



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: 2/19/14 SC Dam Inventory Number D. 3133 County: Anderson
Dam Name: Haven of Rest 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): Haven of Rest Rescue Mission

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 466

City: Anderson State: SC Zip: 29622

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 31' 06" N Longitude: -82° 33' 24" W Tax map # (list all): 201-00-05-010-000

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/30/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 2/19/14 SC Dam Inventory Number D 3134 County: Anderson
Dam Name: Clinkscapes 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): Sara S. + Harold Clinkscapes Jr

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 667

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 303 McDaniel Rd. off Hwy 118

Latitude: 34° 29' 06" N Longitude: -82° 32' 24" W Tax map # (list all): 202-00-01-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/30/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 2/19/14 SC Dam Inventory Number D, 3135 County: Anderson
Dam Name: JMH 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): James M Horton III

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 350 McDaniel Rd.

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 221 Horton Rd.

Latitude: _____° _____' _____" N Longitude: - _____° _____' _____" W Tax map # (list all): 202-00-01-006

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M Vinson
Signature

5/30/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 12/2/13 SC Dam Inventory Number D 2848 County: Anderson
 Dam Name: Pelzer Mills 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): Lower Pelzer Hydro Co., Inc.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 512

City: Greenville State: SC Zip: 29602-0512

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Dunlap Rd., Williamston, SC

Latitude: 34° 37' 00" N Longitude: -82° 26' 48" W Tax map # (list all): 259 000 2001

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.

<u>Hannah M. Vinson</u> Printed Name of Regional Inspector	<u>Hannah M. Vinson</u> Signature	<u>6/3/14</u> Date of Signature
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_____ Printed Name of BOW Engineer	_____ Signature	_____ Date of Signature
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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: 12/2/13 SC Dam Inventory Number D 3140 County: Anderson

Dam Name: Lollis 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): Sam Willie Lollis

Contact Person (if owner is company):

Phone: 864-859-1840 Email:

Mailing Address: 320 Maxcy Dr.

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 809 Cheddar Rd.

Latitude: 34° 34' 18" N Longitude: -82° 30' 48" W Tax map # (list all): 223 001 7010

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.

Hannah M. Vinson Printed Name of Regional Inspector

Hannah M. Vinson Signature

6/3/14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 12/13/13 SC Dam Inventory Number D 3115 County: Anderson Dam Name: Parkwood 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): Billy C. + Minnie S. Whitfield

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 703 Parkwood Dr.

City: Anderson State: SC Zip: 29625

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Parkwood Dr.

Latitude: 34 31 54 N Longitude: -82 43 06 W Tax map # (list all): 950 201030

34 32 11.46 N / -82 43 15.683 W RSF

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.

Hannah M. Vinson Printed Name of Regional Inspector

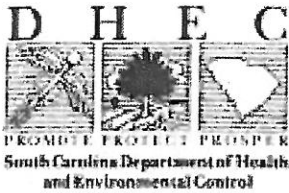
Hannah M. Vinson Signature

5/23/14 Date of Signature

Robert James Ford Printed Name of BOW Engineer

Robert J Ford Signature

6/18/14 Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
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Date of Inspection: 12/20/13 SC Dam Inventory Number D 3127 County: Anderson
Dam Name: Gro-Mor 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): Crawford Lake, LLC

Contact Person (if owner is company): Paul Kirkland

Phone: 864-918-4275 Email: _____

Mailing Address: 4300 Pelzer Hwy 143 Red Maple Circle

City: Easley State: SC Zip: 29642

(7905 Hwy 81 N.) (EFIS)
4300 Pelzer Hwy, Easley, SC 29642

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): Crawford Lake Dr. off Hwy 8

Latitude: 34° 72' 79.83" N Longitude: -82° 57' 39.7" W Tax map # (list all): 164-00-06-044

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/31/13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 12/20/13 SC Dam Inventory Number D 3130 County: Anderson
Dam Name: Brushy Creek WCD # 11A

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 D. + Donna W. Hopkins / Sidney F. Acker

Contact Person (if owner is company): Ben Wigington, Chairman Brushy Creek WCD

Phone: 803-859-4297 (EFIS) Email: _____

Mailing Address: 405 St. Paul Rd. / 323 St. Paul Rd.

City: Easley State: SC Zip: 29642

II. Site Information

A. Site Location (street address, nearest intersection, etc.): St. Paul Rd. near Brushy Creek Rd.

Latitude: 34° 77845" N Longitude: -82° 55819" W Tax map # (list all): 188-00-05-024
188-00-05-018

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

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.

Hannah M. Vinson
Printed Name of Regional Inspector

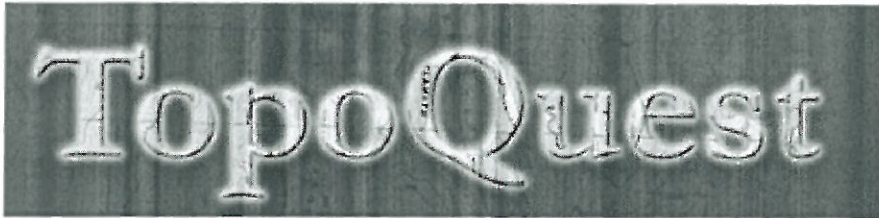
Hannah M. Vinson
Signature

12/31/13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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South Carolina Noname 04004 D-3130 Dam, South Carolina

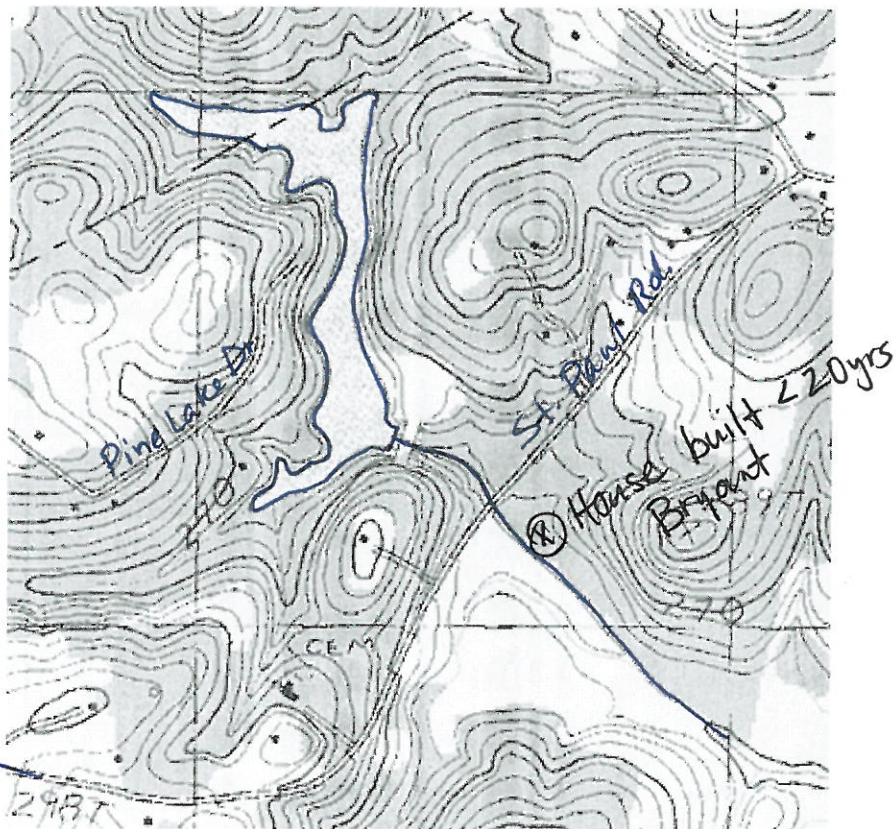
South Carolina Noname 04004 D-3130 Dam is a dam located in Anderson County, SC at N34.77845° W82.55819° (NAD83) and at an elevation of 879 ft MSL.

It can be seen on the USGS 1:24K topographic map [Easley, SC](#).

Feature Type:	Dam
Latitude:	N34.77845° (NAD83 datum)
Longitude:	W82.55819°
Elevation:	879 ft MSL
County:	Anderson County, South Carolina
USGS 24K Map:	Easley, SC
USGS 24K MRC:	34082G5

You can view this location or feature in our [Topographic Map Viewer](#) now.

Note: Coordinates displayed above are referenced to NAD83 datum.



Click on map above to begin viewing in our Map Viewer.

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Date of Inspection: 12/20/13 SC Dam Inventory Number D 3131 County: Anderson
Dam Name: Brushy Creek WCD # 17

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): Adelaide ^{Merritt} Garrett Gantt, et. al
Contact Person (if owner is company): Ben Wigington, Chairman Brushy Creek WCD
Phone: _____ Email: _____
Mailing Address: 3504 Hwy 153
City: Greenville State: SC Zip: 29611-2006

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 1001 Mt. Airy Church Rd.
2500 Old Mill Rd.
Latitude: 34° 76.512' N Longitude: -82° 53.652' W Tax map # (list all): 188-00-09-011
188-00-09-015

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.

Hannah M. Vinson Printed Name of Regional Inspector Hannah M. Vinson Signature 12/31/13 Date of Signature

Printed Name of BOW Engineer Signature Date of Signature



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Regulated Dams
Dams and Reservoirs Safety Act Regulations 72-1 through 72-9

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Date of Inspection: 12/20/13 SC Dam Inventory Number D 3137 County: Anderson
Dam Name: Brushy Creek WCD #16

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): Sherrie Kraemer Smith, et. al.

Contact Person (if owner is company): Ben Wigington, Chairman Brushy Creek WCD

Phone: _____ Email: _____

Mailing Address: 4625 Piedmont Row Dr. 413

City: Charlotte State: NC Zip: 28210-4239

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): Sitton Hill Rd. near Sellers Rd.

Latitude: 34° 78512" N Longitude: -82° 51985" W Tax map # (list all): 212-00-07-023

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/31/13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 12/20/13 SC Dam Inventory Number D 3138 County: Anderson

Dam Name: Hollen Pond Dam / Vonhollen 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): Von Hollen Investment, LLC

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 100 Andrea Circle PO Box 26417

City: Easley State: SC Zip: 29642

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 116 Von Hollen Dr.

Latitude: 34° 77' 88" N Longitude: -82° 52' 52" W Tax map # (list all): 213-00-07-001

B. Is there any evidence of new development below the dam? Yes No ~ 1/2 mile downstream

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

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/31/13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Google

116 Von Hollen Drive, Easley, SC

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116 Von Hollen Dr
Easley, SC 29642



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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: 2/4/14 SC Dam Inventory Number D 3155 313 County: Anderson Dam Name: Hopkins Pond / DHECRO 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): Rebecca + Martin Hopkins / Candice D. Davis

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 230 Anderson Rd. PO Box 929 (1028 E. Queen St.)

City: Pendleton, SC 29670 State: Pendleton, SC Zip: 29670

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Anderson Rd @ E Queen St. (Danenhowers St or Amberwood Lane)

Latitude: 34° 65344" N Longitude: -82° 75653" W Tax map # (list all): 620601009/620601003

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

C. Do you think the hazard classification should be upgraded? ___ Yes [X] 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.

Hannah Vinson Printed Name of Regional Inspector

[Signature] Signature

2/4/2014 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 2/4/14 SC Dam Inventory Number D 3112 County: Anderson
Dam Name: Three + Twenty WCD #9B

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): Randall M Griffis / Marc R + Tina M Lisenby

Contact Person (if owner is company): WB Richardson, (3 + 20 WCD)

Phone: _____ Email: _____

Mailing Address: 511 Wilson Rd / 4858 Tarlton Dr.

City: Central, SC 29630 State: Lilburn, GA Zip: 30047

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Refuge Rd @ Peach Dr.

Latitude: 34° 6' 25.11" N Longitude: 82° 7' 58.20" W Tax map # (list all): 870006026 / 870006008

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

2/5/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 2/4/14 SC Dam Inventory Number D 3113 ~~3155~~ County: Anderson
Dam Name: Clemson University Dam #1

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): Clemson Agricultural College

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 101 Cherry Rd.

City: Clemson State: SC Zip: 29631

(29634 in EFIS)

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Harper Rd. @ Lewis Smith Rd.

Latitude: 34°62844" N Longitude: -82°72153" W Tax map # (list all): 890004001

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

2/4/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



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Date of Inspection: 2/4/14 SC Dam Inventory Number D 3114 County: Anderson
Dam Name: Clemson University Pond Dam #2

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): Clemson Agricultural College
Contact Person (if owner is company): _____
Phone: 864-656-0792 Email: _____
Mailing Address: 101 Cherry Rd.
City: Clemson State: SC Zip: 29631
(EFIS: 29634)

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Harper Rd. @ Levis Smith Rd.
Latitude: 34° 62677 N Longitude: -82° 7253 W Tax map # (list all): 89000 4001

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.

Hannah Vinson Hannah M. Vinson 2/5/14
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

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: 2/19/14 SC Dam Inventory Number D 4459 County: Anderson Dam Name: David Bonner 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): Linda G. Bonner, et. al.

Contact Person (if owner is company):

Phone: Email:

Mailing Address: 1209 Shirley Dr.

City: Anderson State: SC Zip: 29621

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 619 Haynie Mill Rd.

Latitude: 34° 31' 06" N Longitude: -82° 34' 36" W Tax map # (list all): 175 000 2004

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.

Hannah Vinson Printed Name of Regional Inspector

Hannah M. Vinson Signature

4/2/14 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: 1/22/14 SC Dam Inventory Number D 4505 County: Anderson

Dam Name: Virgil E King 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): Tommy E + Roger D King

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 875 Five Forks Rd.

City: Liberty State: SC Zip: 29657

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Jameson Dr. @ Baugh Rd.

Latitude: 34° 713333N Longitude: -82° 66833" W Tax map # (list all): 113-00-03-012

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

2/5/14
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: 4/3/14 SC Dam Inventory Number D 3125 County: Anderson

Dam Name: Bailey Creek Reservoir

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): FD Gurley

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1208 N. Main St.

