



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR  
CONSTRUCTION PERMIT FOR PUBLIC WATER SYSTEM - 327 IAC 8-3-3**

***TYPE OR PRINT ALL ENTRIES***

**The following numbers refer to the enclosed application.**

1. Enter the name of the Public Water System as they are chartered by the State of Indiana and check box if existing or new public water supply system.
2. Enter the seven (7) digit Public Water System Identification Number (PWSID) as chartered by the State of Indiana.
3. Enter the **name and title** of the Public Water System official.
4. Enter the telephone number of the Public Water System, including the area code.
5. Enter the mailing address (include city, state and ZIP code) of the Public Water System.
6. Enter the name of the project.
7. Enter the email address of the PWS Official listed in item 3. **NOTE: A valid email address is needed because the issued permit will be emailed to expedite delivery.**
8. Enter the county(s) where construction will take place.
9. Indicate the location of the project, which includes the city and reference to adjacent streets or roads.

**Example: "Bowling Green (city), Madison Street, one block east of Eel River, along State Road 46"**
10. Check the appropriate box(s) indicating who is funding this project. If "other", specify in the box provided.
- 11-13. Enter the name, mailing address and email address of the local government official applicable to the project. Complete box 11 with Mayor's information or complete box 12 with Town Board President's or Council information. Or if project is within county government purview, complete box 13 with County Commissioner's information.
14. The professional engineer, licensed professional geologist, or licensed well driller **must** check the box indicating they agree to the certification statement listed. Permit applications, plans, and specifications prepared for small transient (serving 250 or fewer individuals per day) and small non-transient (serving 100 or fewer individuals per day) public water systems that are not using surface water or ground water under the direct influence of surface water and that are not prepared for a county, a city, a town, a township, a school corporation, or any other political subdivision must be prepared and certified by a professional engineer registered in the State of Indiana, a licensed professional geologist, or a licensed well driller. All other permit applications, plans, and specifications prepared for a county, a city, a town, a township, a school corporation, or any other political subdivision must be prepared either by a professional engineer registered in the State of Indiana or by other professionals under the direct supervision of the professional engineer registered in the State of Indiana and certified by the registered professional engineer. If you are unsure, submit your question to the Permits Section via email at [dwpermits@idem.in.gov](mailto:dwpermits@idem.in.gov) or by calling (317) 234-7425.
- 15a. Apply the seal of the professional engineer responsible for the design of the water project and for the preparation of the construction permit application, if applicable.
- 15b. Enter the license number of the licensed professional geologist or licensed well driller responsible for the design of the well project and for the preparation of the construction permit application, if applicable.
- 16a. Enter the signature of the professional engineer, licensed professional geologist, or licensed well driller certifying the application, plans, and specifications.
- 16b. Enter the printed name of the professional engineer, licensed professional geologist, or licensed well driller certifying the application, plans, and specifications.
17. Enter the email address of the engineer, licensed professional geologist, or licensed well driller listed in either box 16a or 16b. **NOTE: A valid email address is needed because the issued permit will be emailed to expedite delivery.**
18. Enter telephone number(s) for the person in box 16.
19. Name(s) and address(s) of the business the person from Box 16a/b is affiliated with.

