D-E-M

STATE OF RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Office of Water Resources - Groundwater Discharge Program

235 Promenade Street, Providence, RI 02908-5767

Telephone: 401-222-6820; Rhode Island Relay: 711; FAX: 401-222-6177

APPLICATION TO MODIFY A GROUNDWATER DISCHARGE SYSTEM

		FOR RIDEM USE ONLY		
Fee: \$200.00 (\$1	00.00 for Minor Modification)	Facility ID #	Date Received	
Attach a non-refundable check payable to "General Treasurer, State of RI" and reference the Groundwater Discharge Rules.		Amount Paid: Check No.: Application No.		
Groundwater	Discharge System Approval			
Name on Approv	val	Facility ID/File#		
Groundwater	Discharge System Registration			
Name on Registr	ration	Facility ID/File#		
	MODIFICATION OF GROUNDWATER I tamped plans as necessary):	DISCHARGE SYSTEM (exp	lain below or on separate sheet;	
Change to t	Change to type or quality of discharge			
Decrease fr	Decrease frequency of monitoring			
Change to	Change to quantity of discharge			
Change to 1	Change to piping or associated devices			
☐ Major chan	Major change to location of the groundwater discharge system			
REASON FOR	MINOR MODIFICATION OF GROUNDY	VATER DISCHARGE SYST	TEM:	
☐ Correct typ	ographical errors			
☐ Changes to	Changes to construction or installation, as approved			
Minor char	Minor change to location of the groundwater discharge system			
Anticipated date	of modification to discharge system:			
information sub	form, I certify under penalty of law that I hat omitted in this document and all attachment obtaining the information, I believe the info	s and based on my inquiry of	f those individuals immediately	
(Owner Signatur	e)		(Date)	
Return Comple	ted Form to: RIDEM/ Office of Groundwater Dis 235 Promenade S			

Providence, RI 02908

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