP is to be submitted and reviewed as part of the facility's or activity's permit application and shall contain the following from Title 47 Series 58 of the Legislative Rules:

- ❖ An inventory of all operations that may reasonably be expected to contaminate the groundwater resources with an indication of the potential for soil and groundwater contamination from those operations;
- ❖ A description of procedures designed to protect groundwater from the identified potential contamination sources, with specific attention given to:
  - Manufacturing facilities;
  - Materials handling;
  - Equipment cleaning;
  - Construction maintenance and activities;
  - Maintenance activities;
  - Pipelines carrying contaminants; and
  - Sumps and tanks containing contaminants.
- ❖ A list of procedures to be employed in the design of any new equipment/operations;
- ❖ A summary of all activities carried out under other regulatory programs that have relevance to groundwater protection; and
- ❖ A discussion of all available information reasonably available to the facility/activity regarding existing groundwater quality at, or which may be affected by the site.
- ❖ A clarification that no wastes be used for deicing, fills, etc., unless provided for in existing rule.
- ❖ Provisions for all employees to be instructed and trained on their responsibility to ensure groundwater protection. Job procedures shall provide direction on how to prevent groundwater contamination.
- ❖ The GPP shall include provisions for quarterly inspections to ensure that all elements and equipment of the site's groundwater protection program are in place, properly functioning and appropriately managed.

A copy of Title 47, Series 58 - Groundwater Protection Regulations or Title 47, Series 13 - Underground Injection Control Regulations can be obtained by contacting the Secretary of State's office at (304) 926.0499 ext. 1052

**XIV. PERMIT and APPLICATION FEES**

In accordance with the West Virginia Code, Chapter 22, Article 11, Section 10(c), a permit application fee shall accompany the permit application. **No permit application will be processed until the appropriate fee has been received, therefore you must calculate the appropriate application fee and submit with the application.** The minimum permit application fee is \$25.00 and the maximum permit application fee is \$1,500.00. All tanks associated with one drainfield are considered to be one system and must be calculated as a cumulative total capacity for the Volume Fee. All septic tanks associated with the subsurface distribution system must be registered with this office before any permit is issued.

**A. THE FEE CALCULATION CAN BE COMPLETED BY ONE OF THE THREE METHODS LISTED BELOW: (PLEASE CIRCLE THE ONE USED TO CALCULATE THE FEE)**

- 1. Total fluid capacity in gallons of the septic tank(s) associated with the subsurface distribution system.**
- 2. You may use copies of water bills from the previous year for the facility to calculate the average daily volume gallons per day discharge.**
- 3. The design flow listed on the permit to construct or final inspection form issued by the Health Department.**

**B. TREATMENT FACTOR DEFINITIONS: (consult the attached list for codes)**

- 1. Septic tank and drain field constitutes “Primary Treatment”.**
- 2. Additional aeration chamber and settling chamber constitutes “Secondary Treatment”.**
- 3. Additional aeration and settling and sand filtration or re-circulating sand filters constitutes “Tertiary Treatment”.**
- 4. All of the above constitutes “Greater than Tertiary Treatment”.**
- 5. If your system utilizes other treatment not listed above, contact this office for assistance in determining treatment factor.**
- 6. Sanitary waste is defined on page 13.**

Use Tables A (Volume Fees), B (Treatment Factors), and C (Well Type Codes & Factors) to calculate your application fee using the following formula:

$$\text{Permit Application Fee} = (\text{Volume Fee}) \times (\text{Treatment Factor}) \times (\text{Well Type Factor})$$

**EXAMPLE:**

If you input 450 gallons per day into a Type 5W20 well (septic system with drainfield) the permit application fee would be as follows:

$$\text{Fee} = (\text{Volume Fee}) \times (\text{Treatment Factor}) \times (\text{Well Type Factor}) = \\ \$75.00 \times 2.5 \times 3 = \$562.50$$

**CALCULATE THE PERMIT APPLICATION FEE FOR YOUR FACILITY IN THE SPACE BELOW.**

Fee = (Volume Fee) X (Treatment Factor) X (Well Type Factor)

Fee = \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
 (Table A) (Table B) (Table C)