20. If project contains water main construction, check box and complete Attachment A. See IDEM Guidance for Determining a Public Water System's Production Capacity.
21. If project contains well construction, check box and complete Attachment B. See IDEM Guidance for Determining a Public Water System's Production Capacity for guidance for determining the firm rated capacities of water production and treatment system components. For wells, the well pump and storage tank are included in the well application fee.
22. If project contains pump construction, check box and complete Attachment C. See IDEM Guidance for Determining a Public Water System's Production Capacity for guidance for determining the firm rated capacities of water production and treatment system components.
23. If project contains storage facility construction including addition of tank mixers, check box and complete Attachment D.
24. If project contains chemical addition construction, check box and complete Attachment E. A separate copy of Attachment E should be completed for each chemical proposed.
25. If project contains treatment facility construction, check box and complete Attachment F.
26. If project contains miscellaneous process modification construction (i.e. water softener, water filling station, UV) construction, check box and complete appropriate sections of Attachment G. With the exception of the section for water filling stations, Attachment G is mainly intended for use by small systems installing treatment. Larger systems should complete Attachment F for treatment processes.
27. Check appropriate boxes to questions concerning plans and specifications. **NOTE: You may submit the completed application, specifications, and drawings digitally at [dwpermits@idem.in.gov](mailto:dwpermits@idem.in.gov). Electronic documents must be legible and in PDF format. The drawings and the cover page of the specifications must contain certifier's signature and seal if applicable. If a construction permit processing fee is required, follow the instructions below.**
28. Check 327 IAC 8-3-7(a) to see if a processing fee is required. Pursuant to 327 IAC 8-3-7, exempt organizations are both a governmental entity and one of the listed categories. **If you are not a governmental entity, then you are not exempt from the construction permit processing fee.** If not sure, contact the Permits Section via email at [dwpermits@idem.in.gov](mailto:dwpermits@idem.in.gov) or by calling (317) 234-7425, prior to submitting the permit application. If a processing fee is required, check the appropriate box(es). If no fee is applicable because the PWS meets the definition of an "Exempted Government Entity", check the box and do not submit a processing fee. **If a process fee is applicable and the project entails multiple checkboxes, only the largest permit fee is applicable. Do not add the permit fees together to determine the fee amount.** Submit payment using **one (1)** of the following options:
  - A. Make check/money order payable to IDEM (Acct.#3240-414000-140000) and mail with a copy of the completed first page of the permit application to:  
IDEM  
PO Box 3295  
Indianapolis, IN 46206-3295
  - B. Remit by eCheck (ACH) or credit card:  
Visit "IDEM: Online Payment Options" at <https://www.in.gov/idem/resources/e-services/online-payment-options/> and follow the instructions.
29. **Include a complete narrative description of the project and/or a design memo in the space provided. If more space is needed, provide as a separate document, and submit with your application submittal.**
30. **Public Notification:** IDEM provides a thirty (30) day public comment period on all drinking water projects requiring an individual construction permit. Public notice is provided on IDEM's Public Notice website, which is located at: <http://www.in.gov/idem/public-notices/>. The notice includes information on the project, as well as where to obtain the proposed permit and related documents, and how to submit comments. The permit is effective immediately upon issuance. A complete list of potentially affected persons along with a mailing label for each must also be submitted with the permit application, as required by 327 IAC 8-3-3.



# APPLICATION FOR CONSTRUCTION PERMIT FOR PUBLIC WATER SYSTEM - 327 IAC 8-3-3

State Form 35058 (R11 / 6-26)  
 Approved by State Board of Accounts, 2025  
 Indiana Department of Environmental Management  
 Drinking Water Branch