City: Anderson State: SC Zip: 29621

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Old Williamston Rd. between Rogers + Woodland

Latitude: 34° 52'00" N Longitude: -82° 62'667" W Tax map # (list all): 149-00-01-004-000

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

4/8/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

149-00-01-004-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner

Previous Owner

Name: GURLEY F D
Address: 1208 N MAIN ST
City, State: ANDERSON SC
Zip: 29621-0000

Name: COLONY ASSOCIATES
Address: 1208 N MAIN ST
City, State: ANDERSON SC
Zip: 29621-4729

Sales Information

Date	Book#	Page#	Price	Purchaser
4/07/2000	3713	00075	\$ 155,000.00	GURLEY F D
7/18/1983	20A	00903	\$ 215,500.00	COLONY ASSOCIATES
	17U	873		DUKE POWER CO

Property Information

Subdivision		Tax District	005
Physical Address		Market Value	256,420
M/H		Prior Value	139,244
		Tax Value	159,351
		Exempt	

Legal Description

Legal Desc 1	CP 000/000
Legal Desc 2	F000 D000 PP 090/375
Legal Desc 3	OLD WILLIAMSTON RD 29.81 AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	29.81		270	3	9920	10190	A C	01
2012	29.81		270	3	10190	10460	A C	
2011	29.81		270	3	10190	10460	A C	
2010	29.81		270	3	10190	10460	A C	



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: 4/3/14 SC Dam Inventory Number D 3265 County: Anderson

Dam Name: Ranken 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): Kay C Milton + Aileen B

Contact Person (if owner is company): Milton C. + Aileen B. Kay

Phone: Email:

Mailing Address: 121 Hammett Acres

City: Anderson State: SC Zip: 29621

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hammett Acres

Latitude: 34° 53' 33.33" N Longitude: -82° 6' 33.33" W Tax map # (list all): 122-00-02-001-000

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.

Hannah M. Vinson Printed Name of Regional Inspector

Hannah M. Vinson Signature

4/8/14 Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

122-00-02-001-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner		Previous Owner	
Name	KAY MILTON C + AILEEN B	Name	WELBORN CHARLES JR AS TRUSTEE
Address	121 HAMMETT ACRES	Address	309 S MAIN ST
City, State	ANDERSON SC	City, State	ANDERSON SC
Zip	29621-0000	Zip	29624-0000

Sales Information

Date	Book#	Page#	Price	Purchaser
10/29/2001	4424	00147	\$ 5.00	KAY MILTON C + AILEEN B
10/28/2001	4424	00145	\$ 5.00	WELBORN CHARLES JR AS TRUSTEE
4/15/1985	20M	172	\$ 110,000.00	KAY MILTON C
2/26/1985	20L	32	\$ 24,900.00	RANKIN W.P. & ROBINS ELEANOR ELIZABETH
5/30/1975	017Y	871		RANKIN W W EST
				N/A

Property Information

Subdivision		Tax District	500
Physical Address	121 HAMMETT ACRES	Market Value	442,160
M/H		Prior Value	273,850
		Tax Value	314,927
		Exempt	1

Legal Description

Legal Desc 1	CP 080/113
Legal Desc 2	F000 D000 PP 000/0000
Legal Desc 3	TR A HAMMETT ACRES 17.07

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	17.07		480	1	10860	11340	AR	01
2012	17.07		480	1	10960	11440	AR	
2011	17.07		480	1	10960	11440	AR	
2010	17.07		480	1	10960	11440	AR	

D 3265 – Ranken Pond Dam (Hammett Acres)

Date: 4/3/2014

Photographer: Hannah Vinson



1. Crest of dam.



2. Front slope of dam.



3. Emergency spillway.



4. Emergency spillway.



5. Emergency spillway.



6. Back slope of dam.



7. Outlet channel.



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: 5/13/14 SC Dam Inventory Number D 3146 County: Anderson
Dam Name: Broadmouth Creek WCD #2

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): Kathryn Pearce / Doreen Drake

Contact Person (if owner is company): Broadmouth Creek WCD

Phone: Email:

Mailing Address: 115 Rice Circle / 118 Mauldin Circle

City: Belton / Mauldin State: SC Zip: 29627 / 29662

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Belton Farms Rd. off Blake Dairy Rd.

Latitude: 34° 30' 48" N Longitude: -82° 27' 24" W Tax map # (list all): 250-00-03-012-000
250-00-03-006-000

B. Is there any evidence of new development below the dam? Yes No public road (Rice Rd)

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? X 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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/30/14
Date of Signature

Robert James Ford
Printed Name of BOW Engineer

Robert J Ford
Signature

6/18/14
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: 6/26/14 SC Dam Inventory Number D 3122 County: Anderson
Dam Name: Stein 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 William Stein et.al.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1 American Way

City: Anderson State: SC Zip: 29621

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Manse Jolly Rd. @ Sulphur Rd.

Latitude: 34° 35' 30" N Longitude: -82° 40' 42" W Tax map # (list all): 119-00-17-028

B. Is there any evidence of new development below the dam? Yes No I-85 is approx. 2000' below dam downstream of

C. Do you think the hazard classification should be upgraded? Yes No dam, 40' elev difference

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/9/14
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: 6/26/14 SC Dam Inventory Number D 4110 County: Anderson
 Dam Name: Malomson 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 & Judy Malomson

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 309 Pine Trail

City: Williamston State: SC Zip: 29697

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 36' 18" N Longitude: 82° 33' 48" W Tax map # (list all): 196-0009-010

B. Is there any evidence of new development below the dam? Yes No ~~Pine Trail Rd below dam~~

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

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.

Hannah M. Vinson
 Printed Name of Regional Inspector

Hannah M. Vinson
 Signature

7/9/14
 Date of Signature

 Printed Name of BOW Engineer

 Signature

 Date of Signature

H



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: 6/26/14 SC Dam Inventory Number D 4422 County: Anderson
 Dam Name: Burgess 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): Gerald + Deborah Perry

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 515

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 107 Claridge Pl, Crestland S/D

Latitude: 34° 35' 12" N Longitude: -82° 33' 30" W Tax map # (list all): 197-05-01-011

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.

Hannah M. Vinson
 Printed Name of Regional Inspector

Hannah M. Vinson
 Signature

7/9/14
 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: 7/17/14 SC Dam Inventory Number D 3108 County: Anderson
Dam Name: Glenn Pond Dam #2 (Benjamin Brookhart Dam 2)

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): see attached

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Lauren Flynn Dr.

Latitude: 34° 28' 42" N Longitude: -82° 44' 26" W Tax map # (list all): _____

710-407-001, 710-402-032, 710-402-031, possibly 710-402-033

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/18/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

071-04-02-031-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner		Previous Owner	
Name	HANLEY ARCHIE C	Name	HANLEY ARCHIE C + VIRGINIA G
Address	204 LAUREN FLYNN DR	Address	204 LAUREN FLYNN DR
City, State	ANDERSON SC	City, State	ANDERSON SC
Zip	29626-0000	Zip	29626-0000

Sales Information

Date	Book#	Page#	Price	Purchaser
1/10/2005	6626	00038	\$ 1.00	HANLEY ARCHIE C
7/09/1999	3438	00293	\$ 1.00	HANLEY ARCHIE C + VIRGINIA G
10/27/1998	3438	287	\$ 10.00	RESIDENTIAL FUNDING CORPORATION
10/26/1998	3438	287	\$ 10.00	RESIDENTIAL FUNDING CORPORATION
7/09/1999	3438	293	\$ 1.00	HANLEY ARCHIE C + VIRGINIA G
10/27/1998	3438	287	\$ 10.00	RESIDENTIAL FUNDING CORPORATION

Property Information

Subdivision	THE LAKES	Tax District	005
Physical Address	204 LAUREN FLYNN DR	Market Value	46,910
M/H	2	Prior Value	52,670
		Tax Value	46,910
		Exempt	1

Legal Description

Legal Desc 1	CP 113/020 PP S 544/7
Legal Desc 2	F099 D192 PP S 333/9
Legal Desc 3	LTS 31 + 31A LAUREN FLYNN DR

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013		1	600	1	1280	1880	R	01
2012		1	600	1	1510	2110	R	
2011		1	600	1	1510	2110	R	
2010		1	600	1	1510	2110	R	



Printed: Jul 18, 2014



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail									
View Taxes			View Parcel						
TAXMAP NO.			OLD TAMAP NO.			PARENT TMS NO.			
071-04-02-032-000									
Owner Information									
Current Owner					Previous Owner				
Name	SWIZDARYK JOHN MICHAEL				Name	SWIZDARYK JOHN M + MONICA L			
Address	202 LAUREN FLYNN DR				Address	202 LAUREN FLYNN DR			
City, State	ANDERSON SC				City, State	ANDERSON SC			
Zip	29626-0000				Zip	29626-0000			
Sales Information									
Date	Book#	Page#	Price	Purchaser					
9/04/2013	11115	00099	\$ 10.00	SWIZDARYK JOHN MICHAEL					
12/17/2003	5911	00035	\$ 1.00	SWIZDARYK JOHN M + MONICA L					
6/12/2002	4931	200	\$ 76,900.00	SWIZDARYK JOHN M + MONICA L					
1/11/2002	4559	188	\$ 43,500.00	V + V INVESTMENTS LTD					
9/20/2001	4381	70	\$ 79,975.00	CONSECO FINANCE SERVICING CORP					
10/29/1996	2473	143	\$ 18,000.00	CHAGNON DENNIS + KATHLEEN					
Property Information									
Subdivision	THE LAKES				Tax District	005			
Physical Address	202 LAUREN FLYNN DR				Market Value	36,730			
M/H	2				Prior Value	42,324			
					Tax Value	36,730			
					Exempt				
Legal Description									
Legal Desc 1	CP 112/090 PP S 544/7								
Legal Desc 2	F089 D192 PP S 333/9								
Legal Desc 3	LT 32 LAUREN FLYNN DR								
Assessment Totals									
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC	
2013		1	600	1	870	1470	R	01	
2012		1	600	1	1190	1790	R		
2011		1	600	1	1190	1790	R		
2010		1	600	1	1190	1790	R		

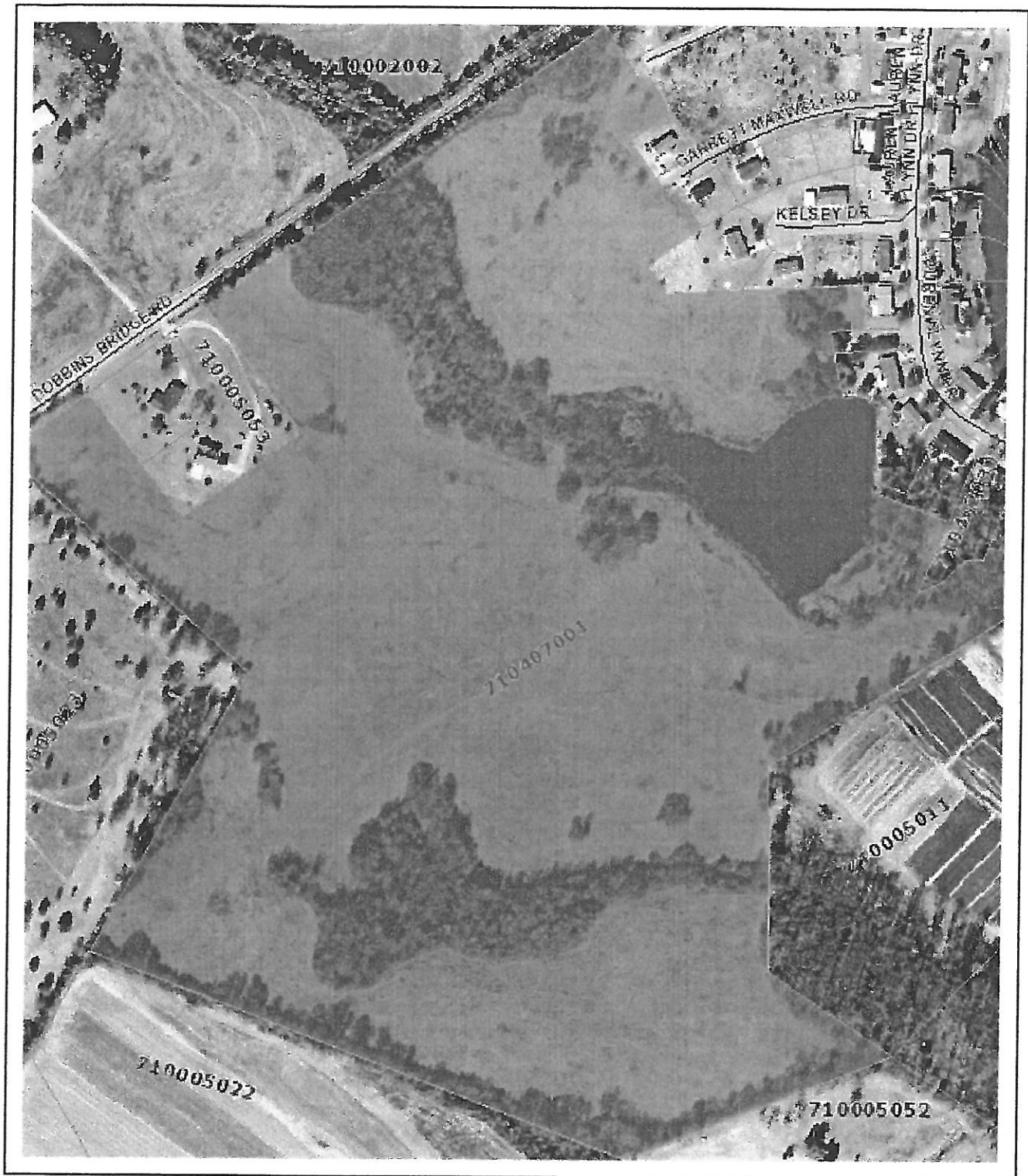


Printed: Jul 18, 2014



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail								
View Taxes			View Parcel					
TAXMAP NO.			OLD TAMAP NO.			PARENT TMS NO.		
071-04-07-001-000						071-00-05-001		
Owner Information								
Current Owner				Previous Owner				
Name	CHOICE CAPITAL GROUP INC			Name	DOBBINS BRIDGE DEVELOPMENT LLC			
Address	16507G NORTHCROSS DR			Address	16507G NORTHCROSS DR			
City, State	HUNTERSVILLE NC			City, State	HUNTERSVILLE NC			
Zip	28078-0000			Zip	28078-0000			
Sales Information								
Date	Book#	Page#	Price	Purchaser				
7/17/2008	8788	00048	\$ 1.00	CHOICE CAPITAL GROUP INC				
12/16/1998	3226	00188	\$ 800,000.00	DOBBINS BRIDGE DEVELOPMENT LLC				
8/26/1994	1942	276	\$ 1.00	LAKES INC THE				
8/25/1994	1942	274	\$ 1.00	BOOKHART BENJAMIN AYER + ETAL				
Property Information								
Subdivision	THE LAKES			Tax District	005			
Physical Address				Market Value	248,010			
M/H				Prior Value	248,010			
				Tax Value	248,010			
				Exempt				
Legal Description								
Legal Desc 1	CP S 5447							
Legal Desc 2	F000 D000							
Legal Desc 3	DOBBINS BRIDGE RD 70.86 AC							
Assessment Totals								
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	70.86		370			370	A	01
2012	70.86		370			370	A	
2011	70.86		370			370	A	
2010	70.86		370			370	A	



