



Application for Permit
K.S.A. 82a-301-305a Dams, Stream Obstructions and Channel Changes
K.S.A. 24-126 Levees and Floodplain Fills

Use this form to apply for a Division of Water Resources permit to construct or modify a dam, stream obstruction, channel change, levee or floodplain fill. Refer to K.A.R. 5-40 through 5-46 for requirements and definitions.
Send the completed application, worksheet (if applicable), required fees and plans and other materials listed in K.A.R. 5-40-1 through 5-43-5 or K.A.R. 5-45-1 through 5-45-18 to:

Kansas Department of Agriculture
Division of Water Resources – Water Structures
1320 Research Park Drive
Manhattan, KS 66502
Email: kda.waterstructures@ks.gov

Permit Applicant Land Owner Information	
Firm/Agency: Sabetha Community Hospital	
Contact Name: Dr. James A. Longabaugh DO, CEO	
Mailing Address: 14th & Orgeon Street, P.O. Box 229	
City/State/Zip code: Sabetha, Kansas, 66534	
Telephone: (785) 284-2121	Email: j.longabaugh@sabethahospital.com
Is the project or activity located entirely on property owned by the permit applicant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If the applicant listed above is not the landowner of record for all land within the limits of the project, attach a document or map listing the name and mailing address for all landowners, and provide documentation of easements or agreements.	
Designer Contact Information	
2nd Additional Contact:	
Firm/Agency: BHC Habitat Architects	
Contact Name: William Buck	Title: Project Manager 2 Jonathan Polak, P.E.
Mailing Address: 7101 College Blvd., Suite 400 503 Main St. Belton, MO 64012	
City/State/Zip code: Overland Park, Kansas, 66210 jpolak@habitatarchitects.net	
Telephone: (913) 663-1900	Email: william.buck@ibhc.com 913-526-5085
Project Location and Description	
County: Nemaha	Stream Name: Delaware River
Legal: Qtr of the NE Qtr of the NE Qtr	Section: 11 Township(S): 2 S Range(E/W): 14 E
Project or site name: Sabetha Community Hospital	
Project description and purpose: Stormwater collection and discharge associated with the Sabetha Community Hospital and parking lot expansion.	
Drainage area above the project: 2,217 acres	3.46 square miles

For office use only	WSN: CNM-0073	ECA: 2024141	
Code SOP	Fee \$ 100.00	TR#	Check # 3009

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Schedule		
Planned or actual start date (start of construction, clearing, excavation or fill)	August 15, 2024	
Planned or actual completion date (end of construction, stabilization of site)	August 15, 2025	
Construction, excavation and fill will be halted and the Kansas State Historical Society will be contacted when historical sites or artifacts are encountered.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Project Activities and Fee Determination		
Project Activity (check all that apply)	Permit Fee	
<input type="checkbox"/> Construct, modify or repair a dam	\$200	
<input checked="" type="checkbox"/> Construct, modify or repair a stream obstruction		
<input checked="" type="checkbox"/> Construct or repair a channel change		
<input type="checkbox"/> Excavate or dredge within the banklines of a stream		
Drainage area ≤ 5 square miles	<input checked="" type="checkbox"/>	\$100
Drainage area between 5 and 50 square miles	<input type="checkbox"/>	\$200
Drainage area ≥ 50 square miles	<input type="checkbox"/>	\$500
	Pre-construction	Post-construction
<input type="checkbox"/> Construct, modify or repair a class A levee (see K.A.R. 5-45-8 for definition)	\$100	\$200
<input type="checkbox"/> Construct, modify or repair a class B levee	\$300	\$600
<input type="checkbox"/> Construct, modify or repair a class C levee	\$500	\$1,000
<input type="checkbox"/> Place fill in a mapped floodway fringe (Zone AE)	\$100	\$200
<input type="checkbox"/> Place fill in a mapped floodplain with no defined floodway (Zone A, AH, AO)	\$300	\$600
<input type="checkbox"/> Place fill in an unmapped floodplain (see K.A.R. 5-45-1)	\$300	\$600
<input type="checkbox"/> Place fill in a mapped floodway (Zone AE floodway)	\$500	\$1,000
<input type="checkbox"/> This project qualifies for a General Permit (attach worksheet DWR 2-190) (pipeline/cable crossing, or bridge/culvert replacement)	\$100	
The total permit fee required will be the general permit fee if applicable, OR the highest individual fee for the project activities checked above. Make checks payable to Kansas Department of Agriculture	Amount enclosed: \$100.00	
Signature		
Application is hereby made for written consent or permit of the Chief Engineer, Division of Water Resources, for the project described above. By signing below, I certify that the information contained in this application is true, correct and complete, and that I am the owner or I am authorized by the owner to make this application for permit.		
Signature: Jonathan L. Polak	Name (print or type): Jonathan L. Polak	WATER RESOURCES RECEIVED APR 18 2024
<small>Digitally signed by Jonathan L. Polak DN: cn=Jonathan L. Polak, o=Habitat Architects, LLC, ou, email=jpolak@habitatarchitects.net, c=US Date: 2024.04.16 10:52:05 -05'00'</small>	Date: 04/16/2024	