

Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-11-13 SC Dam Inventory Number D 1976 County: Sumter

Dam Name: Burnett's Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No [X] (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person):

Contact Person (if owner is company):

Phone: Email:

Mailing Address:

City: State: Zip:

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 1500' N of SC 441 & Coronet Dr (Intersectn)

Latitude: 34° 03' 53" N Longitude: -80° 25' 14" W Tax map # (list all): 3 193 000 2013,

192 000 1021, 5, 6 192 000 1048

B. Is there any evidence of new development below the dam? Yes No [X]

C. Do you think the hazard classification should be upgraded? Yes No [X]

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Craston Printed Name of Regional Inspector

[Signature] Signature

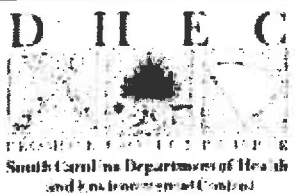
2-8-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

EFIS 2-8-13



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Date of Inspection: 1-11-13 SC Dam Inventory Number D 1977 County: Sumter

Dam Name: Lake View Pond Dam

I. Dam Owner Information

Has ownership changed? [X] Yes ___ No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Paul + Mary Jean Steinburg

Contact Person (if owner is company):

Phone: W/K Email: W/K

Mailing Address: 4915 Ridgewood Dr.

City: Rembert State: SC Zip: 29128

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ~2300' NW of US 521 + SC 441

Latitude: 34° 02' 06" N Longitude: -80° 28' 25" W Tax map # (list all): 137 000 3018

B. Is there any evidence of new development below the dam? [X] Yes ___ No

C. Do you think the hazard classification should be upgraded? [X] Yes ___ No

D. If yes for item II.C, what is your opinion of what the new classification should be? ___ Class 1 (High Hazard)

[X] Class 2 (Significant Hazard) WWTP installed immediately downstream

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Gaston Printed Name of Regional Inspector

[Signature] Signature

2-8-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

EFIS 2-8-13



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Date of Inspection: 1-11-13 SC Dam Inventory Number D 1978 County: Sumter

Dam Name: Ross's Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): C/o Mark Gardener (OR) Carl Boykin Brankham

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 135 (OR) 3810 Waterside Dr.

City: Dalzell (OR) Greensboro State: SC (OR) NC Zip: 29040 (OR) 27406

(2 lots on Dam)

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ~3500' NW of Old US521 + Black Riv. Rd, Dalzell

Latitude: 34° 01' 28" N Longitude: -80° 26' 14" W Tax map # (list all): 151 000 2033;

151 000 2008

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Gaston
Printed Name of Regional Inspector

[Signature]
Signature

2-8-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

EFIS 2-8-13



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Date of inspection: 1-16-13 SC Dam Inventory Number D 1589 County: Sumter
Dam Name: Poinsett Park Lake Dam

I. Dam Owner Information

Has ownership changed? ___ Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): _____
Contact Person (if owner is company): _____
Phone: _____ Email: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____

II. Site Information

A. Site Location (street address, nearest intersection, etc.): End of Co Rd 63, 200' SW of Park HQ
Latitude: 33° 48' 14" N Longitude: -80° 32' 53" W Tax map # (list all): 103 900 100 1

B. Is there any evidence of new development below the dam? ___ Yes No
C. Do you think the hazard classification should be upgraded? ___ Yes No
D. If yes for item II.C, what is your opinion of what the new classification should be? ___ Class 1 (High Hazard)
___ Class 2 (Significant Hazard)

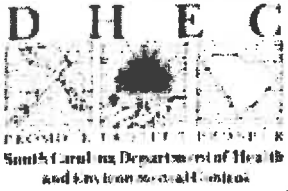
III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Gaston _____ [Signature] _____ 2-8-13
Printed Name of Regional Inspector Signature Date of Signature

Printed Name of BOW Engineer Signature Date of Signature

EFIS 2-8-13



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Date of Inspection: 1-16-13 SC Dam Inventory Number D 1586 County: Sumter

Dam Name: Myrtle Cleveland Dam

I. Dam Owner Information

Has ownership changed? X Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Eight-T Partnership

Contact Person (if owner is company):

Phone: UK Email: UK

Mailing Address: 41 King Charles Rd

City: Columbia State: SC Zip: 29209

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 3200' SE of end of Spurtleberry Ldg Rd