Printed: Jul 18, 2014

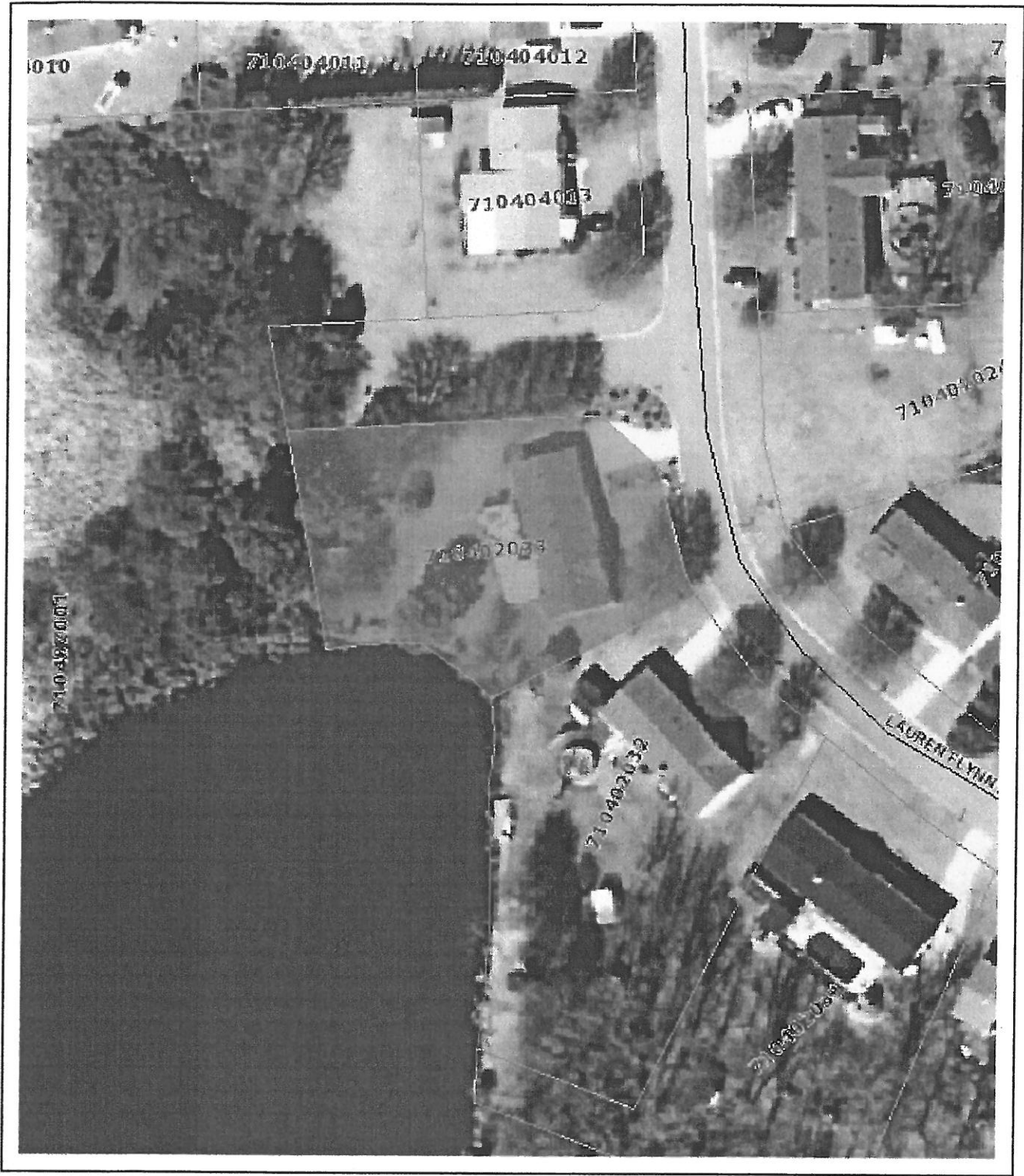


Main=>Real Property=>Property Search=>Select Record=>Property Detail

Possible property owner

Property Record Detail

View Taxes		View Parcel						
TAXMAP NO.		OLD TAXMAP NO.						
071-04-02-033-000								
Owner Information								
Current Owner		Previous Owner						
Name	EHLY BONNIE LIFE EST	Name	EHLY BONNIE					
Address	200 LAUREN FLYNN DR	Address	200 LAUREN FLYNN DR					
City, State	ANDERSON SC	City, State	ANDERSON SC					
Zip	29626-0000	Zip	29624-0000					
Sales Information								
Date	Book#	Page#	Price	Purchaser				
9/10/2008	8841	00046	\$ 5.00	EHLY BONNIE LIFE EST				
5/15/2006	7573	00241	\$ 1.00	EHLY BONNIE				
4/28/1995	2088	54	\$ 40,000.00	LAKES DEVELOPMENT CORP THE				
8/26/1994	1942	276	\$ 1.00	LAKES INC THE				
8/25/1994	1942	274		BOOKHART BENJAMIN AYER + ETAL				
Property Information								
Subdivision	THE LAKES	Tax District	005					
Physical Address	200 LAUREN FLYNN DR	Market Value	41,010					
M/H	1	Prior Value	45,220					
		Tax Value	41,010					
		Exempt	1					
Legal Description								
Legal Desc 1	CP S 544/7							
Legal Desc 2	F098 D105 PP S 333/9							
Legal Desc 3	LT 33 LAUREN FLYNN DR							
Assessment Totals								
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013		1	600	3	1040	1640	R	01
2012		1	600	3	1210	1810	R	
2011		1	600	3	1210	1810	R	
2010		1	600	3	1210	1810	R	



Printed: Jul 18, 2014



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: 7/17/14 SC Dam Inventory Number D 3109 County: Anderson
Dam Name: Glenn Pond Dam #1 (Benjamin Bookhart Dam I)

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): See Attached

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Lauren Flynn Dr.

Latitude: 34° 28' 45" N Longitude: -82° 44' 20" W Tax map # (list all): _____

710-402-007, 710-402-027, 710-402-026, possibly 710-402-025

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/18/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

071-04-02-007-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner		Previous Owner	
Name	HARPER LINDA H LIFE EST	Name	HARPER LINDA H
Address	4421 DOBBINS BRDG RD	Address	4421 DOBBINS BRIDGE RD
City, State	ANDERSON SC	City, State	ANDERSON SC
Zip	29626-0000	Zip	29626-0000

Sales Information

Date	Book#	Page#	Price	Purchaser
4/05/2010	9569	00249	\$ 5.00	HARPER LINDA H LIFE EST
12/21/2007	8438	00105	\$ 38,000.00	HARPER LINDA H
9/25/2007	8292	200	\$ 10.00	GREEN TREE SERVICING LLC
5/12/1995	2097	54	\$ 19,500.00	LEWIS RITCHIE N
4/28/1995	2088	54	\$ 40,000.00	LAKES DEVELOPMENT CORP THE
5/12/1995	2097	54	\$ 19,500.00	LEWIS RITCHIE N

Property Information

Subdivision	THE LAKES	Tax District	005
Physical Address	113 MELJO DR	Market Value	13,650
M/H		Prior Value	13,650
		Tax Value	13,650
		Exempt	

Legal Description

Legal Desc 1	CP S 544/7
Legal Desc 2	F000 D000 PP S 333/9
Legal Desc 3	LT 7 MELJO DR 2.61 AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	2.61		780	1	40	820	C	01
2012	2.61		780	1	40	820	C	
2011	2.61		780	1	40	820	C	
2010	2.61		780	1	40	820	C	36



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail								
View Taxes			View Parcel					
TAXMAP NO.			OLD TAMAP NO.			PARENT TMS NO.		
071-04-02-027-000								
Owner Information								
Current Owner				Previous Owner				
Name	FIRST CREEK ACQUISITIONS LLC			Name	ALLAIRE JEFFREY R			
Address	6004 HWY 24			Address	6 BELLINGHAM RD			
City, State	TOWNVILLE SC			City, State	BLACKSTONE MA			
Zip	29689-0000			Zip	1504-0000			
Sales Information								
Date	Book#	Page#	Price	Purchaser				
10/31/2012	10671	00309	\$ 139,000.00	FIRST CREEK ACQUISITIONS LLC				
9/22/2011	10169	00001	\$ 25,555.00	ALLAIRE JEFFREY R				
10/29/2010	9906	160	\$ 85,598.00	FEDERAL NATIONAL MORTGAGE ASSOC				
4/21/2003	5406	289	\$ 76,100.00	KELLY LARRY O + MILDRED				
11/25/1996	2493	205	\$ 5,000.00	DIMMICK TIMOTHY J + MICHELLE A				
8/07/1995	2154	290	\$ 40,000.00	LAKES DEVELOPMENT CORP THE				
Property Information								
Subdivision	THE LAKES			Tax District	005			
Physical Address	205 LAURA FLYNN DR			Market Value	10,000			
M/H				Prior Value	10,000			
				Tax Value	10,000			
				Exempt				
Legal Description								
Legal Desc 1	CP S 544/7							
Legal Desc 2	F179 D148 PP S 333/9							
Legal Desc 3	LT 27 LAUREN FLYNN DR							
Assessment Totals								
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013		1	600			600	C	25
2012		1	600			600	C	
2011		1	600			600	C	28
2010		1	400			400	R	



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

071-04-02-026-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner		Previous Owner	
Name	FIRST CREEK ACQUISITIONS LLC	Name	ALLAIRE JEFFREY R
Address	6004 HWY 24	Address	6 BELLINGHAM RD
City, State	TOWNVILLE SC	City, State	BLACKSTONE MA
Zip	29689-0000	Zip	1504-0000

Sales Information

Date	Book#	Page#	Price	Purchaser
10/31/2012	10671	00309	\$ 139,000.00	FIRST CREEK ACQUISITIONS LLC
9/22/2011	10169	00001	\$ 25,555.00	ALLAIRE JEFFREY R
10/29/2010	9906	160	\$ 85,598.00	FEDERAL NATIONAL MORTGAGE ASSOC
4/21/2003	5406	289	\$ 76,100.00	KELLY LARRY O + MILDRED
8/14/1995	2160	1	\$ 18,000.00	DIMMICK TIMOTHY J + MICHELE A
8/07/1995	2154	290	\$ 40,000.00	LAKES DEVELOPMENT CORP THE

Property Information

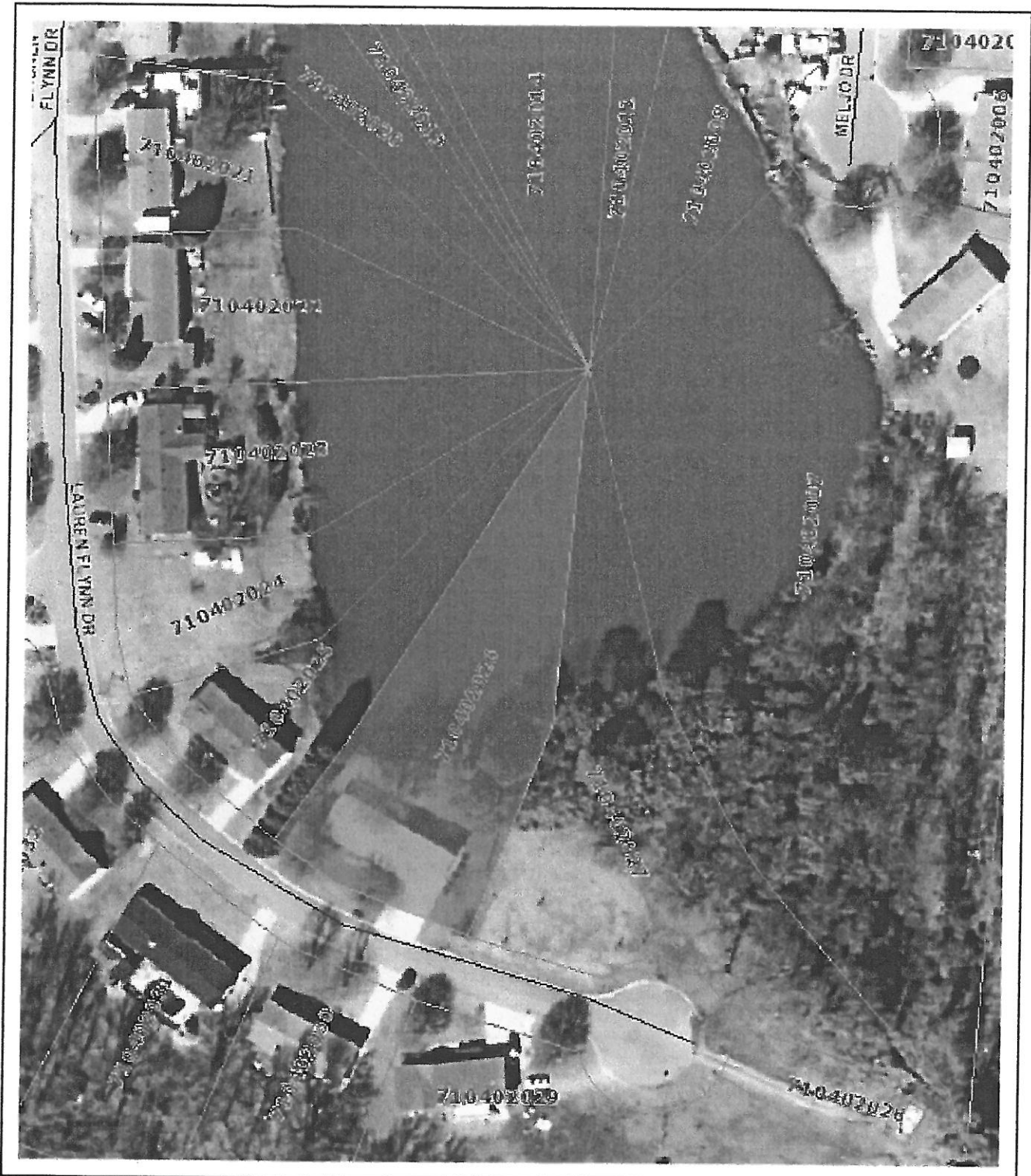
Subdivision	THE LAKES	Tax District	005
Physical Address	205 LAUREN FLYNN DR	Market Value	36,230
M/H	2	Prior Value	44,130
		Tax Value	36,230
		Exempt	

Legal Description

Legal Desc 1	CP S 544/7
Legal Desc 2	F141 D148 PP S 333/9
Legal Desc 3	LT 26 LAUREN FLYNN DR

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013		1	900	1	1270	2170	C	25
2012		1	900	1	1750	2650	C	25
2011		1	900	1	1750	2650	C	28
2010		1	600	1	1170	1770	R	



