1320 Research Park Drive Manhattan, KS 66502 785-564-6700 www. agriculture.ks.gov



900 SW Jackson, Room 456 Topeka, KS 66612 785-296-3556

Mike Beam, Acting Secretary

Laura Kelly, Governor

Significant Hazard Emergency Action Plan (EAP)

A.	Name and location of dam Dam name (most familiar to local community)						
	Dam name (most familiar to local community)						
	DWR assigned Water Structure Number (WSN)						
	Tract						
	Section Township	Range	E/W (circle o	ne)			
	Access Roads (attach map, if possible)						
	Description of inundation area (attach map, if possible)						
В.	Person responsible for notifying local authorities						
	Name	Respon	sibility	Phone			
C.	Law enforcement and emergency services (Note: This section is not required by State of Kansas						
	C.A.R. 5-40-73 but strongly suggested.)						
	Name		Phone				
	Local Police						
	County Sheriff						
	County Emergency Management						
	Other						

mergency Number	(800)-915-6163
Main Office Number	(785) 564-6700
ersons downstream who should be n	notified in an emergency event
First Name:	Last Name:
Address:	
City:	State: Zip:
Home Phone:	Cell Phone:
Email Address:	
First Name:	Last Name:
Address:	1
City:	State: Zip:
Home Phone:	Cell Phone:
Email Address:	1
First Name:	Last Name:
Address:	Last Name.
	Contract Track
	\ \tata\.
City: Home Phone:	State: Zip:
Home Phone: Email Address:	Cell Phone:
Home Phone: Email Address: am owner information First Name:	,
Home Phone: Email Address: am owner information First Name: Address:	Cell Phone: Last Name:
Home Phone: Email Address: am owner information First Name: Address: City:	Cell Phone: Last Name: State: Zip:
Home Phone: Email Address: am owner information First Name: Address: City: Home Phone:	Cell Phone: Last Name:
Home Phone: Email Address: am owner information First Name: Address: City: Home Phone: Email Address:	Cell Phone: Last Name: State: Zip:
Home Phone: Email Address: am owner information First Name: Address: City: Home Phone: Email Address:	Cell Phone: Last Name: State: Zip: Cell Phone:
Home Phone: Email Address: am owner information First Name: Address: City: Home Phone: Email Address: First Name: Address:	Cell Phone: Last Name: State: Zip: Cell Phone:
Home Phone: Email Address: am owner information First Name: Address:	Cell Phone: Last Name: State: Zip: Cell Phone: Last Name:

H. This EAP or EAP revision completed by

Name:	Company:

Instructions

Section A

If the Water Structures Number (WSN) is unknown, contact the Division of Water Resources at (785) 564-6650.

Tract, section, township, and range (can be obtained through the Division of Water Resources), for example: SW ¼ of the SE ¼ of the SW ¼

Section 22, Township 15 South, Range 3 East

Section B

Person responsible for contacting individuals in Section C, in the event of an emergency.

Section C

Local emergency personnel to be notified in the event of an emergency, which may include local police, sheriff, highway patrol, and county emergency management staff. This information depends on the location of the dam.

Section D

Provided on form.

Section E

Names, addresses, and phone numbers of individuals, businesses, railroads, utilities, or highways immediately downstream who would be impacted by a dam failure.

Section F

Includes owner(s) of the dam.

Section G

Person (owner, tenant, employee, etc.) to contact regarding operation of the dam.

Section H

Person responsible for filling out this EAP template and their affiliation (i.e. owner of dam, NRCS, Engineer hired to prepare form, etc.)

A dam owner is required to review the Emergency Action Plan annually, including:

- (1) Contact names and related information
- (2) Breach inundation map or description of the inundation area
 - (3) Emergency procedures

If any changes are made to the EAP, a revised copy must be submitted to the Chief Engineer at the Division of Water Resources. By mail to 1320 Research Park Drive Manhattan, KS 66502 or by email

to KDA.Waterstructures@ks.gov.