**Kentucky Division of Water**

**Wellhead Protection plan**

**5-year update Form**

**Update Requirements:**

This form should be used for the 5-year update submittal requirements of the Kentucky Wellhead Protection Program (WHPP) in compliance with 401 KAR 4:220 and SDWA Section 1428. Once the form is complete, please sign and send to:

Kentucky Division of Water

Watershed Management Branch

Attention: Chip Zimmer

300 Sower Boulevard, 3rd Floor

Frankfort, Kentucky 40601 or [edward.zimmer@ky.gov](mailto:edward.zimmer@ky.gov)

For assistance, contact Chip Zimmer at (502) 782-7141 or [edward.zimmer@ky.gov](mailto:edward.zimmer@ky.gov)

**System Information:**

PWS Name: Click here to enter text.

PWS ID Number:Click here to enter text. AI Number: Click here to enter text.

Contact Person/Title: Click here to enter text.

Mailing Address: Click here to enter text.

Telephone: Click here to enter text. Email: Click here to enter text.

System Type\*: Click here to enter text.

\*Community; Non-Transient/Non-Community; Transient/Non-Community

Source\*: Click here to enter text. \*Well(s) or Spring(s) and total number of each

AKGWA #(s): Click here to enter text.

County: Click here to enter text. ADD: Click here to enter text.

WWD Permit #: Click here to enter text. Permitted Amount (mgd): Click here to enter text.

Population Served: Click here to enter text.

Overall Susceptibility Rating\*: Click here to enter text. \*High, Medium or Low

WHPP Changes Summary: Click here to enter text.

**Update Form Instructions:**

Please complete each section that applies to any system or WHPP updates and submit the supporting documentation. Please indicate if a section is not applicable to this update. **Sections 4 and 6 through 11 are required for every 5-year update**.

Please sign certification on the last page upon completion.

**Section Updates:**

**Section 1: Treatment Plant**

If the treatment plant location has changed then provide a new location map below. This can be a county roadmap or a GIS-produced map. Please use the area below to provide relevant details, or to indicate that no change has occurred.

Click here to enter text.

**Section 2: Water Withdrawal and Water Quality**

If there have been changes in water withdrawal rates or water quality since the last submittal, provide a discussion of the relevant details in the space below (include new Water Withdrawal Permit Number if applicable). Include supporting documentation as an attachment.

Click here to enter text.

**Section 3: Change or Modification to Groundwater Source**

If the system has changed or modified the wells or springs being used, provide the following: 1) a description of changes/modifications; 2) copies of the relevant form(s) (Kentucky Water Well Record, Well Maintenance & Plugging Record, Well Inspection Form or Spring Inventory Record); and 3) any other information relating to well construction (i.e., installation logs, driller's logs, lithological or geophysical logs), below.

Click here to enter text.

**Section 4 (REQUIRED): Planning Team**

Effective water supply protection requires community involvement and public awareness. Identify the planning team consisting of a leader and at least two team members, with their respective titles, below.

****Leader:****

Click here to enter members with titles.

****Team Members:****

Click here to enter members with titles.

**Section 5: WHPA Delineation**

If the system is revising a Wellhead Protection Area (WHPA) delineation, or if a new groundwater source has been added since the last submittal, provide a site-specific description of the local geology and aquifer. Include references for published literature. Provide a summary of any aquifer tests (i.e. pumping tests, slug tests, tracer tests), including data gathering and evaluation methods. Show calculations and supporting data for each WHPA delineated or revised. Include the detailed hydrogeologic report as an attachment.

Click here to enter text.

**Section 6 (REQUIRED): WHPA Map**

Provide a WHPA map that shows each groundwater source labeled with the appropriate AKGWA #, all protection zones identified and the Contaminant Source Inventory (CSI) point locations. If no changes have occurred since the last submittal, then a copy of the most recent WHPA/CSI map can be resubmitted. To view the most recent delineations for your system, please visit the [Source Water Protection Viewer](https://bit.ly/SWPViewer). Please contact program staff for assistance.

Click here to enter text.

**Section 7 (REQUIRED): Contaminant Source Inventory**

Provide an updated CSI in table format. This can be created using the spreadsheet template provided, and copied into the space below. If no changes occurred since the last update, the table can be pulled from previous WHPP documents. Each contaminant source listed should have a Contaminant Source ID # that corresponds to the WHPA map in Section 6. The CSI table must show the susceptibility determination ranking for each contaminant source. Include a brief narrative discussion of the overall system susceptibility. For more information on potential sources of contamination, please visit the DOW’s [Web Tools for SWP Planning website](https://bit.ly/SWPWebTools). Please contact program staff for assistance.

Click here to enter text.

**Section 8 (REQUIRED): Management Strategies**

Provide a discussion of the previous and newly proposed management strategies to prevent source water contamination. This discussion must include the previous management strategies that were implemented as well as the goals that were met. Next, include any NEWLY proposed management strategies, associated goals, implementation plans and the party responsible for implementation. For information about wellhead protection strategies please visit the DOW’s [Source Water Protection Strategies website](https://bit.ly/SWPStrategies).

**Previous Management Strategy Update:**

Click here to enter text.

**Newly Proposed Management Strategies:**

Click here to enter text.

**Section 9 (REQUIRED): Contingency and WHP Planning**

Provide a description of Contingency and WHP Planning. Complete the Emergency Response Phone List, Procedures for Public Notification, identification of Potential Future Problems and the procedures to establish Alternative Water Supplies. This section must also address how often the WHPP will be reviewed and updated.

**Emergency Response Phone List**

Fill in all Blanks and Phone Numbers with appropriate information.

|  |  |
| --- | --- |
| **Local Emergency Response** | **Phone Number** |
| Plant Operator | PHONE NUMBER |
| Nearest fire department. | PHONE NUMBER |
| Nearest city police or law enforcement | PHONE NUMBER |
| COUNTY | PHONE NUMBER |
| Local Emergency Dispatch  Click here to enter text. | PHONE NUMBER |

|  |  |
| --- | --- |
| **State and Federal Assistance** | **Phone Number** |
| Kentucky DOW (Frankfort) | PHONE NUMBER |
| Kentucky DOW Associated Field Office (FO)  ENTER FO NAME | PHONE NUMBER |
| Kentucky Environmental Response Team  24 hour response line | (502) 564-2380  (800) 928-2380 |
| Kentucky State Fire Marshall | (502) 573-0382 |

|  |  |
| --- | --- |
| **Any Other Pertinent Contacts** | **Any Other Pertinent Numbers** |
| Click here to enter text. | PHONE NUMBER |
| Click here to enter text. | PHONE NUMBER |
| Click here to enter text. | PHONE NUMBER |

**Procedures for Public Notification:**

In the event of a water system emergency that would threaten the health or life of the public, use the following procedure. Prepare and broadcast an advisory, including directions for the public. Describe the public notification process and provide contacts for those media outlets. If the system uses methods other than traditional media please list them.

Click here to enter text.

|  |  |
| --- | --- |
| **Newspaper, Television, and Radio Stations** | **Phone Numbers** |
| Click here to enter text. | PHONE NUMBER |
| Click here to enter text. | PHONE NUMBER |

**Potential Future Problems:**

Describe the *most likely* scenarios that could threaten the water supply.

Click here to enter text.

**Alternative Water Supply (Short and Long Term):**

Describe the short term and long-term water supply alternatives that address each of the potential future problems identified above. List all current interconnections with other water systems. Discuss the capacity of each potential alternative water supply to sustain normal operations.

Click here to enter text.

**Schedule for Update and Review:**

The Wellhead Protection Plan will be reviewed regularly and updated every five years as required by regulation.

**Section 10 (REQUIRED): Copies of Public Notices and Education Materials**

Provide copies of wellhead protection public notices and education materials distributed.

Click here to enter text.

**Section 11 (REQUIRED): Public Meeting Documentation\*\*\***

Provide the record of WHPP public meeting attendance, minutes and comments.

Click here to enter text.

\*\*\*Non-Community Water Systems are not required to have public meetings for 5-year updates, but must post a public notice in a conspicuous place. A public notice template is provided as a separate document. However, public input and associated documentation are encouraged. Please contact program staff if you have any questions.

**Certification Signature (TO BE COMPLETED BY PLANNING REPRESENTATIVE):**

"I certify that this document and all attachments were prepared under my direction or supervision. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete."

**Signature:**  **Date:** Click here to enter text.

**Printed Name/Title:** Click here to enter text.

**Assistance:**

For any assistance, please contact Wellhead Protection Staff:

Chip Zimmer

(502) 782-7141

Edward.Zimmer@ky.gov

Dale Booth

(502) 782-6895

Dale.Booth@ky.gov

**Please sign and return completed form to:**

Kentucky Division of Water

Watershed Management Branch

Attention: Chip Zimmer

300 Sower Boulevard, 3rd Floor

Frankfort, Kentucky 40601

or [Edward.Zimmer@ky.gov](mailto:Edward.Zimmer@ky.gov)