Printed: Jul 18, 2014

Main=>Real Property=>Property Search=>Select Record=>Property Detail

Possible Property Owner

Property Record Detail

View Taxes	View Parcel	
TAXMAP NO.	OLD TAMAP NO.	PARENT TMS NO.
071-04-02-025-000		

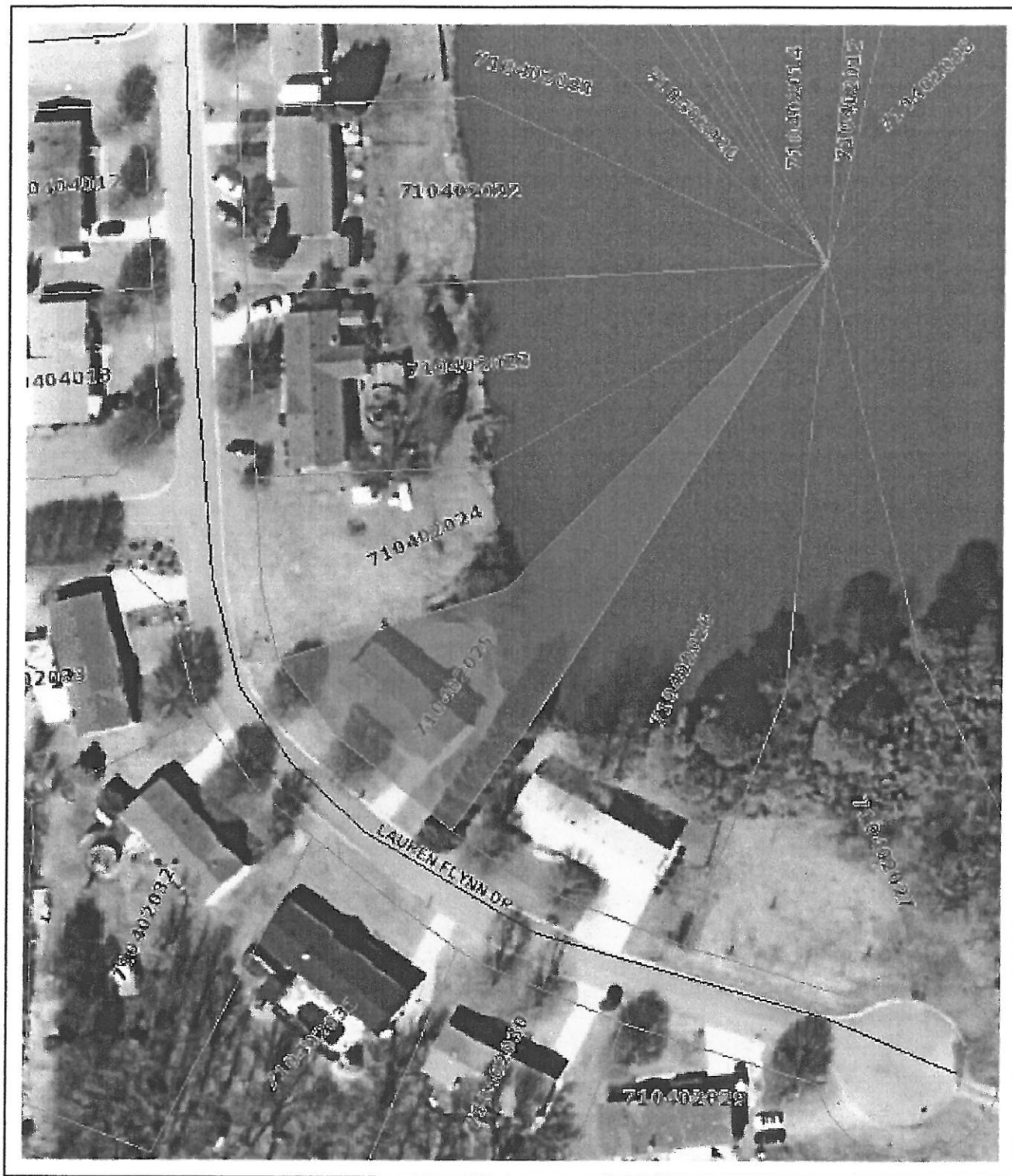
Owner Information			
Current Owner		Previous Owner	
Name	FIRST CREEK ACQUISITIONS LLC	Name	ALLEN SABRINA
Address	6004 HWY 24	Address	203 LAUREN FLYNN DR
City, State	TOWNVILLE SC	City, State	ANDERSON SC
Zn	29689-0000	Zip	29626-0000

Sales Information				
Date	Book#	Page#	Price	Purchaser
4/27/2012	10429	00260	\$ 30,001.00	FIRST CREEK ACQUISITIONS LLC
10/11/2002	5016	00073	\$ 73,500.00	ALLEN SABRINA
8/14/2002	4913	131	\$ 37,000.00	TRI COUNTY MOBILE HOME SALES INC
2/26/2002	4626	166	\$ 63,890.00	CONSECO FINANCE SERVICING CORP
9/20/1995	2186	132	\$ 18,000.00	GLANOWSKI ROBERT W + MARILYN M
8/26/1994	1942	276	\$ 1.00	LAKES INC THE

Property Information			
Subdivision	THE LAKES I	Tax District	005
Physical Address	203 LAUREN FLYNN DR	Market Value	35,820
M/H	1	Prior Value	41,620
		Tax Value	35,820
		Exempt	

Legal Description	
Legal Desc 1	CP S 544/7
Legal Desc 2	F133 D128 PP S 333/9
Legal Desc 3	LT 25 LAUREN FLYNN DR

Assessment Totals								
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013		1	900	1	1250	2150	C	01
2012		1	600	1	1060	1660	R	
2011		1	600	1	1060	1660	R	
2010		1	600	1	1060	1660	R	



Printed: Jul 18, 2014



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: 7/17/14 SC Dam Inventory Number D 3110 County: Anderson
Dam Name: Hill 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): James D Hill Inter Vivos Trust

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 13519

City: Arlington State: TX Zip: 76094

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 821 Norris Rd.

Latitude: 34° 27' 36" N Longitude: -82° 44' 24" W Tax map # (list all): 072-00-04-005

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/21/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

OLD TAMAP NO.

PARENT TMS NO.

072-00-04-005-000

Owner Information

Current Owner

Previous Owner

Name: JAMES D HILL INTER VIVOS TRUST
Address: PO BOX 13519
City, State: ARLINGTON TX
Zip: 76094-0000

Name: HILL JAMES D SR
Address: 116 CARTER HALL DR
City, State: ANDERSON SC
Zip: 29621-1904

Sales Information

Date	Book#	Page#	Price	Purchaser
9/07/2011	10150	00113	\$ 10.00	JAMES D HILL INTER VIVOS TRUST
4/29/1970	16K	00484		HILL JAMES D SR
				N/A

Property Information

Subdivision		Tax District	005
Physical Address		Market Value	108,550
M/H		Prior Value	55,452
		Tax Value	63,320
		Exempt	

Legal Description

Legal Desc 1: CP 067/066
Legal Desc 2: F000 D000
Legal Desc 3: NORRIS RD 27.27 AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	27.27		130	2	520	650	A	01
2012	27.27		5730	2	790	6520	C	
2011	27.27		130	2	310	440	A	
2010	27.27		130	2	310	440	A	



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: 7/17/14 SC Dam Inventory Number D 3111 County: Anderson
Dam Name: Chamblee Pond (Glendon C. Smith 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): Glendon C. Smith

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 190 Glen Edoen Ln

City: Anderson State: SC Zip: 29624

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): Near Hwy 29 at Trotter Rd.

Latitude: 34° 26' 36" N Longitude: -82° 44' 30" W Tax map # (list all): ~~072-00-08-021~~

720-00-80-21

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/21/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

OLD TAMAP NO.

PARENT TMS NO.

072-00-08-021-000

Owner Information

Current Owner

Previous Owner

Name	SMITH GLENDON C	Name	SMITH GLENDON C
Address	190 GLEN EDEN LN	Address	190 GLEN EDEN LN
City, State	ANDERSON SC	City, State	ANDERSON SC
Zip	29624-6747	Zip	29624-6747

Sales Information

Date	Book#	Page#	Price	Purchaser
8/05/2009	9292	00201	\$ 1.00	SMITH GLENDON C
8/23/1983	20B	00568	\$ 50,000.00	SMITH GLENDON C
				BESSIE SMITH CHAMBLEE

Property Information

Subdivision		Tax District	031
Physical Address	190 GLEN EDEN LANE	Market Value	163,410
M/H		Prior Value	90,433
		Tax Value	101,908
		Exempt	1

Legal Description

Legal Desc 1	CP 000/000 PP 090/529
Legal Desc 2	F000 D000 PP 118/535
Legal Desc 3	TR 1A+AC GLEN EDEN LN 69.62AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	47.12		290	3	880	1170	AR	01
2012	47.12		230	3	890	1120	AR	
2011	47.12		230	3	880	1110	AR	
2010	47.12		230	3	880	1110	AR	



Printed: Jul 21, 2014



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: 7/17/14 SC Dam Inventory Number D 3116 County: Anderson
Dam Name: Dobbins 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): Anderson County

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 8002

City: Anderson State: SC Zip: 29602

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Richland Dr.

Latitude: 34° 27' 25" N Longitude: -82° 41' 57" W Tax map # (list all): 980-005-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/18/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

098-00-05-001-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner		Previous Owner	
Name	ANDERSON COUNTY	Name	MICHELIN NORTH AMERICA INC
Address	PO BOX 8002	Address	PO BOX 19001
City, State	ANDERSON SC	City, State	GREENVILLE SC
Zip	29622-0000	Zip	29602-9001

Sales Information

Date	Book#	Page#	Price	Purchaser
12/11/2009	9486	00181	\$ 5,646,646.00	ANDERSON COUNTY
3/31/2000	3698	00174	\$ 21,180.00	MICHELIN NORTH AMERICA INC

Property Information

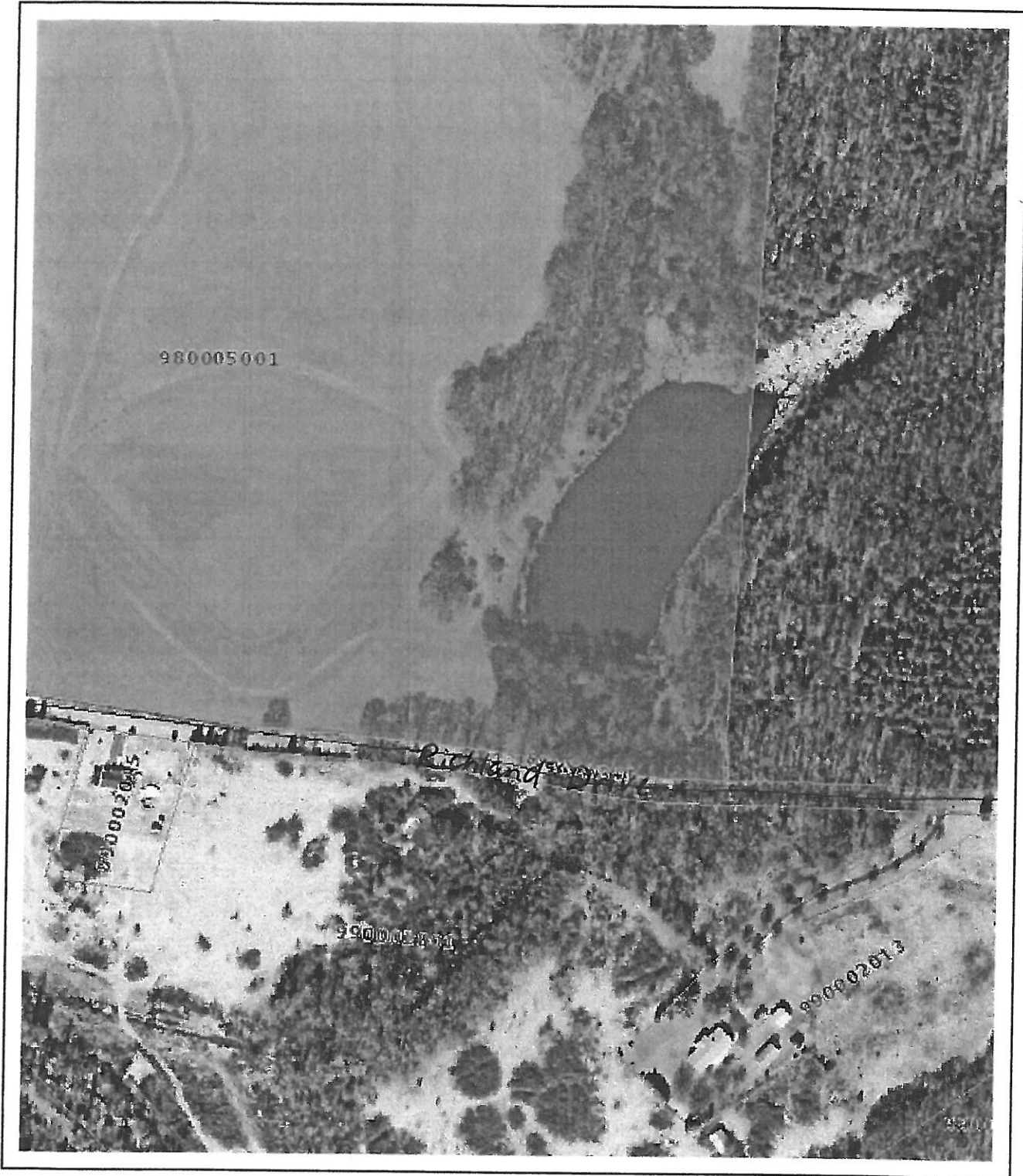
Subdivision		Tax District	005
Physical Address	1 BIB WAY	Market Value	
M/H		Prior Value	
		Tax Value	
		Exempt	7

Legal Description

Legal Desc 1	CP S 1114/3 PP S 1077/1+2
Legal Desc 2	F000 D000 PP 063/274
Legal Desc 3	BIB WAY 752.53 AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013								
2012								
2011								
2010								



Printed: Jul 18, 2014



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: 7/17/14 SC Dam Inventory Number D 3117 County: Anderson
Dam Name: Strickland 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): Joseph Leon Turnage + Beverly Player

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 415 Twelfth Place

City: Vero Beach State: FL Zip: 32962

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hwy 29 at Trump Pointe

Latitude: 34° 26' 56" N Longitude: -82° 42' 46" W Tax map # (list all): 990-00-50-13

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/21/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO.

099-00-05-013-000

OLD TAMAP NO.

PARENT TMS NO.

