

Permit# _____
Basin# _____
Modgrid# _____
W.A.P.# _____

**APPLICATION FOR PERMIT TO CONSTRUCT
A WATER IMPOUNDMENT**

Application must be submitted and permit received before construction

PRODUCT OWNER _____
ADDRESS _____
PHONE# (_____) _____

Application Date: ____ / ____ /19 ____
Construction Date: ____ / ____ /19 ____
Construction date is: (Check One) Estimated _____ Scheduled _____

IMPOUNDMENT LOCATION: Please attach a Project Site Map showing the proposed location of impoundment (s) and maximum pool (s), at a sufficient scale to allow accurate review of site's features, plotted on a U.S. Geological Survey 7 1/2 minute topographic quadrangle and a County Soils based map. Copies of construction plans must be submitted when available.

PURPOSE OF IMPOUNDMENT?: (Check Only One) Conservation _____
Recreation _____ Fish Propagation (Aquaculture) _____ Wildlife Protection _____
Stock Watering (Agriculture) _____ Public Supply _____ Industrial Supply _____
Irrigation Supply _____

WILL ANY EXTRACTIVE USE (BORROW) BE ASSOCIATED WITH CONSTRUCTION OF THIS IMPOUNDMENT? Yes _____ No _____ (Check One)*

LIST PROPOSED MAXIMUM WITHDRAWAL RATES (Water supply projects only, i.e. Public, Industrial, or Irrigation). Daily _____ MG, Monthly _____ MG, Yearly _____ MG.

IRRIGATION ACREAGE?: (For Crop Irrigation Only) The maximum acreage to be irrigated by this impoundment is _____ acres.

WILL THIS BE AN _____ IN-STREAM IMPOUNDMENT OR AN _____ OFF-STREAM IMPOUNDMENT? (Check One)

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NAME OF STREAM TO BE IMPOUNDED? _____
(For in-stream impoundments only)

DISTANCE TO NEAREST STREAM? _____ FEET
(For off-stream impoundments only)

WHAT IS THE SOURCE OF WATER FOR FILLING IMPOUNDMENTS? Also list applicable DNREC well construction or surface intake permit numbers.

WHAT IS THE HEIGHT OF IMPOUNDMENT BOTTOM (Check One) ABOVE _____
BELOW _____ STREAM CHANNEL BOTTOM? _____ FEET.
(For in-stream impoundments only)

WHAT IS THE HEIGHT OF IMPOUNDMENT BOTTOM (Check One) ABOVE _____
BELOW _____ GROUND SURFACE? _____ FEET
(For off-stream impoundments only)

SURFACE AREA OF IMPOUNDMENT? _____ SQUARE FEET = _____ ACRES
VOLUME OF IMPOUNDED WATER? _____ CUBIC FEET = _____ ACRE-FEET
COMPOSITION OF BED OR LINER? _____
COMPOSITION OF BERM OR DIKE? _____
COMPOSITION OF DAM? _____

COMPLETE DESCRIPTION OF TYPE OF SPILLWAY OR RELEASE STRUCTURE AND OPERATION AND MAINTENANCE PLANS, INCLUDING USEFUL LIFETIME AND DISPOSITION AFTER USEFUL LIFETIME. (Use attachments).

STREAM FLOW DATA (For in-stream impoundments only) N/A

AVERAGE FLOW? _____ CUBIC FEET PER SECOND (CFS)
Q7-2? _____ CFS
Q7-10? _____ CFS
RECORD ONE DAY LOW FLOW? _____ CFS
SOURCE OF STREAM FLOW DATA _____

AFFIDAVIT: I, _____, owner of this proposed impoundment project, hereby affirm below that this application and any plans, reports, or documents submitted with this application to be true and correct to the best of my knowledge and belief.

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Signature _____
Title _____

SWORN TO AND SUBSCRIBED before me the _____ day of _____,
A.D., _____.

NOTARY PUBLIC

NAME, COMPANY ADDRESS, PHONE OF PROJECT CONSULTANT

Signed _____

Seal:

* Separate approval will be required for associated extractive use (borrow) operations.

Please return to:
Division of Water
Commercial and Government Services Section
Water Supply Assessment & Protection
89 Kings Highway
Dover, DE 19901
Phone: 302-739-9948