FOR AGENCY USE	
Permit number	<b>WS -</b>

1. Name of Public Water System (PWS):		2. PWSID number (#####):	
New Existing		IN	
3. Name of PWS official and title (i.e., Superintendent, Utility Engineer/Manager, Owner, etc.):		4. Telephone number of PWS ((###) ###-####):	
		( )	
5. Address of PWS (number and street, city, state, and ZIP code):		6. Name of project:	
		7. E-mail address of PWS official:	
8. Main county of project:		9. Location of project:	
		10. Source of funding for project: PWS Developer Dept. of Commerce (DOC) State Revolving Fund Other (specify):	
11. Name, address (number and street, city, state, and ZIP code) and e-mail address of Local Government Official – Mayor:		12. Name, address (number and street, city, state, and ZIP code) and e-mail address of Town Board or Council President:	
		13. Name, address (number and street, city, state, and ZIP code) and e-mail address of County Commissioner (if any):	
14. Certification by Professional Engineer / Licensed Geologist / Licensed Well Driller (see instructions): I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10 and IC 13-15-7-1-3, that this document and all attachments were prepared under my direction or supervision and that all information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I further certify that construction of the proposed project following the application, plans and specifications will meet the requirements of 327 IAC 8.		15a. Professional Engineer seal:	
16a. Signature of Professional Engineer / Licensed Professional Geologist / Licensed Well Driller:			
16b. Printed name of Professional Engineer / Licensed Professional Geologist / Licensed Well Driller:			
17. E-mail address(s) of Professional Engineer / Licensed Professional Geologist / Licensed Well Driller:		15b. Geologist license number / Well Driller license number:	
18. Telephone number(s) of Professional Engineer / Licensed Professional Geologist / Licensed Well Driller:			
19. Name and address(s) (number and street, city, state, and ZIP code) of business entity the Professional Engineer / Licensed Professional Geologist / and/or Licensed Well Driller is affiliated with:			
Check all that apply and submit a design summary describing all proposed modifications and additions:		<b>FOR AGENCY USE ONLY</b>	
20. For water main construction: Complete Attachment A		Date application received electronically:	
21. For well construction: Complete Attachment B			
22. For pumping station construction: Complete Attachment C		Date complete application received:	
23. For storage facility construction (including tank mixers): Complete Attachment D			
24. For chemical addition construction: Complete one copy of Attachment E for each chemical proposed		Date public notice started:	
25. For water treatment construction: Complete Attachment F			
26. For miscellaneous process modification (i.e. water softener, water filling station, UV) construction: Complete Attachment G (NOTE: Aside from filling stations, G is mainly intended for small systems.)		Staff assigned:	
27. Plans and specifications (To be submitted electronically – see note at end of instructions.)			
A. Is one complete set of legible plans submitted?		C. Is a set of specifications submitted with the cover page signed and sealed by a professional engineer?	
Yes No		Yes No	
B. Is every page of the plans signed and sealed by a professional engineer?		Yes No	

28. Construction permit processing fee schedule

**NOTE: UNLESS THE APPLICANT IS AN EXEMPTED GOVERNMENT ENTITY PURSUANT TO 327 IAC 8-3-7, THIS APPLICATION WILL BE RETURNED IF NOT SUBMITTED WITH THE REQUIRED FEE. EXEMPT ORGANIZATIONS ARE BOTH A GOVERNMENTAL ENTITY AND ONE OF THE FOLLOWING CATEGORIES: A NONPROFIT ORGANIZATION, A CONSERVANCY DISTRICT, A SCHOOL CORPORATION, OR REGIONAL WATER OR SEWAGE DISTRICT [327 IAC 8-3-7(a)]. IF YOU ARE NOT A GOVERNMENTAL ENTITY, THEN YOU ARE NOT EXEMPT FROM THE CONSTRUCTION PERMIT PROCESSING FEE.** If the project includes multiple check boxes below, the applicable fee is not additive, just the largest permit fee is required. If the public water system qualifies as an "exempted government entity", check the applicable box so no permit fee is required.

<p>A. New public water system treatment plant</p> <p>Groundwater:</p> <p>Up to 500,000 gallons per day      \$ 875</p> <p>Greater than 500,000 gallons per day      \$ 1,750</p> <p>Surface water:</p> <p>Up to 500,000 gallons per day      \$ 1,250</p> <p>Greater than 500,000 gallons per day      \$ 2,500</p> <p>B. Public water system treatment plant expansion</p> <p>Up to fifty percent (50%) design capacity</p> <p>Up to 500,000 gallons per day      \$ 625</p> <p>Greater than 500,000 gallons per day      \$ 1,250</p> <p>Greater than fifty percent (50%) design capacity</p> <p>Up to 500,000 gallons per day      \$ 1,250</p> <p>Greater than 500,000 gallons per day      \$ 2,500</p>	<p>C. Water main</p> <p>Up to 2,500 linear feet      \$ 0</p> <p>2,501 - 5,000 linear feet      \$ 260</p> <p>5,001 - 10,000 linear feet      \$ 430</p> <p>Greater than 10,000 linear feet      \$ 860</p> <p>D. Wells      \$ 860</p> <p>E. Pumping systems or pump station      \$ 175</p> <p>F. Storage tank      \$ 345</p> <p>G. Chemical addition      \$ 430</p> <p>H. Miscellaneous process modification      \$ 100 per process</p>
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**EXEMPTED GOVERNMENT ENTITY**

**IF A PROCESSING FEE IS REQUIRED, SEE INSTRUCTIONS FOR DETERMINING AMOUNT AND PAYMENT OPTIONS.**

29. Include a complete narrative description of the project and/or a design memo including all proposed modifications and additions. If more space is needed, attach additional pages.

