



**SHALLOW DISPOSAL SYSTEM INVENTORY**  
 NORTH DAKOTA DEPARTMENT OF  
 ENVIRONMENTAL QUALITY  
 WATER QUALITY DIVISION  
 SFN 59533 (September 2021)

Return completed form to:  
 North Dakota Department of Environmental Quality  
 Division of Water Quality  
 4201 Normandy Street  
 Bismarck, ND 58503-1324 Telephone  
 Number: 701.328.5294 Email  
 Address: troth@nd.gov

<b>1. Facility Information</b>			
Facility Name			UIC No. (Provided by NDDEQ)
911 Location Address	Township	Range	Section/Quarter Section
City	State	ZIP Code	County
Facility Contact	Contact Title		Contact Telephone
Facility Manager	Manager Telephone		Contact or Manager Email Address
<b>2. Owner Information</b>			
Name			Owner Email Address
Mailing Address (if different from above)			
City	State	ZIP Code	Owner Telephone
<b>3. Types and quantities of waste fluids produced at facility</b>			
<i>List the types and estimated quantities of waste fluids produced at this facility (e.g; waste oil, antifreeze, solvents, vehicle wash water, etc.)</i>			
<b>4. Waste fluid disposal method (Check all that apply)</b>			
None - No waste fluids produced at facility.			
Underground disposal through septic tank/drainfield ( <u>Sanitary wastes only</u> ). System capacity less than 20 persons/day.			
Underground disposal through septic tank/drainfield ( <u>Sanitary wastes only</u> ). System capacity greater than 20 persons/day.			
Surface water body (lake, river, stream, wetland, etc.).			
Privately owned lagoon or pond.			
Ground surface.			
Recycled or hauled away for recycling.			
Municipal sewer system.			
Underground disposal through septic tank/drainfield (any commercial, industrial, or automotive wastes).			
Underground disposal into a well.			
Other.			
<i>Please list all types of fluids discharged. If multiple methods, indicate which fluids are disposed by which method:</i>			
<b>5. Please provide a brief summary of disposal locations in relation to the facility (i.e; drains, drainfields, wells, etc.)</b>			
<b>6. Person completing the form</b>			
Name			Date
Mailing Address (if different from above)			
City	State	ZIP Code	Telephone