SIMPLIFIED INUNDATION MAPPING REQUEST FORM

TO BE COMPLETED AND CERTIFIED BY DAM OWNER. PLEASE PRINT

1. **Name of Dam:** ___________________________  **Inventory Number:** __________
   **Other Name (if any):** __________________________________________________________

2. **Hazard Potential Classification** (See 4VAC 50-20-40 Hazard Classifications of the Virginia Impounding Structure Regulations):
   (Check one)  
   - [ ] HIGH  
   - [ ] SIGNIFICANT  
   - [x] LOW

3. **Name of Owner(s):** __________________________________________________________
   **If a corporation, name of representative:** __________________________________________
   **Mailing address:** ______________________________________________________________
   **Telephone: (Business) ___________________________ (Residential) _______________________
   **Other means of communication:** ________________________________________________

4. **Current Operation and Maintenance Certificate Information:**
   **Type of O&M Certificate:**
   (Check one)  
   - [ ] Conditional  
   - [ ] Regular  
   - [x] No Certificate
   **Certificate Issue Date:** ___________________________
   **Certificate Expiration Date:** ______________________

**OWNER CERTIFICATION STATEMENT**

I hereby request a Simplified Inundation Mapping and Hazard Classification analysis from the Division of Dam Safety and Floodplain Management. I understand that if, during any point during the analysis, the Hazard Potential Classification is found to be either High or Significant, I will be required to hire an engineer to perform Mapping and Hazard Potential Classification in accordance with sections 4VAC50-20-54 and 4VAC50-20-40 of the Impounding Structure Regulations. I also understand that my request shall not be processed until my fee is received and I will not receive a refund of the fee associated with this request.

Signed: ___________________________________________  **Owner’s Signature** ___________________________________________

       ___________________________________________  **Print Name** ___________________________________________

       This ___________ day of ___________, 20__.

Note: Completed forms must be mailed to the following address:

**Department of Conservation and Recreation**
**Division of Dam Safety and Floodplain Management**
**600 E. Main St., 24th Floor**
**Richmond, Virginia 23219**

In addition, a completed Fee Form for Simplified Inundation Mapping Requests (DCR199-215) and the required fee must be mailed under separate cover to: Virginia Department of Conservation and Recreation, Division of Finance, Accounts Payable, 600 E. Main St., 24th Floor, Richmond, Virginia 23219.

(DCR199-214) (11/12)