**THE COMPLETED APPLICATION MUST BE SUBMITTED ELECTRONICALLY TO [dwpermits@idem.in.gov](mailto:dwpermits@idem.in.gov)**

30. Provide a list of persons whom you have a reason to believe have a substantial or proprietary interest in this matter or are potentially affected persons as defined by IC 4-21.5-3-5(b). Failure to notify a person who is later determined to be potentially affected could result in voiding our decision on legal grounds. To ensure conformance with the Indiana Administrative Orders and Procedures Act and to prevent voiding a decision, you must list all potentially affected parties. The list shall contain: Name of affected party, Address (number and street or rural route number), City, State, and ZIP Code.

I certify, that to the best of my knowledge, I have listed all the potentially affected parties, as defined by IC 4-21.5-3-5(b), known to me and provided mailing labels. If "None" is indicated, it signifies that no such parties exist. I certify under penalty of law that all the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are substantial penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Public Water System official:

Date signed (mm/dd/yyyy):

Printed name and title of official:





**7. Cross Connection Hazard Prevention**

A. Are any customers (*new or existing*) served by the proposed water main designated as cross connection hazards in accordance with 327 IAC 8-10-4 (c)? Yes    No    N/A

B. Will an air gap be constructed or a reduced pressure principal backflow preventer be installed on all such designated customer service lines? Yes    No    N/A

**8. Certification to Furnish Water (*must be completed for a water main extension project*)**

The \_\_\_\_\_ has agreed to furnish water to the area in which water main  
City, Town, Village, Water Company or Water Authority  
extensions are proposed by \_\_\_\_\_ according to plans titled  
Name the person representing the funding entity of the construction project (e.g., developer)  
\_\_\_\_\_ and prepared by \_\_\_\_\_  
Name of engineering firm

The undersigned acknowledges the public water supplier's responsibility for examining the plans and specifications to verify the proposed extensions comply with local rules, laws, regulations, and ordinances.

Signature of Public Water System (PWS) official:

Date signed (*month, day, year*):

Printed name and title of PWS official:



# APPLICATION FOR CONSTRUCTION PERMIT FOR PUBLIC WATER SYSTEM - 327 IAC 8-3-3

State Form 35058 (R11 / 6-26)

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Indiana Department of Environmental Management

Drinking Water Branch

**Attachment B  
Well**

**NOTE: Before review of your well construction permit application can begin, the following must be provided:**

- A. A copy of the approved well-site survey;**
- B. Copies of recorded deeds or easements showing control of the land immediately surrounding the wellhead;**
- C. A complete set of design drawings including general, civil, mechanical, architectural, structural, electrical, and instrumentation drawings, including a site plan showing the well location, isolation area (100' or 200' radius per well site survey), all potential sources of contamination, a construction diagram of the well, and all schedules, plans, sections, and details necessary for construction of the well and well house, if any;**
- D. A complete set of design specifications for the well and well house, if any, including pump curve(s); and**
- E. Data showing 100 years or highest known flood elevations in the area.**

## 1. Public Water System Design Data

<p>A. How many wells are in the existing well field?</p>	<p>B. What are the names of the existing wells and what are the rated capacities (<i>gpm</i>), total dynamic head (<i>ft</i>), and motor horsepower (<i>HP</i>) of each well pump in the existing well field?</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 10%; text-align: center;">Existing well names</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;">gpm @</td> <td style="width: 10%; text-align: center;">ft TDH</td> <td style="width: 10%; text-align: center;">HP</td> </tr> </table>		Existing well names		gpm @	ft TDH	HP
	Existing well names		gpm @	ft TDH	HP		
<p>C. What is the current firm capacity of the existing well field?</p> <p style="text-align: right;">gpm or      mgd</p>	<p>D. What is the firm capacity of the PWS's water treatment facility that the new well(s) will supply?</p> <p style="text-align: right;">gpm or      mgd</p>						

## 2. New Well Design Data

<p>A. How many new wells are proposed?</p>	<p>B. What are the names of the new well(s) and what is the rated capacity (<i>gpm</i>), total dynamic head (<i>ft</i>), and motor horsepower (<i>HP</i>) of each proposed well pump?</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 10%; text-align: center;">Proposed well name(s):</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;">gpm @</td> <td style="width: 10%; text-align: center;">ft TDH</td> <td style="width: 10%; text-align: center;">HP</td> </tr> </table>		Proposed well name(s):		gpm @	ft TDH	HP
	Proposed well name(s):		gpm @	ft TDH	HP		
<p>C. What type(s) of well are proposed? <i>(gravel pack, tubular, radial collector, etc.)</i></p>	<p>C. What method will be used to drill the well(s)? <i>(rotary, cable tool, etc.)</i></p>	<p>E. What are the estimated depth(s) of the new well(s)?</p> <p style="text-align: right;">ft</p>					
<p>F. Length(s) of new well casing(s):</p> <p style="text-align: right;">ft</p>	<p>G. Diameter(s) of new well casing(s):</p> <p style="text-align: right;">in</p>	<p>H. New well casing material(s):</p>	<p>I. Proposed top of casing elevation(s):</p> <p style="text-align: right;">ft</p>				
<p>J. If a new well is in a well-house, how far will the well casing extend above the well-house floor?</p> <p style="text-align: right;">in</p>	<p>K. How far above final ground surface will the well casing(s) extend?</p> <p style="text-align: right;">in</p>						
<p>L. Length of well screen(s):</p> <p style="text-align: right;">ft</p>	<p>M. Diameter of well screen(s):</p> <p style="text-align: right;">in</p>	<p>N. Screen material and slot size:</p> <p style="text-align: right;">in</p>	<p>O. Screen designed entrance velocity:</p> <p style="text-align: right;">fps</p>				
<p>P. Type of grouting material <i>(if applicable)</i>:</p>	<p>Q. To what depth will the well(s) be grouted? <i>(if applicable)</i></p> <p style="text-align: right;">ft</p>	<p>R. Proposed well pump type(s) <i>(line shaft, submersible, etc.)</i>:</p>					
<p>S. What type of pump lubrication will be used on the new well(s)?</p>							
<p>T. What provisions have been made for periodic water level measurements in the new well(s)?</p>							
<p>U. Which of the following will the discharge of the new well(s) be equipped with? <i>(check all that apply)</i></p>	<p>Check valve</p> <p>Shut-off valve</p>	<p>Pressure gauge</p> <p>Smooth-nosed sampling tap</p>	<p>Means of measuring flow</p> <p>Air release / vacuum relief valve</p>				
<p>V. Are the well pump testing requirements described in the plans or specifications? <i>(If not, explain)</i></p>			<p style="text-align: right;">Yes      No</p>				
<p>W. How will power be supplied to the pump(s) in the event of an interruption of the primary power source?</p>							
<p>X. Has the public water system's wellhead protection plan been updated to account for the new well(s)? <i>(if applicable)</i></p>			<p style="text-align: right;">Yes      No</p>				



**APPLICATION FOR CONSTRUCTION PERMIT FOR  
PUBLIC WATER SYSTEM - 327 IAC 8-3-3**

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Drinking Water Branch

**Attachment C  
Pumping Station**

**NOTE: Before review of your pumping station construction permit application can begin, the following must be provided:**  
**A. A complete set of plan and profile drawings including general, civil, mechanical, architectural, structural, electrical, and instrumentation drawings showing all schedules, plans, sections, and details necessary for construction of the pumping station;**  
**B. A complete set of design specifications for the pumping station;**  
**C. Data showing 100 years or highest known flood elevations in the area where the pumping station is located; and**  
**D. A summary of hydraulic analysis completed to determine the needed pumping station capacity and the design hydraulic operating conditions including the system curves for maximum, minimum, and average operating conditions, and proposed pumps curves.**

