



# EMERGENCY DRINKING WATER CONSTRUCTION PERMIT REQUEST

State Form 54188 (R2 / 9-14)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INSTRUCTIONS: See back side.

<b>1. Name of Public Water System (PWS)</b>		<b>2. PWS identification number</b>	
<b>Population size served</b>			
<b>3. Name, e-mail address and title of PWS official (i.e. superintendent, utility engineer/manger/owner)</b>		<b>4. Telephone number</b> (    )    —	
<b>5. Address (number and street, city, state, and ZIP code)</b>		<b>6. FAX number</b> (    )    —	
<b>7. Name of project</b>	<b>8. Location of project</b> (number and street, city, state, ZIP code, and county)		
<b>9. Certification by responsible person</b> "I certify under the penalty of law that the construction of this project will be performed under my direction or supervision to assure conformance with 327 IAC 8-3. The construction of proposed project will meet all local rules or laws, regulations and ordinances. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete."			
<b>10. Signature of responsible person</b>			
<b>11. Certification of after-the-fact plans submittal</b> "I certify that the plans, specifications, fees and other information required to demonstrate compliance with 327 IAC 8-3 for proposed emergency construction will be submitted within ten (10) days upon completion of construction authorized by the emergency permit. I understand that receiving authorization to proceed under an emergency permit in no way guarantees final compliance with 327 IAC 8-3 and that modification of the facility's construction under the emergency permit could be required to conform to applicable rule requirements."			
<b>12. Signature of responsible person</b>			
<b>13. Printed name, e-mail address and title of responsible person</b>			
<b>14. Telephone number of responsible person</b> (    )    —		<b>15. FAX number of responsible person</b> (    )    —	
<b>16. Name of company of responsible person</b>		<b>Date signed (month, day, year)</b>	
<b>Address (number and street)</b>		<b>FOR CENTRAL OFFICE REVIEW ONLY</b>	
<b>City, State, and ZIP code</b>			
<b>17. [State the type of construction requested and the reason for the emergency. If insufficient information is given, the request may be denied]. "For an emergency condition, as a result of a drought, storm, flood, or other natural or manmade disaster, the Commissioner may issue an emergency construction permit."</b>			
		Date received by IDEM (month, day, year)	
		Signature of reviewer	
		Date approved _____ (month, day, year)	
		Permit number _____	
		Date denied _____ (month, day, year)	

## **INSTRUCTIONS FOR COMPLETING APPLICATION FOR EMERGENCY PERMIT FOR PUBLIC WATER SYSTEM**

**The following numbers refer to the application on the front page.**

1. *Enter the name of the Public Water System.*
2. *Enter the Public Water System Identification Number (PWSID).*
3. *Enter the name, e-mail address and title of the Public Water System official.*
4. *Enter the telephone number of the Public Water System, including area code.*
5. *Enter the address of the Public Water System.*
6. *Enter the fax number of the Public Water System.*
7. *Enter the name of the project.*
8. *Indicate the location of the project, which includes the city and reference to adjacent streets or roads.*
9. *Requirement of the rule.*
10. *This is the person who will be responsible for complying with item # 9 stating that they will meet all the rules of the construction of the project.*
11. *Statement of certification that construction will be according to the rule and that if it is not constructed correctly the responsible person will be required to correct the problem.*
12. *This is the person who will be responsible for complying with # 11 stating that they will meet all the rules of the construction of the project. This person may or may not be the same person as #10.*
13. *Requires the name, e-mail address and title to be printed.*
14. *Enter the telephone number of the responsible person, including area code.*
15. *Enter the fax number of the responsible person.*
16. *Enter the name, company and address of the responsible person; this might be the same as the Public Water System.*
17. *State why you feel this construction is an emergency situation. Be complete in your explanation; insufficient information may lead to a denial of the emergency permit.*

**Send completed form via e-mail to [dwpermits@idem.in.gov](mailto:dwpermits@idem.in.gov) or fax at (317) 234-7462.**

Contact the Permits Section via e-mail at [dwpermits@idem.in.gov](mailto:dwpermits@idem.in.gov) or by telephone at (317) 234-7425 if you have any questions.