Calculated Permit Application Fee = \_\_\_\_\_

ACTUAL PERMIT APPLICATION FEE = \_\_\_\_\_  
 (Minimum \$25.00; Maximum \$1500.00)

**B. DO NOT SUBMIT THE ANNUAL PERMIT FEE WITH THIS APPLICATION, THE ANNUAL PERMIT FEE WILL BE INVOICED BY THIS OFFICE AND WILL BE DUE ON THE ANNIVERSARY DATE OF PERMIT ISSUANCE, ALONG WITH A GROUND WATER FEE OF \$15.00.**

The Annual Permit Fee is calculated using the following formula:

Annual Permit Fee = (Volume Fee) X (Treatment Factor) X (Well Type Factor) X 0.333

**USE THE SPACE BELOW TO CALCULATE THE ANNUAL PERMIT FEE FOR THIS FACILITY.**

Fee = \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_ X 0.333  
 (Table A) (Table B) (Table C)

Calculated Annual Permit Fee = \_\_\_\_\_ + Groundwater fee of \$15.00 = \_\_\_\_\_

ACTUAL ANNUAL PERMIT FEE = \_\_\_\_\_ + Groundwater fee of \$15.00 = \_\_\_\_\_  
 (Minimum \$25.00; Maximum \$500.00)

TABLE A - VOLUME FEES	
VOLUME*	FEE
<250	\$ 50.00
250 - 500	\$ 75.00
501 - 1000	\$ 150.00
1001 - 5000	\$ 200.00
5001 - 50,000	\$ 400.00
50,001 - 100,000	\$ 600.00
>100,000	\$ 850.00

**\*SEE SECTON XVI, SUBSECTION A, PAGE 8 FOR FEE CALCULATION**

<b>TABLE B - TREATMENT FACTORS</b>	
<b>LEVEL OF TREATMENT</b>	<b>TREATMENT FACTOR</b>
NO TREATMENT	3
PRIMARY TREATMENT	2.5
SECONDARY TREATMENT	2
TERTIARY TREATMENT	1.5
>TERTIARY TREATMENT	1

**\*SEE ATTACHMENT FOR WELL TYPE INFORMATION**

<b>TABLE C -- CLASS 5 WELL TYPE CODES &amp; FACTORS</b>	
<b>WELL TYPE CODES</b>	<b>CODE FACTOR</b>
<b>DRAINAGE WELLS</b>	
5F1	1
5D2	1
5D3	2
5D4	3
5G30	1
<b>GEOHERMAL REINJECTION WELLS</b>	
5A5	3
5A6	3
5A7	1
5A8	3
<b>DOMESTIC WASTEWATER DISPOSAL WELLS</b>	
5W9	3
5W10	1
5W11	2
5W31	2
5W32 (sanitary waste only)	1

5W12	1

<b>MINERAL AND FOSSIL FUEL RECOVERY RELATED WELLS</b>	
5X13	3
5X14	2
5X15	2
5X16	2
<b>OIL FIELD PRODUCTION WASTE DISPOSAL WELLS</b>	
5X17	3
5X18	2

<b>INDUSTRIAL/COMMERCIAL/UTILITY DISPOSAL WELLS</b> (sanitary waste co-mingled with other wastewater)	
5A19	2
5W20 (Co-mingled wastes; Industrial/Commercial effluent)	3
	3
<b>RECHARGE WELLS</b>	
5R21	1
5B22	1
5S23	1
<b>MISCELLANEOUS WELLS</b>	
5N24	4
5X25	3
5X26	1
5X29	3
5X27	3

UNDERGROUND INJECTION CONTROL  
CLASS V  
STATEMENT FOR BILLING

The \_\_\_\_\_, (name of company, facility, or proprietor) of which I am an authorized representative, has applied for a West Virginia Underground Injection Control Permit from the West Virginia Department of Environmental Protection, Division of Water and Waste Management, Regulatory Programs/UIC Office. Under State Legislative Rules, Title 47, Series 13, section 13.24, the costs of publishing a Class 1 legal advertisement are to be paid by the applicant who must also send the certificate of publication to the Division of Water and Waste Management upon publication.