Latitude: 33° 41' 48" N Longitude: -80° 31' 39" W Tax map # (list all): 111 000 1013, 111 000 100 1

B. Is there any evidence of new development below the dam? Yes No X

C. Do you think the hazard classification should be upgraded? Yes No X

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Gaston Printed Name of Regional Inspector

[Signature] Signature

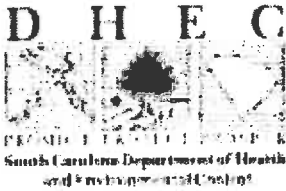
2-8-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

EFIS 2-8-13



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Date of inspection: 1-11-13 SC Dam Inventory Number D 1972 County: Sumter
Dam Name: White Oak Slash Lake Dam

I. Dam Owner Information

Has ownership changed? ___ Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): _____

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ~5000' W of Wateree Correctional

Latitude: 34° 04' 55" N Longitude: -80° 36' 12" W Tax map # (list all): 028 900 1001

B. Is there any evidence of new development below the dam? ___ Yes No

C. Do you think the hazard classification should be upgraded? ___ Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? ___ Class 1 (High Hazard)
___ Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Gaston
Printed Name of Regional Inspector

[Signature]
Signature

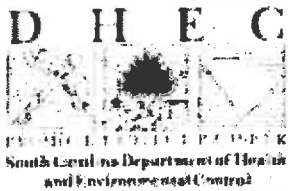
2-8-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

EPIS 2-8-13



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Date of Inspection: 1-11-13 SC Dam Inventory Number D 1974 County: Sumter
Dam Name: McCleods Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Lawrence M. McCaskey

Contact Person (if owner is company): _____

Phone: UNK Email: UNK

Mailing Address: 6215 New Hope Church Rd

City: Rembert State: SC Zip: 29128

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 500' E of Co 263 + Frye Rd (Intersection)

Latitude: 34° 05' 47" N Longitude: -80° 30' 43" W Tax map # (list all): 087 000 300 2

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Gaston
Printed Name of Regional Inspector

[Signature]
Signature

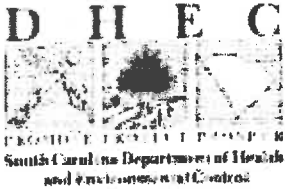
2-8-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

EFIS 2-8-13



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Date of Inspection: 1-11-13 SC Dam Inventory Number D 1975 County: Sumter

Dam Name: Corley / Norrisworthy Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person):

Contact Person (if owner is company):

Phone: Email:

Mailing Address:

City: State: Zip:

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 1600' E of Col 26 + Corley Rd (Intersection)

Latitude: 34° 05' 28" N Longitude: -90° 26' 19" W Tax map # (list all): 147 000 2041

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Benjamin Coarson Printed Name of Regional Inspector

[Signature] Signature

2-8-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 HRY



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Date of Inspection: 1-10-13 SC Dam Inventory Number D-3481 County: Clarendon

Dam Name: Francis Coker Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): James Beasley

Contact Person (if owner is company): James Beasley

Phone: _____ Email: _____

Mailing Address: 5022 Turbeville Hwy.

City: Turbeville State: SC Zip: 29162

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Seloz Road near US Hwy 378

Latitude: 33.882568 "N Longitude: -80.004542 "W Tax map # (list all): 324-00-03-036-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

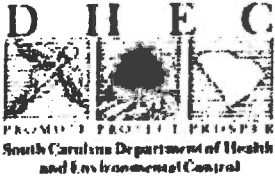
1-10-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HGH



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Date of Inspection: 1-10-13 SC Dam Inventory Number D 3482 County: CLARENDON
Dam Name: DOROTHY THOMPSON DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): RUSSELL EFFIE T. ETAL

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 1528 TEARCOAT RD

City: ALCOLU State: SC Zip: 29001

II. Site Information

A. Site Location (street address, nearest intersection, etc.): NEAR BOSTON WELLS ROAD
33.821759 -80.204214
Latitude: " N Longitude: " W Tax map # (list all): 180-00-01-001-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-10-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HX



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
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Date of inspection: 1-10-13 SC Dam Inventory Number D 3483 County: CLARENDON

Dam Name: OLIVIA JACKSON DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): O'BRYAN CECIL DESAUSSURE SR. & TRUSTEE
Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 2422 BLACK RIVER RD.

