



**PUBLIC ENTITY/ DAM SUPPLEMENTAL APPLICATION**

PIIC Producer:  
Broker:

**ACCOUNT INFORMATION**

Applicant Name:  
Name of Structure:  
Address:

Year Built:

1. Built under the direction of:

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

2. Purpose (check all applicable):

Flood	Industrial	Water Supply
Irrigation	Power	

If Power, please describe alternate source in event of power failure:

3. Construction:

Concrete	Steel Sheet	Timber
Earth (please note if it is hydraulic fill)		Other:

4. Dimensions:

Acre/Feet:	Top Width:
Storage Capacity (gallons):	Base Width:

Height:

Additional storage available in flood state? Yes      No

If "yes", describe:

5. How many dams are located in the township / municipality?

6. Do any of these pose significant danger to surrounding area if they fail? Yes      No

Comment:

7. How frequently is the dam inspected?

By Whom?

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

Date of Last inspection on file:

Status of any recommendations made:

9. Name of tributary rivers of impoundment waters:

Upstream

Downstream

- 10 How is the water level controlled?
- |                             |          |           |
|-----------------------------|----------|-----------|
| Gates                       | Spillway | Other:    |
| If gates, what type?        |          |           |
| How are the gates operated? | Manual   | Automatic |

**UPSTREAM EXPOSURES**

Are there exposures to any of the following:

- |   |     |    |
|---|-----|----|
| 1. Structures, Industrial Complexes, Housing?<br>If yes, describe (be specific: Include distances, etc.)              | Yes | No |
| 2. Recreational Areas (swimming, boating, camping, etc.)?<br>If yes, describe (be specific: Include distances, etc.): | Yes | No |

**DOWNSTREAM EXPOSURES**

Must be completed for all items listed below:

Housing:	Distance:	Description:
Industrial Complexes:	Distance:	Description:
Pumping Stations:	Distance:	Description:
Bridges:	Distance:	Description:
Other Structures:	Distance:	Description:
Description:		

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

Agricultural Areas:	Distance:	Description:			
Is there exposure to:					
Livestock	Yes	No	Dwelling?	Yes	No
Crops	Yes	No	Barns & Sheds?	Yes	No

Recreational Areas:	Distance:	Description:
Railroad(s):	Distance:	Description:
Schools:	Distance:	Description:
Hospitals:	Distance:	Description:
Camp:	Distance:	Description:

Maximum number of people flood could affect:

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

**IMPORTANT**

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

**Fraud Notice**

**NOTICE TO APPLICANTS:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM 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 AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

**NOTICE TO NEW YORK APPLICANTS:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM 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 AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

**NOTICE TO KENTUCKY APPLICANTS:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT WHICH IS A CRIME.

**NOTICE TO MINNESOTA AND OHIO APPLICANTS:** ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE/SHE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

**NOTICE TO NEBRASKA AND OKLAHOMA APPLICANTS:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.

**NOTICE TO PENNSYLVANIA APPLICANTS:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM 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 AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

**NOTICE TO FLORIDA APPLICANTS:** 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.

**NOTICE TO NEW JERSEY APPLICANTS:** ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

**NOTICE TO MAINE AND VIRGINIA APPLICANTS:** IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

**NOTICE TO OREGON APPLICANTS:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD OR SOLICIT ANOTHER TO DEFRAUD AN INSURER: (1) BY SUBMITTING AN APPLICATION, OR (2) BY FILING A CLAIM CONTAINING A FALSE STATEMENT AS TO ANY MATERIAL FACT, MAY BE VIOLATING STATE LAW.

**NOTICE TO DISTRICT OF COLUMBIA APPLICANTS:** "WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT."

**NOTICE TO NEW MEXICO APPLICANTS:** "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES."

**NOTICE TO TENNESSEE APPLICANTS:** "IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS."

Insured Signature : \_\_\_\_\_ Date:  
Agent Signature: \_\_\_\_\_ Date: