

<b>Entity Name:</b>	<b>Effective Date:</b>
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<b><u>DAM / LEVEE / DIKE</u></b>	
<i>(If the entity operates more than one dam, levee or dike, a separate questionnaire must be completed for each structure.)</i>	
1. Type of structure: <input type="checkbox"/> Dam <input type="checkbox"/> Levee <input type="checkbox"/> Dike	
<b>Hazard Code:</b>	
2. Name of tributary rivers:	
3. Name of structure:	
4. Location:	
5. Year built?	Constructed under the direction of:
6. Inspection performed by:	How often?
7. Purpose:	<input type="checkbox"/> Irrigation <input type="checkbox"/> Flood Control <input type="checkbox"/> Water Supply <input type="checkbox"/> Industrial <input type="checkbox"/> Power
8. Construction:	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> Other:
9. Dimensions:	Height      Top Width      Base Width
10. How are the gates operated:	<input type="checkbox"/> Manual <input type="checkbox"/> Automatic
11. How is the water level controlled:	
12. Does the entity have an emergency notification plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Please describe downstream exposures in detail, including distance from structures:	

**\* Please attach copies of the most current inspection or engineering report.**