City: GABEE State: SC Zip: 29051

II. Site Information

A. Site Location (street address, nearest intersection, etc.): CECIL MCFADDIN RD
Latitude: 33.844222 "N Longitude: -80.119512 "W Tax map # (list all): 229-00-02-003-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-10-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS 2-26-13 by NR# as "no-reclass - could be changed after review by Columbia DHEC Engineers



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-10-13 SC Dam Inventory Number D 3484 County: CLARENDON
Dam Name: CYPRESS LAKE DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): CYPRESS LAKE INC.
Contact Person (if owner is company): KETH GIBBONS
Phone: Email:
Mailing Address: 3285 SELOC ROAD
City: TURBEVILLE State: SC Zip: 29162

II. Site Information

A. Site Location (street address, nearest intersection, etc.): DAM IS PUDDIN SWAMP ROAD
33.849163 -80.007638
Latitude: " N Longitude: " W Tax map # (list all): 326-00-01-005-00

B. Is there any evidence of new development below the dam? Yes No
C. Do you think the hazard classification should be upgraded? Yes No
D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

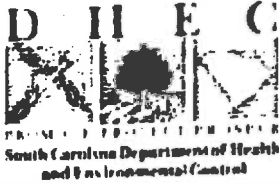
IF DAM FAILED, PUDDIN SWAMP ROAD WOULD BE WASHED OUT AND ANY CARS ON ROAD COULD BE WASHED AWAY.

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector Harry Gaymon Signature 1-10-13 Date of Signature
Printed Name of BOW Engineer Signature Date of Signature

Entered into EFIS 2-26-13 by NR4 as "noreclass" -
 could be changed after review by Columbia DHEC Engineers



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Date of Inspection: 1-11-13 SC Dam Inventory Number D 3487 County: CLARENDON
 Dam Name: O E ROSE DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): HAROLD AND OLLEN ROSE

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO BOX 434

City: MANNING State: SC Zip: 29102

II. Site Information

A. Site Location (street address, nearest intersection, etc.): DAM IS RAINBOW LAKE RD (SR 104)
33.806721 -80.090893
 Latitude: _____ "N Longitude: _____ "W Tax map # (list all): 271-00-02-005-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

IF DAM FAILED, RAINBOW LAKE RD. WOULD BE WASHED OUT AND ANY CARS ON ROAD COULD BE WASHED AWAY.

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
 Printed Name of Regional Inspector

Harry Gaymon
 Signature

1-11-13
 Date of Signature

 Printed Name of BOW Engineer

 Signature

 Date of Signature

Entered into EFIS on 2-1-13 by HKS



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Date of Inspection: 1-11-13 SC Dam Inventory Number D 3489 County: CLARENDON
Dam Name: LC PROTHRO DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): MCLAURIN FAMILY LTD PTSHP

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 6380 McLAURIN ROAD

City: WEDGEFIELD State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF OLD GEORGETOWN ROAD
33.731563 -80.237205
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): 135-00-02-001-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-11-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS 2-26-13 by HGH as "no-reclass" — could be changed after review by Columbia HEC Engineers



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Date of inspection: 1-11-13 SC Dam Inventory Number D-3490 County: CLARENDON

Dam Name: LAKEWOOD POND DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): TRACY DURANT

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1427 JASMINE LANE

City: MURRELLS INLET State: SC Zip: 29576

II. Site Information

A. Site Location (street address, nearest intersection, etc.): DAM NEAR JUNE BURN ROAD

Latitude: 33.731781 "N Longitude: -80.093455 "W Tax map # (list all): 266-00-01-010-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

IF DAM FAILED, JUNE BURN Rd. WOULD BE WASHED OUT AND ANY CARS ON ROAD COULD BE WASHED AWAY.