Owner Information

Current Owner

Previous Owner

Name: TURNAGE JOSEPH LEON + BEVERLY PLAYER
Address: 415 TWELFTH PLACE
City, State: VERO BEACH FL
Zip: 32962-0000

Name: STRICKLAND BARBARA D
Address: 118 CRESENT COVE
City, State: STARR SC
Zip: 29684-0000

Sales Information

Date	Book#	Page#	Pnce	Purchaser
5/27/2011	10039	00018	\$ 50,000.00	TURNAGE JOSEPH LEON + BEVERLY PLAYER
8/06/1992	1436	00224	\$ 1.00	STRICKLAND BARBARA D
11/26/1979	19F	595		STRICKLAND JAMES M EST
				STRICKLAND CLIFFORD

Property Information

Subdivision		Tax District	031
Physical Address	1024 TRUMP PT	Market Value	50,090
M/H	1	Prior Value	50,090
		Tax Value	50,090
		Exempt	

Legal Description

Legal Desc 1	CP 085/617
Legal Desc 2	F000 D000 PP 074/03
Legal Desc 3	TRUMP POINT 16.98 AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2013	16.98		3010			3010	C	01
2012	16.98		3010			3010	C	
2011	16.98		3060			3060	C	
2010	16.98		3060			3060	C	



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: 7/23/14 SC Dam Inventory Number D 3120 County: Anderson
Dam Name: BASKIN 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): Charles Benjamin + Gale M. Dickerson

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1040 Parker Bowie Rd.

City: Iva State: SC Zip: 29655

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 19' 21" N Longitude: -82° 42' 13" W Tax map # (list all): 106-00-02-003

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/24/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail									
View Taxes			View Parcel						
TAXMAP NO.			OLD TAMAP NO.			PARENT TMS NO.			
106-00-02-003-000									
Owner Information									
Current Owner					Previous Owner				
Name	DICKERSON CHARLES BENJAMIN + GALE M				Name	STOVALL BARBARA B			
Address	1040 PARKER BOWIE RD				Address	PO BOX 413			
City, State	IVA SC				City, State	IVA SC			
Zip	29655-0000				Zip	29655-0413			
Sales Information									
Date	Book#	Page#	Price	Purchaser					
12/16/2005	7116	00311	\$ 275,000.00	DICKERSON CHARLES BENJAMIN + GALE M					
12/09/1976	18J	00114		STOVALL BARBARA B					
				N/A					
Property Information									
Subdivision					Tax District	003			
Physical Address					Market Value	179,810			
M/H					Prior Value	76,090			
					Tax Value	87,204			
					Exempt				
Legal Description									
Legal Desc 1	CP S 1579/08								
Legal Desc 2	F000 D000 PP 049/063								
Legal Desc 3	TR 1 PARKER BOWIE RD 74.09 AC								
Assessment Totals									
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC	
2013	74.09		360	1	80	440	A	01	
2012	74.09		360	1	80	440	A		
2011	74.09		360	1	80	440	A		
2010	74.09		360	1	80	440	A		



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: 7/23/14 SC Dam Inventory Number D 3136 County: Anderson
Dam Name: Hall 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): MREAD, Inc.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 427

City: Piedmont State: SC Zip: 29673

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hall Rd

Latitude: 34° 20' 58" N Longitude: -82° 32' 41" W Tax map # (list all): 209-00-06-004

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/24/14
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: 7/23/14 SC Dam Inventory Number D 3148 County: Anderson
Dam Name: ~~Louis Michael Stone Dam~~ Griffin Pond Dam (Louis Michael Stone 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): Louis Michael Stone, Life Est.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1120 Griffin Farm Rd.

City: Honea Path State: SC Zip: 29654

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Griffin Farm Rd. @ Clubhouse Ln.

Latitude: 34° 24' 40" N Longitude: - 82° 28' 15" W Tax map # (list all): 255-00-06-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/24/14
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: 7/23/14 SC Dam Inventory Number D 3149 County: Anderson
Dam Name: J M Cowan 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): James M Cowan

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 821 Griffin Farm Rd.

City: Honea Path State: SC Zip: 29654

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Griffin Farm Rd. @ Hwy 20

Latitude: 34° 25' 5" N Longitude: -82° 27' 35" W Tax map # (list all): 255-00-08-003

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/25/14
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: 7/28/14 SC Dam Inventory Number D 3103 County: Anderson
Dam Name: McGee Pond (Double M. Farm 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): Double M. Farm, Inc.

Contact Person (if owner is company): _____

Phone: 864-225-7678 Email: _____

Mailing Address: 3450 Hwy 187 S

City: Anderson State: SC Zip: 29624

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Wilmar Rd.

Latitude: 34°26'43" N Longitude: -82°48'14" W Tax map # (list all): 510-00-70-01

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/28/14
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: 7/28/14 SC Dam Inventory Number D 3104 County: Anderson
Dam Name: RBE Pond #3 (J.E. Earle Pond #3)

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): Darlene S. Roach

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 87

City: Starr State: SC Zip: 29684

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hwy 187 @ Hwy 29

Latitude: 34°24'12" N Longitude: -82°46'59" W Tax map # (list all): 530-00-10-~~15~~16

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/28/14
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: 7/28/14 SC Dam Inventory Number D 3105 County: Anderson
Dam Name: RBE Pond #1 (Earle Pond #1)

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): Darlene S Roach

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 87

City: Starr State: SC Zip: 29684

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 23' 47" N Longitude: -82° 46' 55" W Tax map # (list all): 530-00-10-16

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/28/14
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: 7/28/14 SC Dam Inventory Number D 3106 County: Anderson
Dam Name: RBE Pond #2 (Earle Pond #2)

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): Maynard D. + Christina P. Barker III

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 6 McIntosh Rd.

City: Hilton Head State: SC Zip: 29926

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 4939 Hwy 87 S @ Rainey Rd.

Latitude: 34° 23' 25" N Longitude: -82° 46' 49" W Tax map # (list all): 530-00-00-17

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/28/14
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: 7/28/14 SC Dam Inventory Number D 3118 County: Anderson
Dam Name: Hayes Pond (Champion International 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): Marshane Properties LLC

Contact Person (if owner is company): Bea Gordenwaley

Phone: _____ Email: _____

Mailing Address: 330 Garden Way

City: Anderson State: SC Zip: 29625

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Martin Rd.

Latitude: 34° 25' 9" N Longitude: -82° 43' 6" W Tax map # (list all): 010-00-20-02

101-00-04-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

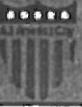
Hannah M. Vinson
Signature

7/28/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

View Taxes	View Parcel	
TAXMAP NO.	OLD TAMAP NO.	PARENT TMS NO.
101-00-04-001-000		

Owner Information			
Current Owner		Previous Owner	
Name	MARSHANE PROPERTIES LLC	Name	HUDSON JANE H
Address	330 GARDEN WAY	Address	330 GARDEN WAY
City, State	ANDERSON SC	City, State	ANDERSON SC
Zip	29625-0000	Zip	29625-0000

Sales Information				
Date	Book#	Page#	Price	Purchaser
7/23/2008	8838	00232	\$ 1.00	MARSHANE PROPERTIES LLC
9/01/1995	2174	00181	\$ 5,844.00	HUDSON JANE H
8/31/1995	2174	178	\$ 5,844.00	HUDSON JANE H + ANNA KATHRYN NELSON
8/30/1995	2174	175	\$ 5,844.00	HUDSON JANE H + ETAL
8/29/1995	2174	172	\$ 17,534.00	HUDSON JANE H + ETAL
8/28/1995	2174	169	\$ 35,068.00	HUDSON JANE H + ETAL

Property Information			
Subdivision		Tax District	031
Physical Address		Market Value	283,380
M/H		Prior Value	141,690
		Tax Value	162,944
		Exempt	

Legal Description	
Legal Desc 1	CP S 544/4 PP 014/236
Legal Desc 2	F000 D000 PP 013/131
Legal Desc 3	MARTIN RD 177.11 AC

Assessment Totals								
YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RA/CD	RC
2013	177.11		740			740	A	01
2012	177.11		740			740	A	
2011	177.11		740			740	A	
2010	177.11		740			740	A	20



**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: 7/28/14 SC Dam Inventory Number D4430 County: Anderson
 Dam Name: Neil Richardson 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): Hagood O'Neil Richardson, II

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 505 Murphy Rd.

City: Anderson State: SC Zip: 29626

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 27' 40" N Longitude: -82° 46' 36" W Tax map # (list all): 049-00-05-007
049-00-05-009

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

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

7/28/14
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: 8/28/14 SC Dam Inventory Number D 3150 County: Anderson
Dam Name: Broadmouth Creek WCD #4 (SCNONAME 04011)

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): High point Holdings, LLC

Contact Person (if owner is company): Broadmouth Creek WCD, Glenn Stevens

Phone: _____ Email: _____ Chairman

Mailing Address: 938 Simpson Rd.

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): C-18-55, Look Rd, off Hamby Rd.

Latitude: 34° 28' 58" N Longitude: -82° 25' 26" W Tax map # (list all): 266-00-09-002

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/29/14
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: 8/28/14 SC Dam Inventory Number D 3151 County: Anderson
Dam Name: Friddle Pond B

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 Friddle, Jr.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 12300 BHP Hwy

City: Honea Path State: SC Zip: 29654

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 27' 36" N Longitude: -82° 25' 24" W Tax map # (list all): 267-00-11-002

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/29/14
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: 8/28/14 SC Dam Inventory Number D 3152 ~~3752~~ County: Anderson
Dam Name: Friddle Pond ABA

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 Friddle, Sr + Frank Friddle, Jr

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 207

City: Honea Path State: SC Zip: 29654

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hwy 76 @ Linda Dr.

Latitude: 34° 27' 27" N Longitude: -82° 24' 56" W Tax map # (list all): 267-00-11-013
42 25' 42"

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/29/14
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: 8/28/14 SC Dam Inventory Number D 3153 County: Anderson
Dam Name: Seaton Acres Pond (SCNONAME 04026)

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): Jeffrey + Ami McGaha

Contact Person (if owner is company): Seaton Enterprises

Phone: _____ Email: _____

Mailing Address: H720 Belton Honea Path Hwy 213 Blue Barker Rd.

City: Honea Path State: SC Zip: 29654

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Blue Barker Rd @ Austin Rd

Latitude: 34° 27' 17.5" N Longitude: -82° 25' 46.5" W Tax map # (list all): 267-00-12-008

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/29/14
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: 8/28/14 SC Dam Inventory Number D 3154 County: Anderson
Dam Name: Taylor Pond Dam (Craig Campbell 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): Craig + Sharon Campbell

Contact Person (if owner is company): Richard + Mary Taylor

Phone: _____ Email: _____

Mailing Address: 109 Wilson Platt Rd. 1225 Taylor Rd.

City: Honea Path State: SC Zip: 29654

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Taylor Rd. @ Silverado Dr.

Latitude: 34° 29' 29" N Longitude: -82° 22' 41" W Tax map # (list all): 273-00-07-00A

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/29/14
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: 8/29/14 SC Dam Inventory Number D 3121 County: Anderson
Dam Name: Mulliken Pond Dam (SC NO NAME 04020)

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): Mulliken Family LP

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 4822 Old Greenville Hwy

City: Liberty State: SC Zip: 29657

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 7205 Liberty Hwy

Latitude: 34°40'36" N Longitude: -82°40'42" W Tax map # (list all): 114 00 07 008

115-00-02-009

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

Six + Twenty Rd is below dam

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.

Hannah M. Vinson
Printed Name of Regional Inspector

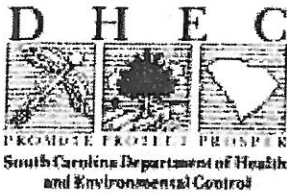
Hannah M. Vinson
Signature

9/2/14
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: 8/29/14 SC Dam Inventory Number D 3264 County: Anderson
Dam Name: Norman Canoy 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): Norman Canoy

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 404 Gillespie Rd.

City: Central State: SC Zip: 29630

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Gillespie Rd. @ Hwy 88

Latitude: 34.6983 " N Longitude: -82.7166 " W Tax map # (list all): 870002004

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

9/2/14
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: 8/29/14 SC Dam Inventory Number D 3271 County: Anderson
Dam Name: HT Double Pond Dam (Alice 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): Alice Manufacturing Co., Inc.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 369

City: Easley State: SC Zip: 29641

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Red Barn Rd off Hwy 178

Latitude: 34°43'24" N Longitude: -82°39'36" W Tax map # (list all): 112-00-02-003

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

9/2/14
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: 8/29/14 SC Dam Inventory Number D 4111 County: Anderson
Dam Name: Robert Sloan Baker 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): Janie W Baker + Susan B Connor

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 3406 Dixon Rd.

City: Anderson State: SC Zip: 29625

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Off Hwy 81 N, between Speedway + Naples Rd

Latitude: 34° 39' 36" N Longitude: -82° 34' 30" W Tax map # (list all): 167-00-08-002

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

9/2/14
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: 8/29/14 SC Dam Inventory Number D 4523 County: Anderson
Dam Name: Dr. James Halford Dam

I. Dam Owner Information

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

A. Owner/ Operator (Company or person): James G Halford Lynn H. Weldin et.al.

Contact Person (if owner is company):

Phone: 864-261-1475 Email:

Mailing Address: 600 N East St. 1007 Twelve Oaks Dr.

City: Anderson State: SC Zip: 29621

II. Site Information

A. Site Location (street address, nearest intersection, etc.): between Lockaby rd + B/20 Rd

Latitude: 34°40'6" N Longitude: -82°37'0" W Tax map # (list all): 141-00-05-011

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

C. Do you think the hazard classification should be upgraded? ___ Yes [checked] 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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

9/2/14
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: _____ SC Dam Inventory Number D _____ County: Oconee

Dam Name: Clemson ~~Herit~~ Horticulture 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.): _____

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)

Dam not built. Transferred to xpermit file. per EFIS. _____ 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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

9/3/14
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: _____ SC Dam Inventory Number D _____ County: Anderson

Dam Name: George Elrod 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): _____

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 45' 18" N Longitude: 82° 29' 42" 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)

Permit expired. Dam not constructed. Class 2 (Significant Hazard)

III. Signature

per EFIS.
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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

9/3/14
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: 9/9/14 SC Dam Inventory Number D 4524 County: Anderson
Dam Name: Paul Boiter 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): John Paul Boiter & Angela A

Contact Person (if owner is company): _____

Phone: 864-225-2251 Email: _____

Mailing Address: 604 E Shockley Ferry Rd (PO Box 13167) 29624

City: Anderson State: SC Zip: 29621

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 32' 36" N Longitude: -82° 33' 42" 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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

10/20/14
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: 9/9/14 SC Dam Inventory Number D 3266 County: Anderson

Dam Name: Union Town Truck 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): Joe Broyles Pruitt, Jr & Sr.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 313 Hickory Ridge Rd.