The \_\_\_\_\_, (name of company, facility, or proprietor) hereby agrees to pay the cost of such legal advertisement. The publishing newspaper should send the certificate of publication and bill to:

**NAME OF COMPANY, FACILITY, OR PROPRIETOR:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**Business or facility county location:** \_\_\_\_\_

\_\_\_\_\_  
(Signature of Authorized Representative)

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public)

\_\_\_\_\_  
(Commission Expires)

If you need assistance in completing this application, you may call 304-926-0499 for help. If you need help in obtaining a topo map as described and required in your permit application, you may contact the West Virginia Geological and Economic Survey at 1-800-984-3656, the local health department, local library, or call this office and make arrangements to come in and make copy of our map(s).

A groundwater user's survey is also required as part of your application - this is also associated with the map on which you must mark the ground water supply sources at least one quarter mile of the property boundary with an identifier (such as a number or letter) and supply a corresponding list of the names and addresses of the owners (see Section XIII, Part A). -- You may be able to get this information from your local health department or you may get a statement from your local public service district stating that all water users within a quarter mile radius of your facility is connected to the public water source.

**Sanitary waste is defined as:** liquid or solid wastes originating solely from humans and human activities, such as wastes collected from toilets, showers, wash basins, sinks used for cleaning domestic areas, sinks used for food preparation, clothes washing operations, and sinks or washing machines where food and beverage serving dishes, glasses, and utensils are cleaned. Sources of these wastes may include single or multiple residences, hotels and motels, restaurants, bunkhouses, schools, ranger stations, crew quarters, guard stations, campgrounds, picnic grounds, day-use recreation areas, other commercial facilities, and industrial facilities provided the waste is not mixed with industrial waste

**COMPLETE THIS FORM OR .... YOU MUST** identify all drinking water sources within one-quarter mile radius of their subsurface distribution system or submit this notarized affidavit certifying that all drinking water sources within one-quarter (1/4) mile radius of their subsurface distribution system has been connected to a public water source via the local public service district.

“I certify under penalty of law that **(state name of business)** \_\_\_\_\_

\_\_\_\_\_ has verified with the public service district **(state name of Public Service District)**

\_\_\_\_\_ that all residents within a one-quarter (1/4) mile radius of this establishment’s subsurface distribution system has been connected to the local Public Service District. I have personally verified and am familiar with the information requested based on personal knowledge and/or inquiry of those individuals immediately responsible for obtaining the information. I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

\_\_\_\_\_  
**(Signature of Authorized Representative)**

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_, my commission expires \_\_\_\_\_  
(Notary Signature)  
\_\_\_\_\_.

**Requirement for Financial Responsibility to Close Injection System**

TO: WV Dept. Of Environmental Protection  
Division of Water & Waste Management  
601 57 St. Street  
Charleston, West Virginia 25304-2345  
ATTN: Underground Injection Control Program

FROM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE: \_\_\_\_\_

SUBJECT: Underground Injection Control (UIC) Permit Application  
# \_\_\_\_\_  
Requirement for Financial Responsibility

I, \_\_\_\_\_, verify that I will maintain financial responsibility and resources to close, plug, and abandon underground injection well(s) in a manner prescribed by the Director of the Division of Water and Waste Management in accordance with 47CSR13, Section 13.7.g.

\_\_\_\_\_  
Date

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public)

\_\_\_\_\_  
(Commission Expires)

**NOTE:**

All facilities discharging **kitchen wastes** must be equipped with a grease trap to accommodate food preparation. The grease trap shall be inspected monthly to ensure that it is working properly. The grease trap shall be maintained by cleaning the trap and removing all excess grease and solids semi-annually. At this time the subsurface distribution system shall be sampled twice a year for oil and grease and must be analyzed by a state certified laboratory. Samples must be taken at a sampling point between the grease trap and prior to the effluent entering the subsurface distribution system (i.e. drain field). A properly installed sampling port is recommended.

**MONITORING FOR CAMPGROUNDS:**

Analysis is required to be conducted twice a year for formaldehyde, ethylene glycol, propylene glycol monobutyl ether and dichlorobenzene by a state certified laboratory.

