Texas Dam Safety Program, MC 174
Field Operations Support Division, Office of Compliance and Enforcement
Texas Commission on Environmental Quality
P.O. Box 13087
Austin, TX 78711

INFORMATION SHEET: PROPOSED NEW CONSTRUCTION, MODIFICATION, REPAIR, ALTERATION, OR REMOVAL OF A DAM

(PLEASE PRINT OR TYPE)

Reference 30 Texas Administrative Code, Chapter 299, Dams and Reservoirs

PLEASE CHECK ONE: ❑ New ❑ Modification ❑ Repair ❑ Removal ❑ Alteration

SECTION 1: OWNER INFORMATION

Owner's Name _____ Title _____

Organization _____

I have authorized the submittal of the final construction plans and specifications to the TCEQ Dam Safety Program according to 30 TAC Chapter 299.

_____ _____

(Signature of Owner) *(Date)*

Owner's Address _____

City _____ State _____ Zip Code _____

Phone Number ( ) _____ Emergency Contact Phone ( ) _____

Fax Number ( ) _____ E-mail _____

Owner Code *(Please check one)*: ❑ Federal (F) ❑ Local Government (L) ❑ Utility (U) ❑ Private (P) ❑ State (S)
❑ Other (O) please specify: _____

Dam and Reservoir Use *(Please check one)*: ❑ Augmentation ❑ Diversion ❑ Domestic ❑ Erosion Control
❑ Evaporation ❑ Flood Control ❑ Fire Control ❑ Fish ❑ Hydroelectric ❑ Industrial
❑ Irrigation ❑ Mining ❑ Municipal ❑ Pollution Control ❑ Recreation ❑ Stock Water
❑ Settling Ponds ❑ Tailings ❑ Waste Disposal ❑ Other, please specify: _____

Engineering Firm _____

Project Engineer _____ Texas P.E. License Number _____

Engineering Firm Address _____

City _____ State _____ Zip Code _____

Phone ( ) _____ Fax ( ) _____

E-mail _____

SECTION 2: GENERAL INFORMATION

Name of Dam _____

Other Name(s) of Dam _____

Reservoir Name _____

Location _____ Latitude _____ Longitude _____

County _____ Stream Name _____

River Basin _____ Topographic Map No. _____

Distance and Direction from Nearest City or Town _____

TX Number _____ Water Rights Number _____

If you have questions on how to fill out this form or about the Dam Safety Program, please contact us at 512-239-5195. *Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-3282.*

SECTION 3: INFORMATION ON DAM

Classification

Size Classification: ❑ Large ❑ Medium ❑ Small

Hazard Classification: ❑ High ❑ Significant ❑ Low

Number of People at Risk _____ Study Year _____

Type of Dam: ❑ Concrete ❑ Gravity ❑ Earthfill ❑ Rockfill ❑ Masonry ❑ Other (specify) _____

Dam Structure **(dimensions to nearest tenth of foot, volume to nearest acre-foot or cubic yard, areas to nearest acre):**

Spillway Height _____ ft *(natural surface of ground to bottom of emergency spillway at longitudinal centerline)*

Embankment Height _____ ft *(natural surface of ground to crest of dam at centerline)*

Structural Height _____ ft *(bottom of cutoff trench to crest of dam at centerline)*

Length of Dam _____ ft Crest Width _____ ft

Normal Pool Elevation _____ ft-MSL Principal Spillway Elevation _____ ft-MSL

Emergency Spillway Elevation _____ ft-MSL Top of Dam Elevation _____ ft-MSL

Embankment Volume _____ cu yd

Maximum Impoundment Capacity _____ ac-ft *(at top of dam)*

Normal Reservoir Capacity _____ ac-ft *(at normal or conservation pool)*

Reservoir Surface Area _____ acres *(at normal or conservation pool)*

Outlet

Outlet Diameter: _____ ❑ in ❑ ft *(check one)*

Type: _____

Principal Spillway

Type: ❑ Natural ❑ Riprap ❑ Concrete ❑ CMP ❑ RCP ❑ Other

Width (Diam.): _____ ft Capacity: _____ cfs

Emergency Spillway

Type: ❑ Natural ❑ Riprap ❑ Concrete ❑ CMP ❑ RCP ❑ Other

Width (Diam.): _____ ft Capacity: _____ cfs

Total Spillway Capacity: _____ cfs (crest of the dam)

SECTION 4: HYDROLOGIC INFORMATION

Required Hydrologic Criteria (% PMF) _____ % PMF Passing _____

PMF Study Year _____

Drainage Area: _____ acres, or _____ sq mi

Curve Number (AMC III condition) _____

Time of Concentration _____ hr

Peak Discharge _____ cfs

Peak Stage _____ ft-MSL

Storm Duration Causing Peak Stage _____ hr