City: Townville State: SC Zip: 29689

II. Site Information

A. Site Location (street address, nearest intersection, etc.): off Broyles Point Rd.

Latitude: 34° 31' 6" N Longitude: -82° 50' 36" W Tax map # (list all): 029-00-08-001

~~290-00-00-001~~

029-00-02-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

10/20/14
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: 10/27/14 SC Dam Inventory Number D 3145 County: Anderson
Dam Name: Rice Mills 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): Thomas Lee Gilreath + Michael Steven

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 426 Bryant Rd.

City: Anderson State: SC Zip: 29624

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Rice 1870 Newry Rd.

Latitude: 34° 30' 48" N Longitude: -82° 27' 18" W Tax map # (list all): 250-00-04-005
52" 16.5"

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

10/27/14
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: 10/27/14 SC Dam Inventory Number D3147 County: Anderson

Dam Name: G Stevens 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): Carolyn Avis Burriss

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1027 Campbell Rd.

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): between Rice Rd. + Campbell Rd.

Latitude: 34° 30' 0" N Longitude: 82° 27' 18" W Tax map # (list all): 251-00-07-020
29' 59" 16.5"

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

pond downstream has house right behind dam. Pond is > 5 Acres

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.

Hannah M. Vinson
Printed Name of Regional Inspector

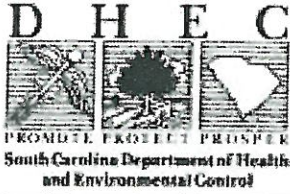
Hannah M. Vinson
Signature

10/29/14
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: 11/14/14 SC Dam Inventory Number D 3107 County: Anderson

Dam Name: Ibrahim 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): E. M. Ibrahim Julie A Ibrahim Living Trust

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box #496 1447

City: Clemson State: SC Zip: 29633

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 1539 Denver Rd.

Latitude: 34° 34' 18" N Longitude: 82° 43' 42" W Tax map # (list all): 093-00-18-001
20 39

B. Is there any evidence of new development below the dam? Yes No I-85

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

11/17/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Welcome to: **ACPASS**
 "Anderson County Public Access System and Services"
 REAL PROPERTY / VEHICLE TAX / PROPERTY TAX / COURTS / PERMITS / FORMS

Main=>Real Property=>Property Search=>Select Record=>Property Detail

Property Record Detail

[View Taxes](#)

[View Parcel](#)

TAXMAP NO. 093-00-18-001-000	OLD TAMAP NO.	PARENT TMS NO.
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Owner Information

Current Owner		Previous Owner	
Name	JULIE A IBRAHIM LIVING TRUST	Name	IBRAHIM JULIE A
Address	PO BOX 1447	Address	PO BOX 1469
City, State	CLEMSON SC	City, State	CLEMSON SC
Zip	29633-0000	Zip	29633-1469

Sales Information

Date	Book#	Page#	Price	Purchaser
5/07/2013	10936	00070	\$ 1.00	JULIE A IBRAHIM LIVING TRUST
6/12/2008	10059	00086	\$ 1.00	IBRAHIM JULIE A
6/18/1985	20N	447	\$ 450,000.00	IBRAHIM I M + JULIE A
8/15/1983	20B	425	\$ 700,000.00	STATE SAVINGS ENTERPRISES INC B
	017C	472		MULLIKIN MIKAL

Property Information

Subdivision		Tax District	004
Physical Address	1539 DENVER RD	Market Value	1,671,410
M/H		Prior Value	1,582,606
		Tax Value	1,660,997
		Exempt	

Legal Description

Legal Desc 1	CP 090/506
Legal Desc 2	F000 D000 PP 037/250
Legal Desc 3	DENVER RD 70.00 AC

Assessment Totals

YEAR	ACRES	LOTS	LAND ASMT	#BLDG	BLDG ASMT	TOT ASMT	RAT CD	RC
2014	70.00		860	5	24860	25720	AR	
2013	70.13		860	5	24860	25720	AR	01
2012	70.13		860	5	26140	27000	AR	
2011	70.13		860	5	26140	27000	AR	

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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: 11/14/14 SC Dam Inventory Number D 3128 County: Anderson

Dam Name: Anderson 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): H.G. Anderson

Contact Person (if owner is company): (Hampton G. Anderson III et. al.)

Phone: _____ Email: _____

Mailing Address: PO Box 767

City: Anderson State: SC Zip: 29622

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): Hampton Rd. @ Paulan Rd.

Latitude: 34° 37' 24" N Longitude: -82° 35' 8" W Tax map # (list all): 170-00-07-005
21 5

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

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.

Hannah M. Vinson
Printed Name of Regional Inspector

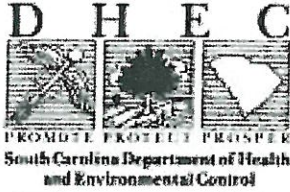
Hannah M. Vinson
Signature

11/17/14
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: 11/14/14 SC Dam Inventory Number D 4347 County: Anderson

Dam Name: Fred Linsley 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): Reeves, N Franklin

Contact Person (if owner is company): _____

Phone: 864-859-0407 Email: _____

Mailing Address: PO Box 528

City: Easley State: SC Zip: 29641

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 42' 18.5" N Longitude: 82° 43' 11.5" W Tax map # (list all): 086-00-01-004

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

11/17/14
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: 1/30/15 SC Dam Inventory Number D 3141 County: Anderson
Dam Name: Woodson 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): Woodson Lake Property Owners Association

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 3504-172 Hwy 153

City: Greenville State: SC Zip: 29611

II. Site Information

A. Site Location (street address, nearest intersection, etc.): (River Rd.) off Hwy 143 near I-85 Exit 39

Latitude: 34° 45' 26" N Longitude: -82° 27' 53" W Tax map # (list all): 238-050-10-91

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Union
Signature

1/30/15
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: 1/30/15 SC Dam Inventory Number D 3142 County: Anderson
Dam Name: Broadmouth Creek WCD Dam #8

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): Broadmouth Creek WCD Chairman

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): Hwy 247 @ Glenwood St. ExL.

Latitude: 34° 32' 12" N Longitude: -82° 28' 6" W Tax map # (list all): 249-00-03-007

B. Is there any evidence of new development below the dam? Yes No Hwy 247

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

1/30/15
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: 1/30/15 SC Dam Inventory Number D 4379 County: Anderson
Dam Name: Horace Seigler 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): Faye Seigler

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 300 Seigler Rd.

City: Pelzer State: SC Zip: 29669

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 40' 54" N Longitude: -82° 27' 51" W Tax map # (list all): 242-00-07-005
41' 1" 47

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

1/30/15
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: 1/30/15 SC Dam Inventory Number D 4473 County: Anderson
Dam Name: Jim Weisner 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 M + Tami R Stone

Contact Person (if owner is company): Weisner, James D. + Margaret H

Phone: Email:

Mailing Address: 12036 Shirley Dr 171 Danielle Dr

City: Anderson Pelzer State: SC Zip: 29621 29669

II. Site Information

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

Latitude: 34° 39' 36" N Longitude: -82° 28' 42" 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.

Hannah Vinson Printed Name of Regional Inspector

Hannah M. Vinson Signature

1/30/15 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: 1/30/15 SC Dam Inventory Number D 3144 County: Anderson
Dam Name: Chandler 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): Linda Chandler / David Lawton Callahan

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 1410 Highway 247 / 120 Callahan Dr.

City: Belton State: SC Zip: 29627

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hwy 247 @ Callahan Dr.

Latitude: 34° 32' 17" N Longitude: -82° 27' 17" W Tax map # (list all): 249-00-04-005
249-00-04-004

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M Vinson
Signature

1/30/15
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: 5/18/15 SC Dam Inventory Number D _____ County: Oconee

Dam Name: Blake Griffith 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): Patrick/Patricia Kennedy Trust

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 40

City: Tamasssee State: SC Zip: 29686

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 45' 42.5" N Longitude: -83° 2' 35" W Tax map # (list all): 161-00-06-003

B. Is there any evidence of new development below the dam? _____ Yes No Hwy 11 is located 1/4 mile below dam

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)

~~Not enough info to find.~~ 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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/18/15
~~9/13/14~~
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Topography (feet)

0 510 1020 1530 2040 ft

Oconee County Assessor

Parcel: 161-00-06-003 Acres: 66.04

Name:	KENNEDY PATRICK & PATRICIA TRUST	Land Value:	746700
Site:		Improvement Value:	0
Sale:	\$737000 on 2007-10-01 Reason=0 Qual=Q	Accessory Value:	0
Mail:	PO BOX 40 TAMASSEE, SC 29686	Total Value:	746700



Oconee County makes every effort to produce the most accurate information possible. No warranties, expressed or implied, are provided for the data herein, its use or interpretation. The maps on this site are not surveys. The assessment information is from the last certified tax roll. All data is subject to change before the next certified tax roll.
Date printed: 05/18/15 : 16:12:22



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: 5/20/15 SC Dam Inventory Number D 1659 County: Oconee
Dam Name: Hicks Pond (Jack McCormick 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): Wood Fields LP

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 1535

City: Clemson State: SC Zip: 29633

II. Site Information

A. Site Location (street address, nearest intersection, etc.): N. Horseshoe Bridge Rd., Westminster

Latitude: 34° 40' 36" N Longitude: - 83° 9' 30" W Tax map # (list all): 232-00-02-054

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)

Inspection performed on Google Maps

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/20/15
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: 5/20/15 SC Dam Inventory Number D 4582 ~~445~~ County: Oconee
Dam Name: East Village Cr Farm 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): Globe LP

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 104 Greystone Ct.

City: Seneca State: SC Zip: 29672

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Near end of Brookside Acres Rd.

Latitude: 34° 51' 38" N Longitude: -83° 8' 5" W Tax map # (list all): 081-00-05-002

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)

Inspection performed on Google Maps

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/20/15
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: 5/21/15 SC Dam Inventory Number D 1632 County: Oconee
Dam Name: Lake Cheochee 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): Lake Che-O-Hee Inc

Contact Person (if owner is company): % Don Jackson

Phone: _____ Email: _____

Mailing Address: PO Box 1007

City: Fairforest State: SC Zip: 290336

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 55' 43" N Longitude: -83° 07' 5" W Tax map # (list all): 042-00-01-003

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



PERMIT TO CONSTRUCT Onsite Wastewater System

File Nbr: **2015050023**
County: **Anderson**

Name: CLAY L. ALEXANDER

Type Facility: HOUSE

Subdivision:

Block: Lot:

Address: 539A SMITH DAIRY ROAD
WESTMINSTER, SC 29693

Site: 2001 OPRY HOUSE ROAD
STARR, SC 29684

Program Code: 360

System Code: 100

TM#: 055-00-02-012

Water Supply: PRIVATE

PERMIT TO CONSTRUCT SYSTEM SPECIFICATIONS

Daily Flow (gpd): 360

LTAR: .40

Tank Sizes (gal): Septic Tank: 1000 Pump Chamber: Grease Trap:

Trenches: Length (ft): 300 Width (in): 36 Max. Depth (in): 36 Agg. Depth (in): 14

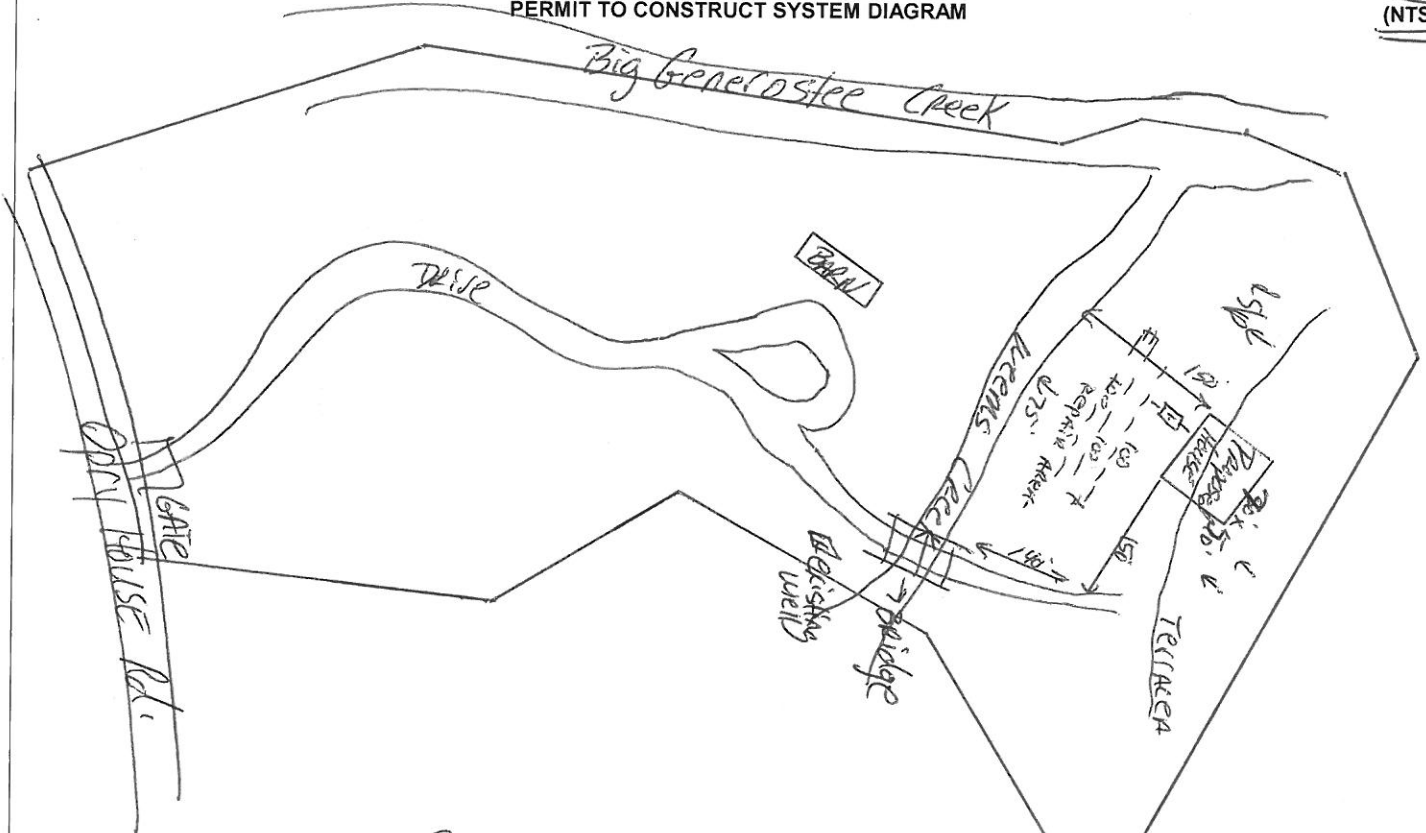
Min Pump Capacity: gpm at ft. of Head

SPECIAL INSTRUCTIONS/CONDITIONS

THIS PERMIT IS SITE SPECIFIC. ANY CHANGES TO THE SYSTEM MUST BE APPROVED BY DHEC. ALTERNATIVE TRENCH PRODUCTS APPROVED UNDER STATE RULES AND REGULATIONS MAY BE SUBSTITUTED. ANY UNAPPROVED CHANGES WILL VOID THIS PERMIT.

