



Energy and Environment Cabinet

DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WATER
WATERSHED MANAGEMENT BRANCH
200 FAIR OAKS LN
FRANKFORT, KENTUCKY 40601
TELEPHONE NUMBER (502) 564-3410
FAX NUMBER (502)564-9636

Wellhead Protection Plan

PHASE II FORM

SYSTEM NAME _____ PWS ID _____

GENERAL INSTRUCTIONS

- **APPLICABILITY** - This form may be used to comply with the Phase II submittal requirements of the Kentucky Wellhead Protection Program.
- **ASSISTANCE** - Questions regarding this form may be directed in writing to the Division of Water, Watershed Management Branch at the address listed above, or by calling (502) 564-3410.
- **SUBMISSION** - Please type or print legibly. Complete all sections of this form. However, if you feel an item is not applicable to your system, please contact the Wellhead Protection Program to discuss its applicability. The completed form should be sent to "Wellhead Protection Coordinator" at the address listed above.
- **LAWS AND REGULATIONS** - This form is intended as guidance for compliance with 401 KAR 4:220 Section 6(6)(e). Completion and submittal of this form in no way constitutes approval of your wellhead protection plan or any other plan required by 401 KAR 4:220 or 401 KAR 5:037.

A. GENERAL INFORMATION

Water Supplier: _____

Contact Person: _____

Address: _____

Phone No.: _____

FAX No.: _____

PWS ID#: _____ County: _____

Local Planning Representative: _____

Address: _____

Phone No: _____

B. STEP 3: IDENTIFY POTENTIAL CONTAMINANT SOURCES

- Provide, as **Attachment 1**, a map showing the delineated WHPAs and:
 - 1) The locations of potential contaminant sources within each WHPA. Each contaminant source must be identified by a unique reference number which corresponds to the Local ID No. on the Wellhead Protection Contaminant Inventory Form completed for each source;
 - 2) A Wellhead Protection Contaminant Inventory Form for each mapped contaminant source;
 - 3) Rationale for the inventory methods that were used; and
 - 4) Determine the Susceptibility Ranking for each Contaminant source;
 - 5) Review, modification and update procedures.

C. STEP 4: DEVELOP MANAGEMENT STRATEGIES

- Provide, as **Attachment 2**, detailed management plans for each WHPA. The management plans should include:
 - 1) A description of existing contaminant source management programs;
 - 2) Proposed management strategies for each WHPA;
 - 3) The rationale for selecting management strategies to control potential sources of contamination within each WHPA;
 - 4) Identification of the responsible party(s) for implementing management plans;
 - 5) Proposed local Wellhead Protection compliance and enforcement procedures; and
 - 6) Review, modification and update procedures for management plans.

D. STEP 5: PLAN FOR THE FUTURE

- Provide, as **Attachment 3**, a narrative discussing contingency and WHP planning. The narrative should contain:
 - 1) A recall roster listing the chain of command to be used in the event of an emergency;
 - 2) Procedures to establish short term and long term water supplies;
 - 3) Procedures for public communication during an emergency;
 - 4) A schedule for review and update of your WHP plan;
 - 5) Identify future problems and develop solutions.

E. PUBLIC INVOLVEMENT

- Provide, as **Attachment 4**, copies of all public notices regarding Phase II WHP efforts.
- Provide, as **Attachment 5**, public comments and records of attendance from public meetings concerning Phase II WHP efforts.

F. IMPLEMENTATION SCHEDULE

- Provide, as **Attachment 6**, a schedule for implementing the proposed management strategies.

CERTIFICATION: (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: _____

Name (typed or printed) _____

Title: _____