

Name of Insured	Proposed Effective Date
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NOTE: If the Entity operates more than one dam, levee or dike, complete a separate supplement for each structure.

1. a. Type of structure: Dam Levee Dike
 b. Hazard code: Low Significant High
2. Name of Structure:

3. Constructed under the direction of:
 Municipality Army Corp of Engineers Bureau of Reclamation Other: _____
4. Inspections are performed by:
5. Purpose: Flood Control Irrigation Water Supply Industrial Power
6. Construction: Concrete Earth Other:
 Age: _____
7. Dimensions: Acres _____ Capacity _____ acre feet Height _____ feet
8. How is water level controlled: Gates Spillway Other:
9. How are gates operated: Manual Automatic
10. Does the Entity have an emergency notification plan? Yes No
11. Describe downstream exposures in **detail** (Include distance in miles from structure):

PLEASE ATTACH COPIES OF MOST CURRENT ENGINEERING OR INSPECTION REPORTS

FLORIDA: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

KENTUCKY: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

For all other applicable state fraud warnings, please see the main application.

Signature	Date
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