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-11-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HXA



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-11-13 SC Dam Inventory Number D3486 County: CLARENDON
Dam Name: ROBERT ALDERMAN DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): JUDITH ANN MEGAHAN

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1183 CHESTNUT DRIVE

City: ALCOLU State: SC Zip: 29001

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF SR 765 NEAR I-95
33.800694 -80.166676
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): 223-00-01-005-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-11-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS 2-26-13 by NKA as no-release
 could be changed after review by Columbia DHEC engineers



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D 2918 County: LEE

Dam Name: HARVEY SHAW DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): RANDOLF ROGERS

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1901 CAROLINA AVENUE

City: HARTSVILLE State: SC Zip: 29550

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF MT. LISBON RD

34.144367 -80.240413
 Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

IF DAM FAILED, DOWNSTREAM MOUNT LISBON ROAD (SR 33) COULD BE WASHED OUT.

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
 Printed Name of Regional Inspector

Harry Gaymon
 Signature

1-16-13
 Date of Signature

 Printed Name of BOW Engineer

 Signature

 Date of Signature

Entered into EFIS on 2-1-13 by HRH



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-11-13 SC Dam Inventory Number D 3485 County: CLARENDON
Dam Name: BUDDIN POND DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person):
Contact Person (if owner is company):
Phone: Email:
Mailing Address:
City: State: Zip:

II. Site Information

A. Site Location (street address, nearest intersection, etc.):
33-833296 -79.955648
Latitude: " N Longitude: " W Tax map # (list all): 343-00-01-013-00

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-11-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFS 2-26-13 by NCF as "no reclass" - could be changed after review by Columbia DHEC engineers



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D 2422 County: LEE

Dam Name: MATTIE J'S POND DAM

I. Dam Owner Information

Has ownership changed? ___ Yes No (if yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): RUTH B. JOHNSON

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 4025 TAVINNER DRIVE

City: COLUMBIA, SC State: SC Zip: 29154

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ON DOG ISLAND ROAD (SR 44)
34.079536 -80.20283
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? ___ Yes No

C. Do you think the hazard classification should be upgraded? Yes ___ No

D. If yes for Item II.C, what is your opinion of what the new classification should be? ___ Class 1 (High Hazard)

Class 2 (Significant Hazard)

IF DAM FAILED, DOG ISLAND ROAD WOULD BE WASHED OUT AND ANY CARS ON ROAD COULD BE WASHED AWAY. ALSO, US 401 A SHORT DISTANCE DOWNSTREAM OF DAM.

III. Signature Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-16-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS 2-26-13 by HGH
as "no reclass" - maybe changed later by Columbia Engi



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D 2416 County: LEE

Dam Name: DENNY POND DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): DENGAR, INC.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO BOX 933

City: BISHOPVILLE State: SC Zip: 29010

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ACCESS @ 912 BROWN STREET

34.23057 Latitude: _____ N Longitude: -80.258792 W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)
SIGNIFICANT DOWNSTREAM DEVELOPMENT

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-16-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS 2-26-13 by HRH



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-17-13 SC Dam Inventory Number D 1577 County: SUMTER

Dam Name: WEEKS POND DAM (ALSO CALLED SHULLER POND DAM)

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): ROBERT L. JONES

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO BOX 1871

City: SUMTER State: SC Zip: 29151

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ACCESS OFF FOREST LAKE DR. ON DAM ROAD

33.849105 - 80.41323
Latitude: _____ "N Longitude: - _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)
NEEDS TO BE EVALUATED BY DHEC ENGINEERS TO SEE IF DOWNSTREAM KOLB ROAD WOULD BE AFFECTED BY

III. Signature

DAM FAILURE,
Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-17-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HAY



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-15-13 SC Dam Inventory Number D 1450 County: SUMTER

Dam Name: BURNT GIN LAKE DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): MANCHESTER STATE FOREST

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 6740 HEADQUARTERS ROAD

City: WEDGEFIELD State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF BURNT GIN ROAD

33.872785 - 80.496055

Latitude: _____ " N Longitude: - _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-15-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HX4



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-15-13 SC Dam Inventory Number D 1574 County: SUMTER
Dam Name: CHRISTMAS MILL LAKE DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): MANCHESTER STATE FOREST

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 6740 HEADQUARTERS ROAD

City: WEDGEFIELD State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF POINSETT PARK ROAD

Latitude: 33.799629 "N Longitude: -80.532763 "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-15-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-15-13 SC Dam Inventory Number D 1459 County: SUMTER
Dam Name: GULCOU FARMS DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): C J GULLEDGE

