



UIC Registration and Approval Form

APPLICANT INFORMATION			
NAME:		PHONE:	EMAIL:
JOB NUMBER:		DATE:	PRIORITY: High Medium Low
UIC INFORMATION			
UIC ADDRESS:			
UIC TYPE: Sump Soakage Trench Hybrid Other (describe) _____		LATITUDE: <i>deg</i>	LONGITUDE: <i>deg</i>
		UIC DEPTH: <i>ft</i>	UIC DIAMETER: <i>ft</i>
TREATMENT TYPE 1: Sedimentation Manhole Swale Planter None Other: _____	TREATMENT TYPE 2: Sedimentation Manhole Swale Planter Other: _____	SIZE OF IMPERVIOUS AREA DRAINED (if available): <i>ft²</i>	
		DESIGN DRAINAGE RATE : <i>gpm</i>	

Download and complete this form. Save a copy for your records. Attach the completed form and any supporting documentation such as an as-built or map. Email them to BESUIC@portlandoregon.gov.

FOR OFFICE USE ONLY

ESTIMATED DEPTH TO GROUNDWATER: <i>ft</i>	CLOSEST DRINKING WELL: (>500 ft required)	WELL#:	
ESTIMATED SEPARATION DISTANCE: (>5 ft required) <i>ft</i>	<i>ft</i>	Public	Private
WITHIN 2-YR TIME OF TRAVEL BOUNDARY: Yes No	CLOSEST IRRIGATION WELL: (>500 ft required)	WELL#:	
CLOSEST ESCI SITE: (>500 ft required) SITE ID#: <i>ft</i>	<i>ft</i>	Public	Private
STREET DRAINAGE CLASSIFICATION: Collector Residential	ZONING TYPE: SFR MFR	POS COM	IND

ARE PERMIT REQUIREMENTS MET? Yes No. If no, UIC Permit Manager approval needed:	DEQ ID:
APPROVED BY:	UIC REGISTRATION ID:
APPROVAL DATE:	HANSEN UNIT ID: (if known)