**47CSR11§47-11-3 COIN ORPERATED AND OTHER COMMERICAL LAUNDRIES:**

Laundry with no wastewater discharge: - If a laundry is located where no discharge of the wastewater can be made to a sanitary sewer or to a receiving stream, then holding tanks shall be provided for wastes and the waste must be transported to an approved wastewater treatment plant for treatment. **The following systems are prohibited and will not be permitted: (1) septic tanks with or without leach fields. (2) cesspools (3) direct or indirect discharge of untreated or inadequately treated laundry wastewater to the waters of the state.**

**NOTE: Refer to 47CSR58, Section 4.8, “Groundwater Protection Rule” regarding tanks.**

## WVDEP – Division of Water and Waste Management GROUNDWATER PROTECTION PLAN FOR SMALL BUSINESSES

A Groundwater Protection Plan (GPP) is required for your business. The Groundwater Protection Plan (GPP) must be forwarded to and approved. Contact:

WVDEP DWWM  
601 57<sup>th</sup> Street, West  
Charleston WV 25304  
304.926.0499

A Groundwater Protection Plan (GPP) for your business is required by WVDEP. The primary purpose of the GPP is to make the business operator aware that groundwater, by law, must be protected. Other important parts are the inventory of all operations (processes, materials, and other activities) that “may reasonably be expected to” contaminate groundwater, and a description of procedures to prevent potential contamination from occurring.

**FACILITY NAME:**

**FACILITY LOCATION:**

The form below will be your GPP after you:

1. Read and understand each GPP section.
2. Fill in the information required box below each GPP section. Add extra sheets if necessary.
3. Attach a location map and a site diagram or plan showing the location of GPP elements.
4. Sign and date the GPP.

**THE COMPLETED GPP MUST BE AVAILABLE ON SITE AT ALL TIMES  
(47CSR58, Section 4.12.c.)**

GPP Section	Information Required
<p><b>4.11.a.</b> A list of all operations that may reasonably be expected to contaminate groundwater.</p>	<p>A list of all processes, materials, and other activities that could contaminate groundwater. Examples are unlined ponds, underground storage tanks, aboveground storage tanks (especially those with underground piping), waste piles, or raw material piles.</p>
<p><b>4.11.b.</b> A description of procedures and facilities used to protect groundwater quality from the list of potential contaminant sources above.</p>	<p>Examples are secondary containment for aboveground tanks, underground piping, and drum storage areas.</p> <p>4.11.b.1. – Manufacturing  4.11.b.2. – Materials Handling  4.11.b.3. – Equipment Cleaning  4.11.b.4. – Construction and Maintenance  4.11.b.5. – Pipelines  4.11.b.6. – Sumps and Tanks</p>

<b>4.11.c.</b> List procedures to be used when designing and adding new equipment or operations.	Examples may be the addition of loading docks for salt storage or fuel storage tanks at a facility. What structures and operating practices will be used to prevent groundwater contamination from these?
<b>4.11.d.</b> Summarize all activities at your facility that are already regulated for groundwater protection.	Examples would be the registration of underground storage tanks and the required groundwater monitoring, or the construction and use of a landfill and required groundwater monitoring.

<b>4.11.e.</b> Discuss any existing groundwater quality data for your facility or an adjacent property.	<b>Include the most recent year of sampling data if available or data for an adjacent facility. Many facilities will have no information for this section.</b>
<b>Attach data summary sheets if necessary.</b>	
<b>4.11.f.</b> A statement that no waste material will be used for deicing or fill material on the property unless allowed by another rule.	<b>Write an appropriate statement that this practice will not be used at your facility.</b>
<b>4.11.g.</b> Provisions for all employees to be	<b>Summarize training for all employees to ensure familiarity with the GPP. Specific inspection, maintenance, and cleanup</b>

<p><b>instructed and trained on their responsibility to ensure groundwater protection. Job procedures shall provide direction on how to prevent groundwater contamination.</b></p>	<p><b>procedures should be included.</b></p>
<p> </p>	
<p><b>4.11.h. Include provisions for inspections of all GPP elements and equipment. Inspections must be made quarterly at a minimum.</b></p>	<p><b>State inspection frequency and personnel. Include inspection form if one is used. Inspection records should be saved to verify GPP inspections.</b></p>
<p> </p>	
<p><b>Signature</b></p>	<p> </p>
<p><b>Date</b></p>	<p> </p>