

ARCH INSURANCE COMPANY

DAM SUPPLEMENTAL APPLICATION

(If the Entity maintains more than one dam, a separate questionnaire must be completed for each structure.)

I. Name of Structure: _____
Address: _____

II. Year Built: _____

III. Built under the direction of:

Entity Dept. of Interior Dept. of Agriculture
 Corp. of Engineers Bureau of Reclamation Other _____

IV. Purpose (check all applicable):

Flood Industrial Water Supply
 Irrigation Power

V. Construction:

Concrete Steel Sheet
 Earth (Please note if it is hydraulic fill) Other _____

VI. Dimensions:

Acre/Feet _____ Top Width _____
Storage _____ Base Width _____
Height _____

VII. How frequently is the dam inspected? _____
By Whom? _____

Has risk been included under the National Program for Dam Inspection? Yes No

VIII. Name of tributary rivers of impoundment waters:

Upstream _____
Downstream _____

IX. How is the water level controlled?

Gates Spillway Other _____

If gates, what type? _____

How are gates operated?

Manual
 Automatic

X. Upstream exposures - Are there exposures to any of the following:

A. Structures, industrial complexes, housing? Yes No
If Yes, describe (be specific: include distances, etc.)

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B. Recreational Areas (swimming, boating, camping, etc.) Yes No
If Yes, describe (be specific: include distances, etc.)

XI. Downstream exposures - Must be completed for all items listed below.

<input type="checkbox"/> Housing	Distance:	_____	Description:	_____
<input type="checkbox"/> Other Structures:	Distance:	_____	Description:	_____
<input type="checkbox"/> Industrial Complexes:	Distance:	_____	Description:	_____
<input type="checkbox"/> Pumping Stations:	Distance:	_____	Description:	_____
<input type="checkbox"/> Bridges:	Distance:	_____	Description:	_____
Description: _____				

Highways: Distance: _____ Description: _____
Description (Interstate, State Route, Country Road, Paved, Unpaved, etc.): _____

Agricultural Areas: Distance: _____ Description: _____
Is there exposure to:

Livestock	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Dwellings	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Crops	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Barns & Sheds	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Recreational Areas: Distance: _____ Description: _____

XII. Downstream monitoring & controls:

(Please describe in detail monitoring instrumentation used, frequency of on-site visual checks, seepage review and control, structural integrity checks, etc.)

APPLICANT'S SIGNATURE

DATE

AGENT'S SIGNATURE

DATE

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IMPORTANT

A current Dam Engineering report must be provided with this supplemental application to properly evaluate the liability exposures.