

**OWNER'S CERTIFICATION – AFFIDAVIT OF ACTUAL COST TO CONSTRUCT A NEW DAM OR
MODIFY, REPAIR, DECOMMISSION, REMOVE, OR BREACH AN EXISTING DAM**

Owners Full Name: _____

Address: _____
Street or PO Box City State Zip Code

Phone Number: _____ **Email Address:** _____

Owners Full Name: _____

Address: _____
Street or PO Box City State Zip Code

Phone Number: _____ **Email Address:** _____

Owners Full Name: _____

Address: _____
Street or PO Box City State Zip Code

Phone Number: _____ **Email Address:** _____

Engineers Name: _____

Address: _____
Street or PO Box City State Zip Code

Phone Number: _____ **Email Address:** _____

NOTE: If there are additional owners/engineers, use the additional information sheet to provide the required contact information.

COST INFORMATION

For purposes of determining the actual cost of construction, the cost shall (i) include all labor and materials costs associated with the project for the applicable dam and (ii) not include the costs associated with acquisition of land or right-of-way, design, quality control, electrical generating machinery, or constructing a roadway across the dam.

You must attach contractual documentation for the project which includes lump sum bid price or unit bid quantities with prices; all change order items costs, etc. An approval will not be issued if documentation for the actual cost of construction/enlargement/removal and the additional application processing fee are not provided.

Applications submitted on or after October 10, 2023	Applications submitted before October 10, 2023
(A) Actual Construction Cost: \$ _____	(A) Actual Construction Cost: \$ _____
(B) Actual Total Fee: \$ _____ (2.25% of A)	(B) Final Fee: \$ _____ (calculated using the "fee calculator")
(C) Initial Fee Paid: \$ _____	
(D) Final Fee: \$ _____ (B minus C)	

The above information is true and correct to the best of my knowledge and belief and was provided by me under oath.

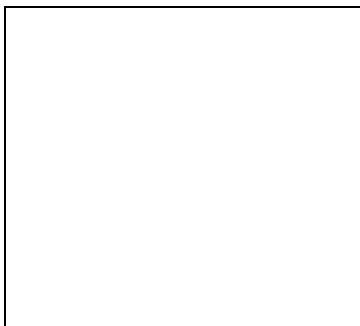
Name: _____ Title of Authority: _____

Signature: _____ Date: _____

I _____, a Notary Public of the County of _____ in the State of North Carolina, hereby certify that _____ appeared personally before me this day and being duly sworn acknowledge that the above form was executed by him/her.

Witness my hand and notarial seal, this _____ day of _____, 20_____.

Affix Seal:



Notary

My commission expires: _____

ADDITIONAL INFORMATION