



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF NATURAL RESOURCES  
DAM AND RESERVOIR SAFETY  
**ATTACHMENT – CONSTRUCTION PERMIT APPLICATION**

|  |             |                 |
|--|-------------|-----------------|
| NAME OF DAM  |             | ID NUMBER<br>MO |
| COUNTY   |             | DATE            |
| <input type="checkbox"/> <b>OWNER CERTIFICATION</b><br><br>I, the undersigned, owner, whose Post Office Address is _____do hereby accept and approve these plans.  |             |                 |
| OWNER SIGNATURE  |             |                 |
| <input type="checkbox"/> <b>ENGINEER CERTIFICATION</b><br><br>I hereby certify that these plans for the (construction of, or alteration of) the _____(insert name of dam) were prepared by me or under my direct supervision for the owners thereof. |             |                 |
| NAME OF FIRM   |             | ENGINEER'S SEAL |
| REGISTERED ENGINEER  | P.E. NUMBER |                 |