

APPLICATION FOR APPROVAL OF PLANS AND SPECIFICATIONS FOR THE REPAIR OR ALTERATION OF A DAM AND RESERVOIR

Original signature required. Please mail hard copy with signatures to DSOD.

DSOD Office Use Only	
Dam Number	Application Filed
Applicant must NOT fill in the above blanks.	

For full information concerning the filling out and filing of this form, send for "Statutes and Regulations Pertaining to Supervision of Dams and Reservoirs." This is not an application to appropriate water. To secure the right to appropriate water, application should be made to the State Water Resources Control Board on forms the Board will provide upon request.

I, _____ of _____
Name of individual signing application Address

County of _____, State of _____, hereby make application for the approval of plans and specifications for the repair alteration of _____ dam and reservoir.
Name of dam and reservoir

The owner of the dam and reservoir is _____ of _____ County of _____, State of _____.
Name of owner Address

If the owner is a corporation, give name and address of president and secretary:

The applicant is acting for the owner in the legal capacity of _____
Agent, Lessee, Trustee, Engineer, etc.

Location of Dam

1. The dam is in _____ County, in the _____ ¼, Sec. _____, Tp. _____, R. _____, _____ B&M and is located on _____, tributary to _____.
Creek, river or watershed Creek or river

Description of Proposed Work

2. Type of dam _____
Concrete arch or gravity, earth, rockfill, etc.

3. Description of work contemplated (Use extra sheets or exhibits if necessary.)

4. Work will result in: _____ the maximum storage level.
"No change in" or "Lowering"

This form is not to be used if the alteration will increase the water storage elevation of the reservoir as previously operated.

5. Estimated cost of work _____

6. Work is to commence by _____, and to be completed by _____.

7. Engineer _____ 8. Contractor _____

9. The maps, plans and specifications, and filing fee of _____ accompanying this application are a part thereof.

Signed: _____
Applicant – sign all copies

this _____ day of _____, 20____