DRAINLINES MUST FOLLOW LEVEL SURFACE CONTOUR
USE STEP-DOWNS BETWEEN LINES AS NEEDED
DRAINLINES TO BE 10'+ ON CENTER
SYSTEM MUST BE 5'+ FROM FOUNDATION AND PROPERTY LINES
DO NOT DRIVE OR PARK OVER SEPTIC SYSTEM.
KEEP SYSTEM 75' FROM WELL AND RIVER/CREEK

PERMIT TO CONSTRUCT SYSTEM DIAGRAM



Issued/Revised By:

Sumner [Signature]

Date: 6/2/15

DHEC 1781 (01/2014)

This Permit is Appealable Under the Administrative Procedures Act.
This Permit will Expire and Become Null and Void Five (5) Years from the Issuance Date.
There may be an Additional Fee for Changes in this Permit that Require a Site Reevaluation.



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: 5/21/15 SC Dam Inventory Number D 1634 County: Oconee

Dam Name: Lake Cherokee Dam / Townes Creek Dam / Lake Isaquanna (?)

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): Thrift Group, Inc. / Cherokee Lake Fishing + Boat Club

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 2125 / PO Box 17

City: Seneca / Tamassee State: SC Zip: 29679 / 29686

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Knox Creek Rd.

Latitude: 34° 54' 30" N Longitude: -83° 3' 54" W Tax map # (list all): 062-00-01-012
13 31 052-00-01-031

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

Knox Creek Rd. just below dam

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
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: 5/21/15 SC Dam Inventory Number D 1646 County: Oconee
Dam Name: Booker's Lake

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): John Parks Booker, Jr., et. al.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 2242 Milton St.

City: Newton State: SC NC Zip: 28658

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Booker Lake Rd. @ Chalmers Mtn. Rd

Latitude: 34° 49' 36" N Longitude: -83° 14' 08" W Tax map # (list all): 106-00-01-006
29" 3' 58"

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
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: 5/21/15 SC Dam Inventory Number D 1655 County: _____

Dam Name: Oconee Creek WCD 9A

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): George Grobusky

Contact Person (if owner is company): Eddie Martin, Oconee WCD

Phone: 638-245 2213 x 3 Email: edward.martin@sc.nacdnet.net

Mailing Address: 301 W. South Broad St.

City: Walhalla State: SC Zip: 29691

II. Site Information

A. Site Location (street address, nearest intersection, etc.): E Bennett Rd., Westmister

Latitude: 34° 41' 36" N Longitude: -83° 5' 36" W Tax map # (list all): 219-00-02-013
34

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

E Bennett Rd. just below dam

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
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: 5/21/15 SC Dam Inventory Number D 1662 County: Oconee

Dam Name: Freeman Pond Dam (Harry Freeman 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): Greg K Smith / Ronald Steve Smith

Contact Person (if owner is company): Adam Gregory Smith

Phone: _____ Email: _____

Mailing Address: 203 ~~235~~ W. Freeman Rd. / 122 England St.

City: Westminster State: SC Zip: 29693

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 201 W. Freeman Rd.

Latitude: 34° 38' 6" N Longitude: -83° 7' 30" W Tax map # (list all): 276-00-01-~~050~~ 050
26.5 276-00-01-077

B. Is there any evidence of new development below the dam? Yes No House on Weldon Rd. 1/3 mil below dam

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
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: 5/21/15 SC Dam Inventory Number D 1663 County: Oconee

Dam Name: Johns 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): Otto Tysland

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 417 Beechhurst Dr.

City: Westminster State: SC Zip: 29693

II. Site Information

A. Site Location (street address, nearest intersection, etc.): 417 Beechhurst Dr.

Latitude: 34° 37' 30" N Longitude: -83° 6' 42" W Tax map # (list all): 276-00-02-006
31 38

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

house located about 1/3 mil downstream

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
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: 5/21/15 SC Dam Inventory Number D 4358 County: Oconee
Dam Name: ~~Paul +~~ Edward Brower 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): Paul + Peggy Akins

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 720

City: Tifton, State: GA Zip: 31793

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Brower Dr, off N Little River Rd.

Latitude: 34° 9' 23.95" N Longitude: -83° 0' 10.69" W Tax map # (list all): 044-00-02-011
34° 55' 20.5" 83° 0' 36"

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
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: 5/21/15 SC Dam Inventory Number D 4587 County: Oconee

Dam Name: Jocassee Ridge Reflections 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): Jocassee Ridge HOA

Contact Person (if owner is company): Rick Shirley

Phone: 864-483-7727 Email: _____

Mailing Address: PO Box 8339

City: Seneca State: SC Zip: 29678

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 55' 24" N Longitude: -82° 57' 46" W Tax map # (list all): 045-00-02-257

B. Is there any evidence of new development below the dam? Yes No 2 houses below dam on Shack Hollow Rd.

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/21/15
Date of Signature

Printed Name of BOW Engineer

Signature

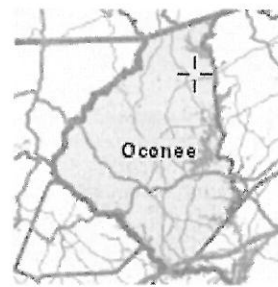
Date of Signature



Oconee County Assessor

Parcel: 045-00-02-257 Acres: 13.294

Name:	JOCASSEE RIDGE HOA	Land Value	5740
Site:	701 PINE RIDGE WAY	Improvement Val	6370
Sale:	\$1 on 2008-11-18 Vacant=0 Qual=Q	Accessory Value	0
Mail:	PO BOX 8339 SENECA, SC 29678	Total Value	12110



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Date printed: 04/11/14 : 12:41:30



**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: 5/21/15 SC Dam Inventory Number D _____ County: Oconee
 Dam Name: Dr Stuart Clarkson 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): Stuart Clarkson Garden S. Clarkson, Jr. L/E

Contact Person (if owner is company): _____

Phone: 864-882-5651 Email: _____

Mailing Address: PO Box 557 220 Spring Valley Rd.

City: Richard Tamassee State: SC Zip: 29675 29686

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 53' 30" N Longitude: 83° 2' 16" W Tax map # (list all): 063-00-01-104
1.5

B. Is there any evidence of new development below the dam? Yes _____ No Spring Valley Rd across dam

C. Do you think the hazard classification should be upgraded? Yes _____ No + house below dam on Pleasant View Rd.

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.

Hannah Vinson
 Printed Name of Regional Inspector

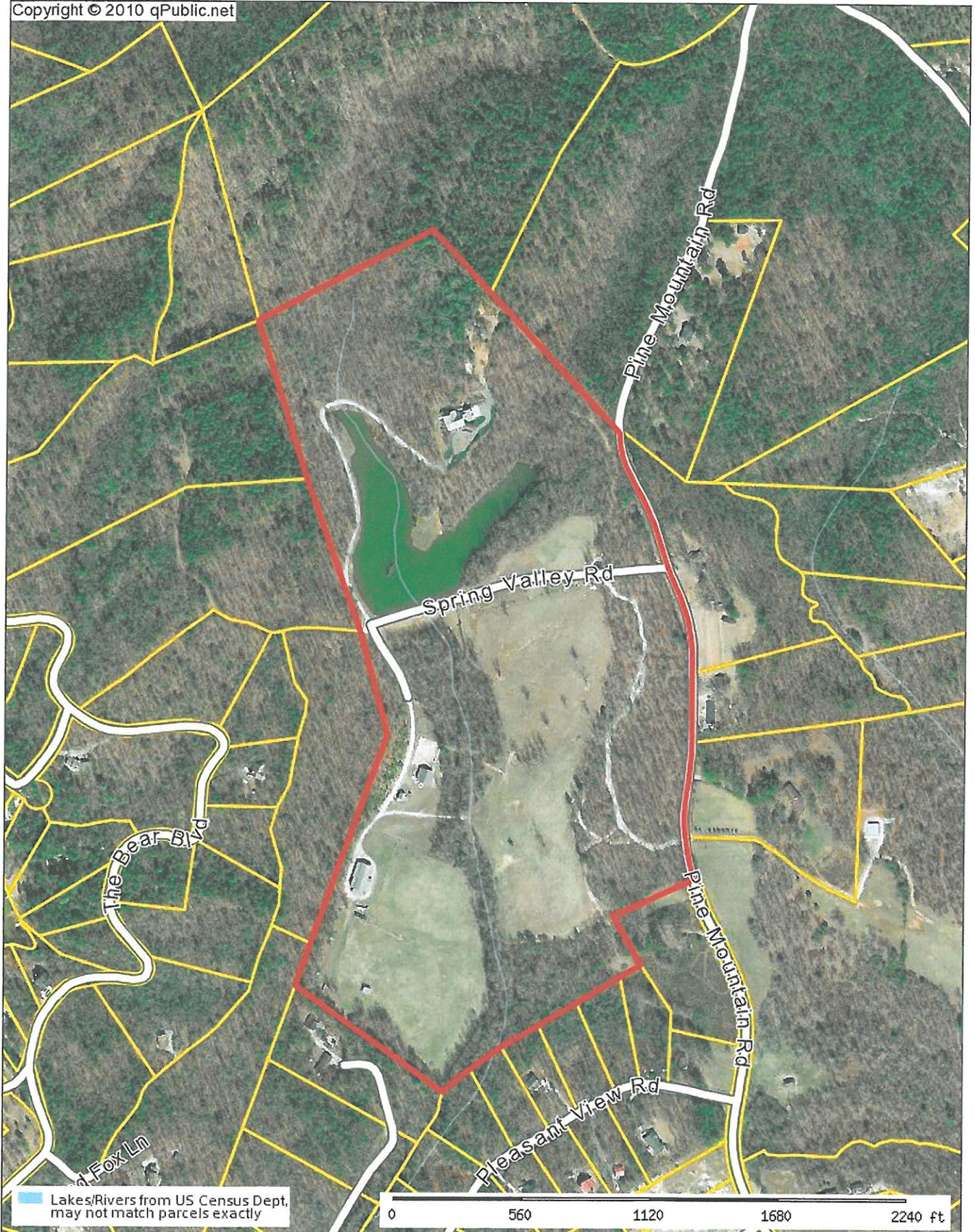
Hannah M. Vinson
 Signature

5/21/15
 Date of Signature

 Printed Name of BOW Engineer

 Signature

 Date of Signature



Lakes/Rivers from US Census Dept, may not match parcels exactly

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Date printed: 08/13/14 : 15:08:56



**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: 5/22/15 SC Dam Inventory Number D ~~1650~~ ¹⁶⁵⁰ County: Oconee
 Dam Name: Horseshoe 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): see attached
 Contact Person (if owner is company): _____
 Phone: _____ Email: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Horseshoe Lake Rd. off Damascus Church Rd.
 Latitude: 31° 46' 36" N Longitude: -83° 16' 6" W Tax map # (list all): 14-00-04-004
285 3 (see attached)

B. Is there any evidence of new development below the dam? Yes No Houses located 1/2 mile down stream
 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.

Hannah Vinson
 Printed Name of Regional Inspector

Hannah M. Vinson
 Signature

5/22/15
 Date of Signature

 Printed Name of BOW Engineer

 Signature

 Date of Signature



OONEE COUNTY

"Land Beside the Water"

Assessor's Office

Recent Sales in Neighborhood	Previous Parcel	Next Parcel	Field Definitions	Return to Main Search	Oconee Home
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Owner and Parcel Information			
Owner Name	DORJE LING BUDDHIST CENTER	Today's Date	August 14, 2014
Mailing Address	98 GOLD ST BROOKLYN, NY 11201	Parcel Number	140-00-01-039 Tax ID: 12872
Location Address	475 ORCHARD RD	Tax District	(District 009)
Legal Description	MapPlatB A851 MapPlatP 2	2012 Millage Rate	
Property Class / Property Type	/ Unclassified Farm	Acres	41.58
Neighborhood	PULASKI TWP	Parcel Map	Show Parcel Map
Generate Owner List By Radius			

2013 Tax Year Value Information		
Land Taxable Market Value	Improvement Taxable Market Value	Total Taxable Market Value
\$ 300,470	0	\$ 300,470

Land Information					
Land Type	Frontage	Effective Frontage	Effective Depth	Acres	Square Footage
75	0	0	0	40.58	1,767,665
71	0	0	0	1	43,560

Residential Building Information
No residential building information available for this parcel.

Commercial and Miscellaneous Improvement Information						
Building Type	Year Built	Eff Year Built	Length/Width/Height	Size	Grade	Sketch
No miscellaneous information available for this parcel.						