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1 ROBBINS AVE

City: SUMTER State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF MIDDLETON ROAD
Latitude: 33.86565° N Longitude: -80.518607° W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-15-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HRY



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-15-13 SC Dam Inventory Number D 1585 County: SUMTER
Dam Name: CAMPBELL POND DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): MANCHESTER STATE FOREST

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 6740 HEADQUARTERS ROAD

City: WEDGEFIELD State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF CAMPBELL CREEK ROAD
Latitude: 33.821728° N Longitude: -80.529534° W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

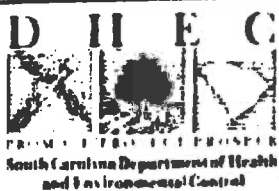
1-15-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on ~~2-13~~ ^{HKA} 2-1-13 by HKA



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of inspection: 1-15-13 SC Dam Inventory Number D 1583 County: SUMTER
Dam Name: ALICE BRADING DAM (BOYLES POND)

I. Dam Owner information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)
A. Owner/ Operator (Company or person): MARY MARGARET WALLACE
Contact Person (if owner is company): _____
Phone: _____ Email: _____
Mailing Address: 1470 KEMP ROAD PT, JAMES 5 D
City: CHARLESTON State: SC Zip: 29412

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF ST. PAULS CHURCH ROAD
33.881051 -80.43737
Latitude: _____° N Longitude: - _____° W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-15-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HZ4



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-15-13 SC Dam Inventory Number D 1448 County: SUMTER

Dam Name: ELLIOTT'S LAKE DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): SC FORESTRY COMMISSION

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 5500 BROAD RIVER ROAD

City: COLUMBIA State: SC Zip: 29220

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF HARRIET HARVIN ROAD

33.850281 - 80.496915
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-15-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HGH



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D 2420 County: LEE

Dam Name: TENIE SCHLUTTER DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): TENIE SCHLUTTER

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 839 DOG ISLAND ROAD

City: BISHOPVILLE State: SC Zip: 29010

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF SR 497, NEXT TO I-20

34.182596 Latitude: _____ "N Longitude: -80.234201 "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-16-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HX4



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D 2421 County: LEE

Dam Name: BISHOPVILLE DAM

I. Dam Owner Information

Has ownership changed? ___ Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): CITY OF BISHOPVILLE

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 114 E. COUNCIL ST.

City: BISHOPVILLE State: SC Zip: 29010

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF MCGUIRT RD.

Latitude: 34.225819 "N Longitude: -80.216601 "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? ___ Yes No

C. Do you think the hazard classification should be upgraded? ___ Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? ___ Class 1 (High Hazard)
___ Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-16-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HLL



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-17-13 SC Dam Inventory Number D 1447 County: SUMTER

Dam Name: SWAN LAKE GARDENS DAM

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): CITY OF SUMTER

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 21 N. MAIN ST.

City: SUMTER State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF W. LIBERTY STREET 33.916797 - 80.369959 Latitude: "N Longitude: "W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

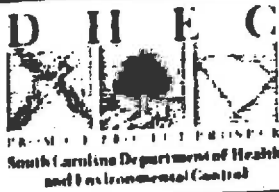
1-17-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on ~~2-1-13~~¹⁻¹³ 2-1-13 by HZB



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of inspection: 1-17-13 SC Dam Inventory Number D 2419 County: LEE

Dam Name: CS NEWSOME DAM

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): CS NEWSOME

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 681 NEWSOME ROAD

City: BISHOPVILLE State: SC Zip: 29010

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ON NEWSOME ROAD

Latitude: 34.313332 ° N Longitude: -80.251077 ° W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

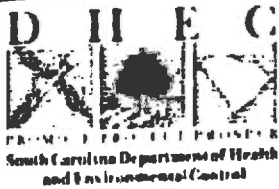
1-17-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by ALZ



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-17-13 SC Dam Inventory Number D 2425 County: LEE

Dam Name: JOHN C. SMITH DAM

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): JOHN MARTIN DAVIS

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 311 WESTOVER DRIVE

City: HARTSVILLE State: SC Zip: 29550

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ON JUMPING GULLEY RD @ SR 222

34.295263 - 80.152914 Latitude: " N Longitude: - " W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