A. What is the pump station's source of supply?		B. What is the 100 year or highest known flood elevation in the area? ft		C. What is the proposed pump station floor elevation? ft	
D. What is the elevation of the proposed finished grade at the pump station location? ft		E. What is the pump station's proposed firm capacity? gpd or mgd		F. How many pumps are proposed?	
G. Type of pumping unit(s) proposed:		H. System demand: Average day: gpm Maximum day: gpm Peak hour: gpm Fire flow: gpm		I. Pump information: Net positive suction head available: ft Rated capacity of each pump: gpm Total dynamic head: ft	
J. How will power be supplied to the pumps in the event of an interruption to the primary power source?					
K. What kind of monitoring will be provided and what is the form of communication?					
L. How will the pump discharge flow(s) be measured?					
M. Does each pump have a compound gauge on its suction line and a pressure gauge on its discharge line? Yes No		N. Is there a low suction cut-off control? Yes No		O. If so, what is its low suction cut-off setting? psi	
P. Does the pump have a check valve? Yes No		Q. If "Yes", where is the check valve located?			
R. Is cross connection control provided? Yes No		S. Does the proposed pump station comply with all applicable city/town or county noise ordinances? Yes No			



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## Attachment D Storage Facility

**NOTE: Before review of your storage facility construction permit application can begin, the following must be provided:**

- A. A complete set of design drawings including general, civil, mechanical, architectural, structural, electrical, and instrumentation drawings showing the storage facility location, all site piping and valves, the piping connection to the distribution system, and all schedules, plans, sections, and details necessary for construction of the storage facility;
- B. A complete set of design specifications for the storage facility including coating specifications, sample tap location, and sample tap detail;
- C. Data showing 100 year or highest known flood elevations in the area; and
- D. For tank mixers, provide specification sheet, installation location including any power cable or air line penetrations and design calculations showing 24-hour mixing volume.

A. What is the 100 year or highest known flood elevation(s) in the area? ft		B. What type of storage tank(s) are proposed? (standpipe, elevated, ground, etc.)	
C. What is the capacity of the storage tank(s)? gals		D. What is the elevation at the base of the storage tank(s)? ft	
E. What is the purpose of the water storage tank(s)? Volume      Pressure      Fire protection		F. Are there other existing water storage tanks within the system?      Yes      No If so, what is the total storage capacity of the system? (in gallons)      gals	
G. What are the names of the existing storage tanks, their capacities (gals) and overflow elevations (ft)? Tank Name      Capacity (gals)      Overflow Elevation (ft)		H. What is the elevation at the base of the storage tank(s)? ft	
I. How will the tank(s) be isolated from the distribution system?		J. What filling rate are the storage tank(s) designed for? gpm	
K. What overflow rate is the overflow designed for? gpm		L. What is the diameter of the overflow pipe(s)? in	
M. Is the overflow pipe(s) screened with a 24 mesh screen?      Yes      No		N. What type and diameter of vent will be provided? Type: Diameter:      in	
O. Is the vent(s) screened with a 24 mesh screen?      Yes      No		P. What is expected to be the operating head range of the storage tank? ft	
Q. What provisions have been made to monitor water levels in the storage tank?		R. What provisions have been made to allow for draining of the storage tank?	
S. What provisions have been made for sampling the water in the storage tank?		T. What provisions have been made to protect the sample tap from freezing?	
U. How is the storage tank(s) protected from trespassers, vandalism, and sabotage? (check all that apply) Site fenced      Alarm      Ladder guard      Lighting      Hatch locked		V. Is cathodic protection included?      Yes      No	
W. What measures will be used to keep the water in the storage tank from freezing?		X. If utilizing tank mixer(s), provide responses to the items below: 1. Type of mixing:      Active      Passive If passive, provide justification as to why it will be adequate:	
2. Manufacturer name(s) (if multiple options are being bid, list all):			
3. Model #(s) (if applicable):			
4. Are the mixer and all of its components in contact with potable water certified for compliance to ANSI/NSF Standard 61?		Yes      No	
5. Will all power or air lines penetrate the tank above the maximum water height?		Yes      No	
6. Tank volume(s):		gallons	
7. 24-hour rated mixing volume(s):		gallons	



