



CONSTRUCTION COMPLETION NOTIFICATION
 NORTH DAKOTA DEPARTMENT OF WATER RESOURCES
 REGULATORY DIVISION
 SFN 60895 (2/2023)

DEPARTMENT OF
 WATER RESOURCES
 USE ONLY

Mail To:
 Department of Water Resources
 1200 Memorial Highway
 Bismarck, ND 58504-5262

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For structures that require a construction permit from the Department of Water Resources, this form is to be submitted to the Department of Water Resources upon completion of the structure in accordance with North Dakota Administrative Code **89-08-02-03.1**. As built plans of the structure must be submitted with this form in accordance with North Dakota Administrative Code **89-08-02-07**. For structures that do not require a construction permit, the Department of Water Resources requests that the owner of the structure complete applicable sections of this form for the Department of Water Resources records. As built plans are not required for structures not requiring a construction permit.

89-08-02-03.1: *Construction must be completed and the State Engineer must be notified of completion in writing within two years from the date of final approval or the permit is void. The two-year period does not begin until any appeal is complete.*

89-08-02-07: *As a condition on all construction permits, the owner of the dam, dike, or other device will provide the state engineer with "as built" plans within six months after the dam, dike, or other device has been constructed to provide details of the modifications that occurred during construction.*

1. General Information

Type Of Structure (choose one) Dam Dike Other (Diversion, Pond, Lagoon, etc.) _____

Name Of Structure

Legal Description	¼	¼	Section	Township	Range
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Construction Permit Number (if applicable)	Water Use Permit Number (if applicable)
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Construction Permit Approval Date (if applicable)

2. Verification Of Construction (complete sections A, B or C as applicable)

A. For Structures Requiring A Construction Permit

This structure has been built or modified in accordance with the construction permit. As built plans are attached.
 Yes No *(If no, please complete section C)*

Completion Date

B. For Structures Not Requiring A Construction Permit

This structure has been built in accordance with the submitted plans
 Yes No *(If no, please complete section C)*

List Any Modifications From The Submitted Plans That Occurred During Construction

Completion Date

C. This Structure Will Not Be Constructed Yes

Reason

3. Ownership And Maintenance (complete all)			
A. Owner Of The Property On Which The Structure Is Located			
Name Or Agency			
Agency Contact Person (if applicable)			
Mailing Address	City	State	ZIP Code
Email Address	Home Telephone Number		
Work Telephone Number	Cell Telephone Number		
B. Agency Or Individual Responsible For Operation And Maintenance Of The Structure			
<input type="checkbox"/> Land Owner Listed Above <input type="checkbox"/> Other (if other, please complete information below)			
Name Or Agency			
Agency Contact Person (if applicable)			
Mailing Address	City	State	ZIP Code
Email Address	Home Telephone Number		
Work Telephone Number	Cell Telephone Number		
(Signature Of Owner or Agency Representative)	(Print Name)	(Date)	