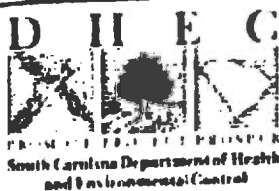
1-17-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HAZ



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D 2423 County: LEE
Dam Name: ROSALIE SENTER DAM (MINIE DESCHAMPS POND)

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): ROSALIE SENTER

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 2390 DOG ISLAND ROAD

City: BISHOPVILLE State: SC Zip: 29010

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF NANCY BRANCH ROAD

Latitude: 34.018428 ° N Longitude: -80.198315 ° W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-16-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HGH



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-17-13 SC Dam Inventory Number D 1575 County: SUMTER
Dam Name: ROBERT JONES DAM

I. Dam Owner Information

Has ownership changed? Yes No (if yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): ROBERT L JONES

Contact Person (if owner is company):

Phone: Email:

Mailing Address: P.O. BOX 1871

City: SUMTER State: SC Zip: 29151

II. Site Information

A. Site Location (street address, nearest intersection, etc.): ON FURMAN COVE RD, OFF BETHEL CHURCH RD

Latitude: 33.807929 N Longitude: -80.418393 W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

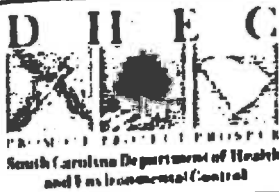
1-17-13 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Entered into EFIS on 2-1-13 by HLL



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-16-13 SC Dam Inventory Number D2426 County: LEE
Dam Name: STEWART/DUFFY DAM (COPELAND POND)

I. Dam Owner Information

Has ownership changed? Yes No (if yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): ELINA PHILLIPS

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 9020 ELINA ROAD

City: TURBEVILLE State: SC Zip: 29162

II. Site Information

A. Site Location (street address, nearest intersection, etc.): OFF FIELD BRIDGE RD. (SR 43)

Latitude: 34.167524 N Longitude: -80.15912 W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-16-13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-2-14 SC Dam Inventory Number D 4492 county: Sumter
Dam Name: K. B. Simmons Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Kenneth B. Simmons

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 3135 Millwood ave.

City: Columbia State: SC Zip: 29205

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Kenneth Lane off Sec. Rd 51
33.723273 -80.5342
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-2-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-2-14 SC Dam Inventory Number D 2066 County: Sumter Dam Name: Mill Creek Park Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Manchester State Forest

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 6740 Headquarters Road

City: Wedgefield State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Milford Plantation rd

Latitude: 33, 735333 N Longitude: -80, 52415 W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Harry Gaymon 1-2-14 Printed Name of Regional Inspector Signature Date of Signature

Printed Name of BOW Engineer Signature Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of inspection: 1-2-14 SC Dam Inventory Number D 2077 County: Sumter
Dam Name: SCA Services Inc. Dam (Culp Pond)

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Frank Hill and Roy N. Flynn

Contact Person (if owner is company):

Phone: Email:

Mailing Address: Hill Plumbing & Electric Co. 438 N. Main St.

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Sparkleberry Landing Road
Latitude: 33.700324 N Longitude: -80.52797 W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

Harry GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-2-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-2-14 SC Dam Inventory Number D 4452 County: Sumter Dam Name: Mine Hills Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): SC Forestry Commission Contact Person (if owner is company): Phone: Email: Mailing Address: 5500 Broad River Road City: Columbia State: SC Zip: 29220

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Mine Hill Road off SC 261 33.916636 -80.534635 Latitude: " N Longitude: " W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-2-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



**Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9**

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of inspection: 1-6-14 SC Dam Inventory Number D 2065 County: Sumter

Dam Name: Mark Brody Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Mark Brody

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 547 Rocky Bottom Rd

City: Sunset State: SC Zip: 29685

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Brian Branch Rd. off Sec Rd 25
33.802027 -80.32959
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-6-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-6-14 SC Dam Inventory Number D 2064 County: Sumter

Dam Name: Joe B. Hodge Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Joe B. Hodge

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 4440 Briar Branch Road

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Briar Branch Rd, off Sec R & 25

Latitude: 33.798176, -80.33298 Longitude: Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-6-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-6-14 SC Dam Inventory Number D 4598 County: Sumter

Dam Name: Brogdon Family Pond

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Brogdon Family LP

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: MS. Vikki Brogdon, 3555 Old Manning Rd.

