

STATE OF NEBRASKA

DEPARTMENT OF NATURAL RESOURCES

CONSTRUCTION CERTIFICATION FORM FOR DAMS

INSTRUCTIONS

Complete Items 1 through 5 by typing or printing in ink the requested information. An incomplete or defective form will be returned.

Submit this form and a set of as-built drawings to the address shown at the bottom of this form within sixty days after completion of construction.

For Department Use Only

Filed in the office of the Department of Natural Resources at _____ a.m./p.m. on _____, 20 ____ .

Water Division

Plan No.

Construction Certification Form.xls

1/4/2018

1. Name and address of owner:

Name Email

Address

City State

Zip code Phone No.

2. Name and location of dam:

Name

County

1/4 1/4 Section Township North Range East West

3a. Name and address of licensed professional responsible for construction phase services: (NOTE: If service is to be provided by a non-licensed person under the direct supervision of licensee, also complete Item 3b).

Name Email

Address

City State Nebraska License No.

Zip code Phone No.

3b. Name and title of person under direct supervision of licensee named in item 3a. (See note above.)

Name Title

4. Project construction dates:

Start 20

Completion 20

5. I hereby confirm the project was constructed in accordance with the approved plans and specifications and that the information on this form is true and accurate.

Check one:

As-built plans attached for dam.

No changes, dam constructed according to approved plans.

Date

Signature of licensed professional named in 3a.

Forward this form to:

State of Nebraska
Department of Natural Resources
301 Centennial Mall South, P.O. Box 94676
Lincoln, Nebraska 68509-4676
(402) 471-2363