|  | Massachusetts Department of Environmental Protection  Bureau of Water Resources – Drinking Water Program  UIC Open-Loop Ground Source Heat Pump Well Technical Compliance Form  (Attach to your eDEP BRP WS 06 UIC Registration application form) | | | |
| --- | --- | --- | --- | --- |
|  | **Enter UIC Registration Number (if applicable):** | | UIC Registration Number | |
|  | The UIC Open-Loop Ground Source Heat Pump Well Technical Compliance Form should be submitted with all Underground Injection Control (UIC) registration applications for UIC Class V open-loop ground source heat pump (GSHP) wells unless you are only registering those wells for the purpose of closing all of them.  The technical compliance form should be used by the applicant and Massachusetts Department of Environmental Protection (MassDEP) to determine whether a UIC Registration for open-loop GSHP discharge may be approved. Depending upon responses to questions provided on this form, MassDEP may contact you for additional information.  Technical Compliance forms are not required if you are registering UIC wells for the purpose of closing all of them.  For more information, the MassDEP’s Guidelines for Ground Source Heat Pump Wells is available in the “Guidance” section of the following MassDEP UIC program web page: <https://www.mass.gov/lists/underground-injection-control-uic-guidance>. All questions regarding the UIC program should be addressed to askUIC@state.ma.us or to Joe Cerutti by phone at 617 292-5859 or by mail at the address shown at the end of this document. You may also contact the MassDEP Drinking Water Program at [Program.director-dwp@mass.gov](mailto:Program.director-dwp@mass.gov) or by phone at 617-292-5770. You may also contact the MassDEP Drinking Water Program at [Program.director-dwp@mass.gov](mailto:Program.director-dwp@mass.gov). Subject: UIC, or by phone at 617-292-5770. | | | |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  | A. Residential/Facility Information | | | |
| **Important:** When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key. | Facility/Residential Property Name | | | |
| Facility/Residential Property Street Address | | | |
| City/Town | State | | Zip Code |
| B. Preparer Information | | | |
| Preparer Name | Preparer Address **(if different from facility)** | | |
| City/Town | State | | Zip Code |
| Zip | Telephone Number | | |
|  | Preparer’s Email | Preparer’s Phone # | | |
|  | C. Technical Compliance Questions | | | |
|  | 1. Is there any existing soil or groundwater contamination that may be affected by the UIC Class V injection (i.e. soil contamination that may be mobilized either directly from the discharge or indirectly from the water table mounding that will result from the discharge and/or groundwater contaminant plumes that may migrate or expand as a result of the Class V UIC injection)? | | | Yes  No |
|  |  |
|  |  |
|  | 1. Is the well that will be receiving the discharge from the GSHP system also being used as a public water supply well? | | | Yes  No |
|  | C. Technical Compliance Checklist (cont.) | | |  |
|  | 3. Is the well that will be receiving the discharge from the GSHP system also being used as a private water supply well? | | | Yes  No |
|  | a. If yes, does the proposed GSHP system meet the criteria stated in Sections 6.0 and 9.3 of the MassDEP Guidelines for Ground Source Heat Pump Wells? | | | Yes  No |
|  |  |
|  | 4. Is the existing or proposed UIC GSHP well in a Zone I Wellhead Protection Area of a public water supply? | | | Yes  No |
|  | 5. Does the existing or proposed GSHP system include a system bleed discharge? | | | Yes  No |
|  |
|  | a. If yes, does or will the system bleed discharge line include a backflow prevention device to prevent back siphoning? | | | Yes  No |
|  | 6. Does any of the GSHP return flow or system bleed discharge to a surface water body or to a stormwater system that discharges to a surface water body? | | | Yes  No |
|  |  |
|  | 7. Will any chemicals be added to the water that is discharged to the UIC well? | | | Yes  No |
|  | 8. Does the existing or proposed GSHP well(s) meet the applicable setback distances from Section 9.7 of the Guidelines for Guidelines for Ground Source Heat Pump Wells? | | | Yes  No |
|  |  |
|  | **D. Certification Statement** | | | |
|  | I certify the following under penalty of law:  This document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my diligent inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.  I also hereby acknowledge that I shall submit an updated UIC Open-Loop Ground Source Heat Pump Well Technical Compliance Form upon a change in activity which may result in ineligibility for the well’s “technical compliance” status. I hereby acknowledge that I shall allow MassDEP staff on-site to perform inspections to assess the well’s technical compliance. | | | |
|  |
|  |
|  |
|  |
|  |
|  |
|  |  | | | |
|  | Signature | Date | | |
|  | Print Name | Position/Title | | |