City: Manning State: SC Zip: 29102

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Andrews Rd, off Sec Rd 25
33.790008 -80.28598
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-6-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-6-14 SC Dam Inventory Number D 2058 County: Sumter

Dam Name: Cain Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Gwyndale Inc.

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 917 Cardinal Circle

City: Florence State: SC Zip: 29505

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Gwyndale Rd off SC 120

Latitude: 33.839303 N Longitude: -80.46087 W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-6-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-6-14 SC Dam Inventory Number D 2059 County: Sumter

Dam Name: WM Tisdale Dam (Korn Pond Dam)

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): WM Tisdale

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 520 W. Hampton ave.

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): on Kolb Rd. 33.847821 -80.40712 Latitude: " N Longitude: - " W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-6-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-6-14 SC Dam Inventory Number D 2054 County: Sumter Dam Name: Hayes Pond Dam (West Lake Dam)

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Anderson & Hayes General Partners

Contact Person (if owner is company):

Phone: Email:

Mailing Address: John Anderson, 5 Foxfire Circle

City: Wedgefield State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Burnt Gum Rd off Sec Rd 763 33.895168 -80.47191 Latitude: " N Longitude: " W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-6-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-7-14 SC Dam Inventory Number D 1979 County: Sumter Dam Name: Ardis Pond

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Tyler Dunlap

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 1770 Camden Rd

City: Sumter State: SC Zip: 29153

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Ardis Pond Rd near Ebenezer Rd

Latitude: 34.020386 N Longitude: -80.4005 W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-7-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-7-14 SC Dam Inventory Number D 1980 County: Sumter

Dam Name: McLaurin Pond Dam

I. Dam Owner Information

Has ownership changed? ___ Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Irish H. Edens

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 3100 Hill Road

City: Sumter State: SC Zip: 29153

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Hill Rd near Jenkins Rd
34,00613 -80,36383
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? ___ Yes No

C. Do you think the hazard classification should be upgraded? ___ Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? ___ Class 1 (High Hazard)
___ Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-7-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-7-14 SC Dam Inventory Number D 4540 County: Sumter
Dam Name: Thomas J. Holbrook Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Thomas Holbrook

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 4219 Woodleigh Rd.

City: Columbia State: SC Zip: 29206

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Coon Ridge Rd, off Claremont Rd
33.976793 -80.57324
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-7-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-7-14 SC Dam Inventory Number D 1988 County: Sumter Dam Name: Whites Mill Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Whites Mill Colony, Inc

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 2550 N. Main ST

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off US Hwy 15 @ Brewington Rd Latitude: 33.983955 N Longitude: -80.32485 W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-7-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-7-14 SC Dam Inventory Number D 1987 County: Sumter

Dam Name: Sawmill Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): RS Lee Family LMT Partners

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 1580 Loring Mill Rd

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Loring Mill Road 33.952741 -80.42068 Latitude: Longitude: Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-7-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-7-14 SC Dam Inventory Number D 1985 County: Sumter

Dam Name: Booths Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Wachovia Bank NA

Contact Person (if owner is company):

Phone: Email:

Mailing Address: PO Box 3099

City: Winston Salem State: NC Zip: 27150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Klapthor Rd, off Stamey Livestock Rd 33.976446 - 80.4393 Latitude: " N Longitude: - " W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-7-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-7-14 SC Dam Inventory Number D 1984 County: Sumter

Dam Name: John Mikell Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): John Mikell

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 7405 Montclare Pl.

City: Sumter State: SC Zip: 29154

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Garner's Ferry Rd off US Hwy 76/378 33.956763 -80.56524 Latitude: " N Longitude: - " W Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-7-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-7-14 SC Dam Inventory Number D 1983 County: Sumter

Dam Name: Stateburg Hills Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Stateburg Hills Lake Corp.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 8

City: Dalzell State: SC Zip: 29040

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Barnwell Dr. off SC Hwy 261
33.963286 - 80.52779
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? _____ Class 1 (High Hazard)
_____ Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-7-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-8-14 SC Dam Inventory Number D 2061 County: Sumter

Dam Name: Deschamps Middle Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Upper Lakewood association