D. Type of chemical scale:		E. Chemical scale capacity: lbs		F. Will a gas scrubber be provided? Yes No	
G. Gas scrubber capacity (if applicable): lbs			H. Days of gas chemical stored on site: 1. At design average day flow and average dose rate: days 2. At design maximum day flow and average dose rate: days		
I. Gas chemical feed rate (in pounds per day):		Single dose	Pre-dose	Post-dose	
Average flow and minimum dose rate		lbs/day	lbs/day	lbs/day	
Average flow and average dose rate		lbs/day	lbs/day	lbs/day	
Maximum flow and maximum dose rate		lbs/day	lbs/day	lbs/day	
J. Number of gas regulators:			K. Gas regulator capacity: (lbs/day)		
<b>7. New Liquid Chemical Design Data (if applicable)</b> N/A					
A. Number of bulk storage tanks:		B. Liquid bulk storage tank capacity: gals		C. Will secondary containment be provided? Yes No	
D. Secondary containment volume: gals			E. Days of bulk chemical stored on site: 1. At design average flow and average dose rate: days 2. At design maximum flow and average dose rate: days		
F. Method used to transfer liquid chemical from bulk tank to day tank: Gravity Hand pump Mechanical pump					
G. Liquid day tank capacity: gals		H. Will secondary containment be provided? Yes No		I. Secondary containment volume: gals	
J. Hours chemical stored in day tank: 1. Design average flow and average dose rate hours 2. Design maximum flow and average dose rate hours			K. Will a day tank scale be provided? Yes No		
L. Day tank scale capacity: lbs			M. Liquid chemical available concentration (in weight%): %		
N. Liquid chemical feed rate (in gallons per day):		Single dose	Pre-dose	Post-dose	
Average flow and minimum dose rate:		gpd	gpd	gpd	
Average flow and average dose rate:		gpd	gpd	gpd	
Maximum flow and maximum dose rate:		gpd	gpd	gpd	
O. Number of liquid chemical feeders:			P. Type of liquid chemical feeder:		
Q. Liquid chemical feeder maximum capacity: gpd			R. What type of flow control will be provided? Manual Automated Flow paced		
<b>8. New Solid Chemical Design Data (if applicable)</b> N/A					
A. Number of dry chemical feeders:			B. Type of dry chemical feeder: Volumetric Gravimetric		
C. Capacity of dry chemical feeder: lb/day		D. Method used to transfer dry chemical from shipping containers to storage bins or feeders: Manual Pneumatic Other			
E. Dry chemical available concentration (in weight%): %			F. Dry chemical feed rate: 1. Design average flow and minimum dose rate lb/day 2. Design average flow and average dose rate lb/day 3. Design maximum flow and maximum dose rate lb/day		
<b>9. Engineering Controls</b>					
A. SCADA system Yes No		B. WQ/process monitoring devices Yes No		C. Cyber security controls Yes No	
D. Emergency shower Yes No		E. Emergency eyewash Yes No		F. Emergency respiratory facemask Yes No	
G. Emergency SCBA Yes No		H. Heating and ventilation Yes No		I. Leak detection Yes No	
J. Alarms Yes No		K. Chemical testing equipment Yes No		L. Backflow prevention Yes No	



# APPLICATION FOR CONSTRUCTION PERMIT FOR PUBLIC WATER SYSTEM - 327 IAC 8-3-3

State Form 35058 (R11 / 6-26)  
 Approved by State Board of Accounts, 2025  
 Indiana Department of Environmental Management  
 Drinking Water Branch

## Attachment F Water Treatment

- NOTE: Before review of your water treatment construction permit application can begin, the following must be provided:**
- A. Results of the raw water chemical sampling and laboratory testing performed within the last year on each raw water source to be treated;
  - B. Written summary of the water treatment process additions and or modifications including a description of the:
    - Existing water treatment process,
    - Proposed treatment goals and objectives,
    - Proposed treatment additions and or modifications,
    - Required chemical additions and or adjustments, if any,
    - Expected effects on waste residuals volumes and handling and disposal facilities, if any, and
    - Pilot study report if a study was performed;
  - C. Tabular basis of design for the proposed water treatment system with the basis of design for all proposed treatment additions and or modifications and any other required process changes highlighted;
  - D. A complete set of design drawings of the water treatment additions and or modifications including the general, civil, mechanical, architectural, structural, electrical, and instrumentation drawings showing the water treatment facility location, all site piping and valves, and all schedules, plans, sections, and details necessary for construction of the proposed water treatment additions and or modifications, including a diagram of the water treatment process showing all chemical feed locations and proposed treatment changes, and a hydraulic profile of the water treatment process; and
  - E. A complete set of design specifications for all proposed treatment materials and equipment system components or catalog cut sheets for all system components clearly showing the make and model number of each proposed component.

