

RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF COMPLIANCE & INSPECTION DAM SAFETY PROGRAM

DAM REGISTRATION FORM

PLEASE PRINT ALL INFORMATION IN INK

DAM INFORMATION		
DAM NAME	RI DAM NUMBER	
DANT OCATION (OIT) (TOMB)		
DAM LOCATION (CITY/TOWN)	HAZARD CLASSIFICATION	
DATE DAM ACQUIRED	CURRENT USE OF DAM	
Diff Districted	CONNENT OSE OF BAIM	
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MUNICIPAL ASSESSOR'S OFFICE PLAT & LOT NUMBER(S) (IF KNOWN)	MUNICIPAL REGISTRY OF DEEDS BOO	K & PAGE NUMBER(S) (IF KNOWN)
GENERAL OWNER INFORMATION		
OWNER(\$) LEGAL NAME		
MAILING ADDRESS		
CITY	STATE	ZIP
TELEPHONE AND TO THE TELEPHONE TO THE TE	1	
TELEPHONE NUMBER	EMAIL ADDRESS	
OWNED CONTACT RECORDS FOR ONLY IF CONTACT IS ON		
OWNER CONTACT INFORMATION (COMPLETE ONLY IF CONTACT IS OT		
CONTACT NAME	TITLE OR RELATION TO OWNER	
TELEPHONE NUMBER(S)	EMAIL ADDRESS	
TELEPHONE NUMBER(S)	EMAIL ADDRESS	
EMERGENCY CONTACT INFORMATION (COMPLETE ONLY IF CONTACT IS OTHER THAN OWNER)		
CONTACT NAME	TITLE OR RELATION TO OWNER	
TELEPHONE NUMBER(S)	EMAIL ADDRESS	
TEEFTIONE NOWBEN(3)	EMAIL ADDRESS	
DAM INSPECTION INFORMATION (COMPLETE INFORMATION AS APPLICABLE)		
DATE OF MOST RECENT DAM INSPECTION BY A R.I. REGISTERED		
PROFESSIONAL ENGINEER	NAME & TELEPHONE NUMBER OF PERSON OR COMPANY THAT	
PROFESSIONAL ENGINEER	INSPECTED THE DAM	
REASON FOR INSPECTION		
DATE OF NEXT SCHEDULED DAM INSPECTION BY A R.I. REGISTERED	NAME & TELEPHONE NUMBER OF PERS	SON OR COMPANY THAT WILL
PROFESSIONAL ENGINEER	INSPECT THE DAM	
SIGNATURE OF DAM OWNER(S)		DATE
PLEASE RETURN COMPLETED FORM TO DEM		
BY MAIL:	OB BY EAV.	•
DAM SAFETY PROGRAM	OR BY FAX: (401) 222-3811	-
OFFICE OF COMPLIANCE & INSPECTION	ATTENTION: DAM SAFETY PROGRAM	
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/ MAIL:
DAM SAFETY PROGRAM
OFFICE OF COMPLIANCE & INSPECTION
RI DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
235 PROMENADE STREET
PROVIDENCE, RI 02908

ADDITIONAL FORMS ARE AVAILABLE ON DEM'S WEBSITE AT http://www.dem./ri.gov/pubs/damreg.pdf