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 3295 Greenleaf Parkway

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off US Hwy 15
Latitude: 33.83097 "N Longitude: -80.36764 "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtaining from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-8-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-8-14 SC Dam Inventory Number D 2060 County: Sumter

Dam Name: Deschamps Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Lakewood Pond Corp

Contact Person (if owner is company):

Phone: Email:

Mailing Address: PO Box 2744

City: Sumter State: SC Zip: 29151

II. Site Information

A. Site Location (street address, nearest intersection, etc.): @ Lakewood Golf Course off US Hwy 15 33.844141 -80.36439 Latitude: Longitude: Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-8-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-8-14 SC Dam Inventory Number D 2062 County: Sumter Dam Name: McLaurin Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (checked) (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Greer McLaurin

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 1020 Old Manning Rd

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Diamond T. Circle off Sec Rd 25 33.840835 -80.34208 Latitude: Longitude: Tax map # (list all):

B. Is there any evidence of new development below the dam? Yes No (checked)

C. Do you think the hazard classification should be upgraded? Yes No (checked)

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard) Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON Printed Name of Regional Inspector

Harry Gaymon Signature

1-8-14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-8-14 SC Dam Inventory Number D 2063 County: Sumter

Dam Name: William McLeod Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): William McLeod

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1320 Old Manning Rd

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Old Manning Road
Latitude: 33.838839 ° N Longitude: -80.32813 ° W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for Item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-8-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of Inspection: 1-8-14 SC Dam Inventory Number D 1990 County: Sumter
Dam Name: McLaurin Pond Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Hugh McLaurin

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 6380 McLaurin Rd

City: Wedgfield State: SC Zip: 29168

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off McLaurin Rd off SC Hwy 261
33.910936 -80.51323
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-8-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-8-14 SC Dam Inventory Number D 2056 County: Sumter

Dam Name: TC Croft Dam (Burns Pond Dam)

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Carl Croft

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 410 W. Liberty St. 3216

City: Sumter State: SC Zip: 29150

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Richards Lane off Sec Rd 33
33.884097 - 80.4255
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-8-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-22-14 SC Dam Inventory Number D 3494 County: Clarendon

Dam Name: Eugene Poole Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Edward Dyson

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: Rt 2, PO Box 628

City: Manning State: SC Zip: 29102

II. Site Information

A. Site Location (street address, nearest intersection, etc.): @ intersection of sec Rd 50 and sc hwy 261
33.687161 - 80.05541
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-22-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 1-22-14 SC Dam Inventory Number D.3493 County: Clarendon
Dam Name: Sadie Windham Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Sadie Windham

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: Rt 2, PO Box 564

City: Manning State: SC Zip: 29102

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Dave Plowden Pond Rd near Damascus Rd.
33.711859 -80.0889
Latitude: _____ "N Longitude: _____ "W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)

Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-22-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

Note: This form is only for use on current low hazard (class three) dams regulated by the Department of Health and Environmental Control in the State of South Carolina. The primary user of this form is for the use of Department staff members actively involved in reclassification inspections. The current policy is to evaluate the hazard potential of low hazard dams at least once every five years.

Date of inspection: 1-22-14 SC Dam Inventory Number D 3491 County: Clarendon

Dam Name: Leo Berry Dam

I. Dam Owner Information

Has ownership changed? Yes No (If yes, enter the new owners and their contact information below)

A. Owner/ Operator (Company or person): Leo Berry

Contact Person (if owner is company): _____

Phone: _____ PO _____ Email: _____

Mailing Address: Rt 5, Box 760

City: Manning State: SC Zip: 29102

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Winters Hill Rd off SC Hwy 261
33.7043 -80.28476
Latitude: _____ " N Longitude: _____ " W Tax map # (list all): _____

B. Is there any evidence of new development below the dam? Yes No

C. Do you think the hazard classification should be upgraded? Yes No

D. If yes for item II.C, what is your opinion of what the new classification should be? Class 1 (High Hazard)
 Class 2 (Significant Hazard)

III. Signature

Please print your name, sign, and date on the lines below once the inspection and form have been completed. If assistance with determining the hazard classification was obtained from Bureau of Water staff members, they will also need to complete this portion of the form.

HARRY GAYMON
Printed Name of Regional Inspector

Harry Gaymon
Signature

1-22-14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature