

Wellhead Protection Plan Update for

Name of Water System

PSWID Number

Date

Potential Contaminant Source Inventory		
Yes	No	Categories
<input type="checkbox"/>	<input type="checkbox"/>	Transportation Category Changes (Highway, railroad, Truck Terminals, Railroad Yards, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Discharges or Wastewater Collection System Changes (Septic Systems, Sewer Lines, Sludge Spreading Operations, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Industrial Changes (Fuel Tanks, Drum Storage, Land Fills, Gas Stations, Auto Repair, Machine Shops, Manufacturing Facilities etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Agricultural Changes (Farming, Hog or Cattle Lots, Nursery, Golf Courses, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Geological Settings Changes (Sink Holes, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Commercial/Residential Changes (Laundry Mats, Car Washes, Dry Cleaning, Retail Areas, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Other Changes (Cemeteries, Dump Sites, Abandoned Wells, Junk Yards, Mining Areas etc.)
If you selected Yes on any of the above, Explain the changes below and submit updated map		
Explanation of Changes:		
Wellhead Plan/Contingency Plan Review		
Yes	No	Plan
<input type="checkbox"/>	<input type="checkbox"/>	Have the agencies you notified for wellhead protection addressed in your plan changed? If yes, you need to send a copy of the wellhead area map and letter requesting assistance in wellhead protection.
<input type="checkbox"/>	<input type="checkbox"/>	Is there a new wellhead contact person for this system?
<input type="checkbox"/>	<input type="checkbox"/>	*Have you added any new wells or springs or modified the pump rate?
<input type="checkbox"/>	<input type="checkbox"/>	*Have you removed and properly sealed any wells or springs?
Yes	No	Contingency Plan
<input type="checkbox"/>	<input type="checkbox"/>	*Any new emergency connections to additional water supplies?
<input type="checkbox"/>	<input type="checkbox"/>	*Any new water supplies needed?
<input type="checkbox"/>	<input type="checkbox"/>	Does your emergency plan need to be updated?
If you answered Yes to any of the questions with an asterisk (*), you must submit a revised plan.		
Method of Wellhead Protection		
Yes		
<input type="checkbox"/>	Wellhead Protection Ordinance or Resolution	
<input type="checkbox"/>	Public Education (Consumer Confidence Report, etc.)	
<input type="checkbox"/>	Other Means of Protection	Explain:

I certify that the information provided in this update is accurate to the best of my knowledge.

Signature of wellhead protection contact person

Complete an updated notification roster on back side



Notification Roster for _____
Name of Water System

Contact Name - Position	Phone Number #1 <small>Include the Area Code</small>	Phone Number #2 <small>Include the Area Code</small>

Send a copy of the completed WHP Update form to:

**Scotty Sorrells
Wellhead Protection Coordinator
Department of Environment and Conservation
Division of Water Resources
William R. Snodgrass Tennessee Tower
312 Rosa L. Parks Avenue, 11th Floor
Nashville, TN 37243**

And your local Environmental Field Office.