### 1. Water Treatment Plant Name and Location

A. Water treatment plant name	B. Water treatment plant street address
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### 2. System Design and Production Data

A. Source water:	B. Existing treatment plant capacity:	C. Proposed treatment plant capacity:
Ground water                      gpm or                      mgd	Design average flow                      gpm                      mgd	Design average flow                      gpm or                      mgd
Surface water/GWUDI                      gpm or                      mgd	Design maximum flow                      gpm                      mgd	Design maximum flow                      gpm or                      mgd

### D. The Public Water System's five (5) highest demand days in previous two (2) years

Demand (gpd)	Date (month, day, year)
1.	
2.	
3.	
4.	
5.	

Two (2) year Average Daily Demand (average of 1 through 5 above) gpd

### 3. List of Treatment Systems (check all that apply)

A. Micro screening	Existing	Proposed	E. Softening		
B. Clarification			Lime or lime-soda	Existing	Proposed
Pre-sedimentation	Existing	Proposed	Cation exchange	Existing	Proposed
Coagulation	Existing	Proposed	Other	Existing	Proposed
Flocculation	Existing	Proposed	F. Anion exchange	Existing	Proposed
Sedimentation	Existing	Proposed	G. Aeration		
Solids contact	Existing	Proposed	Natural draft aeration	Existing	Proposed
Modular tube or plate settling	Existing	Proposed	Forced draft aeration	Existing	Proposed
High-rate clarification	Existing	Proposed	Spray aeration	Existing	Proposed
C. Filtration			Pressure aeration	Existing	Proposed
Rapid rate gravity filters	Existing	Proposed	Packed tower aeration	Existing	Proposed
Rapid rate pressure filters	Existing	Proposed	H. Iron and manganese (Mn) control		
Diatomaceous earth filtration	Existing	Proposed	Oxidation, detention, and filtration	Existing	Proposed
Slow sand filters	Existing	Proposed	Mn greensand or oxide-coated media	Existing	Proposed
Direct filtration	Existing	Proposed	Sequestering by polyphosphates	Existing	Proposed
Deep bed rapid rate gravity filters	Existing	Proposed	Sequestering by sodium silicates	Existing	Proposed
Aerobic bio-filtration	Existing	Proposed	I. Arsenic control	Existing	Proposed
Anoxic biological filtration	Existing	Proposed	J. Stabilization and corrosion control	Existing	Proposed
Membrane filtration			K. Taste and odor control	Existing	Proposed
Ultrafiltration and microfiltration	Existing	Proposed	L. PFAS and PFOS control		
Nanofiltration and reverse osmosis	Existing	Proposed	Granular activated carbon	Existing	Proposed
D. Disinfection			Engineered resin adsorption	Existing	Proposed
Chlorine gas	Existing	Proposed	High pressure membranes	Existing	Proposed
Sodium hypochlorite	Existing	Proposed	Anion exchange	Existing	Proposed
Chloramines	Existing	Proposed			
Ozone	Existing	Proposed			
Chlorine dioxide	Existing	Proposed			
Ultraviolet (UV)	Existing	Proposed			

4. Engineering Controls												
A. Security fencing				N/A				Yes				No
B. SCADA system				N/A				Yes				No
C. WQ/process monitoring devices				N/A				Yes				No
D. Cyber security controls				N/A				Yes				No
E. Emergency shower and eyewash				N/A				Yes				No
F. Backup power				N/A				Yes				No
G. Emergency respiratory facemask				N/A				Yes				No
H. Emergency SCBA				N/A				Yes				No
I. Heating and ventilation				N/A				Yes				No
J. Leak detection				N/A				Yes				No
K. Alarms				N/A				Yes				No
L. Backflow prevention				N/A				Yes				No