Sale Information						
Sale Date	Sale Price	Deed Book	Deed Page	Qualification Reason	Grantor	Grantee
2010-01-19	\$ 1	1756	128	Sale Does Not Match Appr.Re	LEE AMY H	DORJE LING BUDDHIST CENTER
2009-01-14	\$ 1	1700	102	Family or business relation	LEE AMY & YI LIN & WEN ZHONG WANG	LEE AMY H
2001-12-14	\$ 230,000	1189	345	Valid Arms-length sale tran	LEE AMY & YI LIN & WEN ZHONG WANG	LEE AMY & YI LIN & WEN ZHONG WANG

Recent Sales in Neighborhood	Previous Parcel	Next Parcel	Field Definitions	Return to Main Search Page	Oconee Home
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The Oconee County Assessor's Office makes every effort to produce the most accurate information possible. No warranties, expressed or implied, are provided for the data herein, its use or interpretation. Website Updated: August 13, 2014



Oconee County makes every effort to produce the most accurate information possible. No warranties, expressed or implied, are provided for the data herein, its use or interpretation. The maps on this site are not surveys. The assessment information is from the last certified taxroll. All data is subject to change before the next certified tax roll.
Date printed: 08/14/14 : 15:04:50



OCONEE COUNTY

"Land Beside the Water"

Assessor's Office

Recent Sales in Neighborhood Recent Sales in Area	Previous Parcel	Next Parcel	Field Definitions	Return to Main Search	Oconee Home
Owner and Parcel Information					
Owner Name	LAND EDWARD A	Today's Date	August 14, 2014		
Mailing Address	455 MILL SHOALS RD WESTMINSTER, SC 29693	Parcel Number	140-00-01-017 Tax ID: 12853		
Location Address	454 DAMASCUS CHURCH RD	Tax District	(District 009)		
Legal Description	MapPlatB A999 MapPlatP 7	2012 Millage Rate			
Property Class / Property Type	/ Unclassified Farm	Acres	139.02		
Neighborhood	PULASKI TWP	Parcel Map	Show Parcel Map		
Generate Owner List By Radius					

2013 Tax Year Value Information		
Land Taxable Market Value	Improvement Taxable Market Value	Total Taxable Market Value
\$ 1,518,080	\$ 282,320	\$ 1,800,400

Land Information					
Land Type	Frontage	Effective Frontage	Effective Depth	Acres	Square Footage
75	0	0	0	139.02	6,012,151

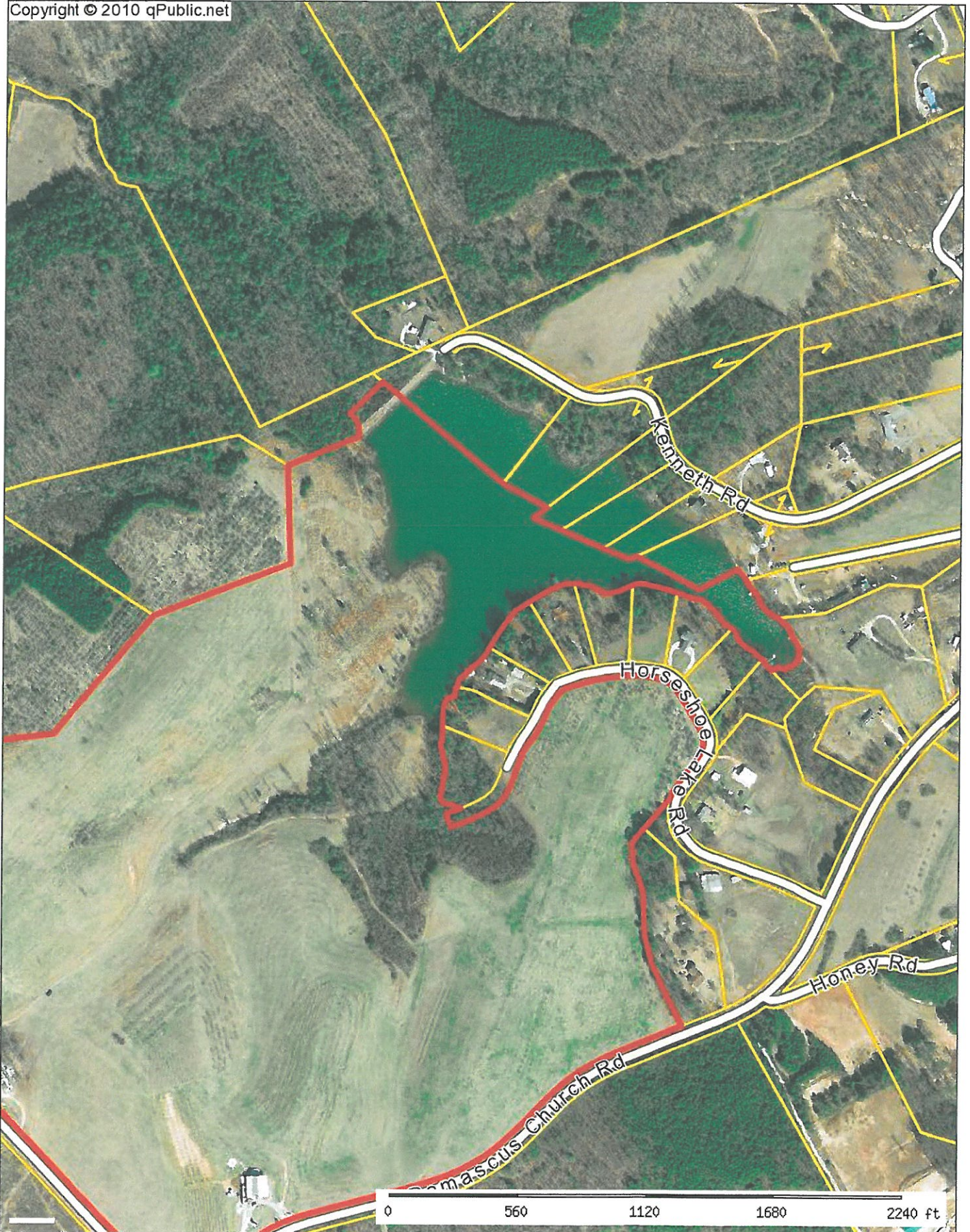
Residential Building Information	
No residential building information available for this parcel.	

Commercial and Miscellaneous Improvement Information						
Building Type	Year Built	Eff Year Built	Length/Width/Height	Size	Grade	Sketch
COMMCTR	2010	2010	0 / 0 / 0	3,381 SF	Good	Show Sketch
MISC	2012	2010	75 / 50 / 10	3,750	Avg	Show Sketch
MISC	2010	2010	0 / 0 / 0	88	Avg	Show Sketch
MISC	2010	2010	0 / 0 / 0	50	Avg	Show Sketch
MISC	2010	2010	0 / 0 / 0	50	Avg	Show Sketch
MISC	2010	2010	0 / 0 / 0	210	Avg	Show Sketch
POLEBLDG	2012	2012	75 / 50 / 10	3,750 SF	Avg	Show Sketch

Sale Information						
Sale Date	Sale Price	Deed Book	Deed Page	Qualification Reason	Grantor	Grantee
2005-11-30	\$ 1,791,260	1465	012	Valid Arms-length sale tran	STONEPLACE LLC	LAND EDWARD A
2004-04-23	\$ 964,300	1342	40	Valid Arms-length sale tran	WIND RIVER LAND & TIMBER INC	STONEPLACE LLC
2000-06-20		1094	200	Valid Arms-length sale tran	MOORE HERCIAL H & STEVEN R	WIND RIVER LAND & TIMBER INC

Recent Sales in Neighborhood Recent Sales in Area	Previous Parcel	Next Parcel	Field Definitions	Return to Main Search Page	Oconee Home
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Date printed: 08/14/14 : 15:03:13



OONEE COUNTY

"Land Beside the Water"

Assessor's Office

Recent Sales in Neighborhood Recent Sales in Area	Previous Parcel	Next Parcel	Field Definitions	Return to Main Search	Oconee Home
Owner and Parcel Information					
Owner Name	CULLEN BOBBIE M	Today's Date	August 14, 2014		
Mailing Address	130 LAUGHING GULL LN	Parcel Number	141-00-04-010 Tax ID: 12964		
	PALM HARBOR, FL 34683	Tax District	(District 009)		
Location Address	LONG CREEK HIGHWAY	2012 Millage Rate			
Legal Description	MapPlatB A897 MapPlatP 8	Acres	25.3		
Property Class / Property Type	/ Farm with Living Unit	Parcel Map	Show Parcel Map		
Neighborhood	PULASKI TWP				
Generate Owner List By Radius					

2013 Tax Year Value Information		
Land Taxable Market Value	Improvement Taxable Market Value	Total Taxable Market Value
\$ 124,410	\$ 26,080	\$ 150,490

Land Information					
Land Type	Frontage	Effective Frontage	Effective Depth	Acres	Square Footage
75	0	0	0	24.3	1,058,508
90	0	0	0	1	43,560

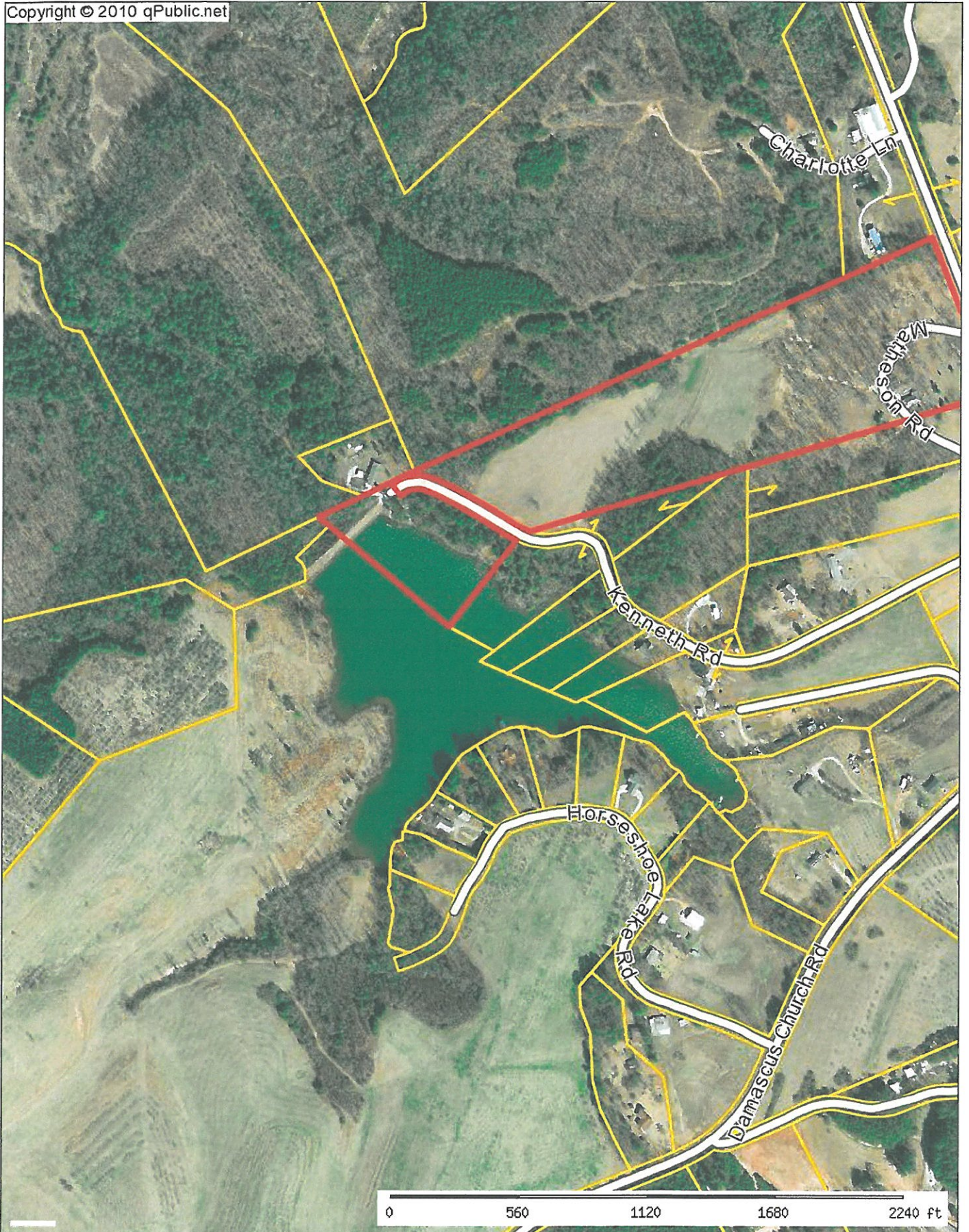
Residential Building Information								
Occupancy	Style	Base Area Sq Ft	Finished Living Area Sq Ft	Stories	Interior Walls	Exterior Walls	Year Built	Effective Year Built
Single family	12 Bungalow	1,008	1,008	1.0	Normal for Class	CONCRETE BLOCK	1970	1970
Roof Material	Roof Type	Roof Frame	Roof Pitch	Heating Type	Rooms/Bedrooms/Bathrooms	Grade	Sketch	
Metal	Gable	Std for class		Forced hot air	3/2/1.0	Low	Show Building Sketch	

Commercial and Miscellaneous Improvement Information							
Building Type	Year Built	Eff Year Built	Length/Width/Height	Size	Grade	Sketch	
ICP	0	0	17 / 10 / 0	170 SF		Show Sketch	
UTLSHED	1970	1970	20 / 13 / 1	260 SF	Fair	Show Sketch	
MACHINE	1970	1970	22 / 13 / 1	286 SF	Fair	Show Sketch	
MACHINE	1970	1970	20 / 11 / 1	220 SF	Fair	Show Sketch	
UTILROOM	1970	1970	20 / 20 / 1	400 SF	Fair	Show Sketch	

Sale Information							
Sale Date	Sale Price	Deed Book	Deed Page	Qualification Reason	Grantor	Grantee	
1990-12-22	\$ 10	640	277	Valid Arms-length sale tran	MATHESON NB & ELLOREE D LIFE E	CULLEN BOBBIE M	

Recent Sales in Neighborhood Recent Sales in Area	Previous Parcel	Next Parcel	Field Definitions	Return to Main Search Page	Oconee Home
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Date printed: 08/14/14 : 15:02:02



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: 5/22/15 SC Dam Inventory Number D 1664 County: Oconee Dam Name: Roletter Pond

I. Dam Owner Information

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

A. Owner/ Operator (Company or person): Richard D. Rholetter et.al. Contact Person (if owner is company): Phone: Email: Mailing Address: 260 Vinyard Rd. City: Westminster State: SC Zip: 29693

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Brassstown Rd. @ Duncan Dr. Latitude: 34° 42' 18" N Longitude: -83° 17' 12" W Tax map # (list all): 199-00-01-003

B. Is there any evidence of new development below the dam? [checked] Yes [] No house 1/3 mile down stream C. Do you think the hazard classification should be upgraded? [checked] Yes [] No D. If yes for item II.C, what is your opinion of what the new classification should be? [checked] 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.

Hannah Vinson Printed Name of Regional Inspector Hannah M. Vinson Signature 5/22/15 Date of Signature [blank] Printed Name of BOW Engineer [blank] Signature [blank] Date of Signature [blank]



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: 5/22/15 SC Dam Inventory Number D 4398 County: Oconee
Dam Name: Bob Edwards 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): Bobbie Jean Shepard + Samuel Stilwel

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 506 Fernwood Dr.

City: Spartanburg State: SC Zip: 29307

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Whitecut Rd.

Latitude: 34° 49' 5" N Longitude: -83° 4' 42" W Tax map # (list all): 106-00-01-035
43

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.

Hannah Vinson
Printed Name of Regional Inspector

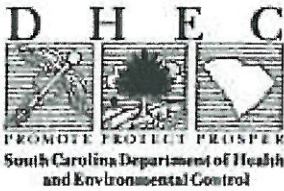
Hannah M. Vinson
Signature

5/22/15
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: 5/22/15 SC Dam Inventory Number D 4474 County: Oconee

Dam Name: Wayne Galloway 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.): _____

Latitude: 34° 45' 50" N Longitude: -83° 5' 60" W Tax map # (list all): 159-00-01-022
159-00-01-007

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

House located 1/3 mile downstream

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.

Hannah Vinson
Printed Name of Regional Inspector

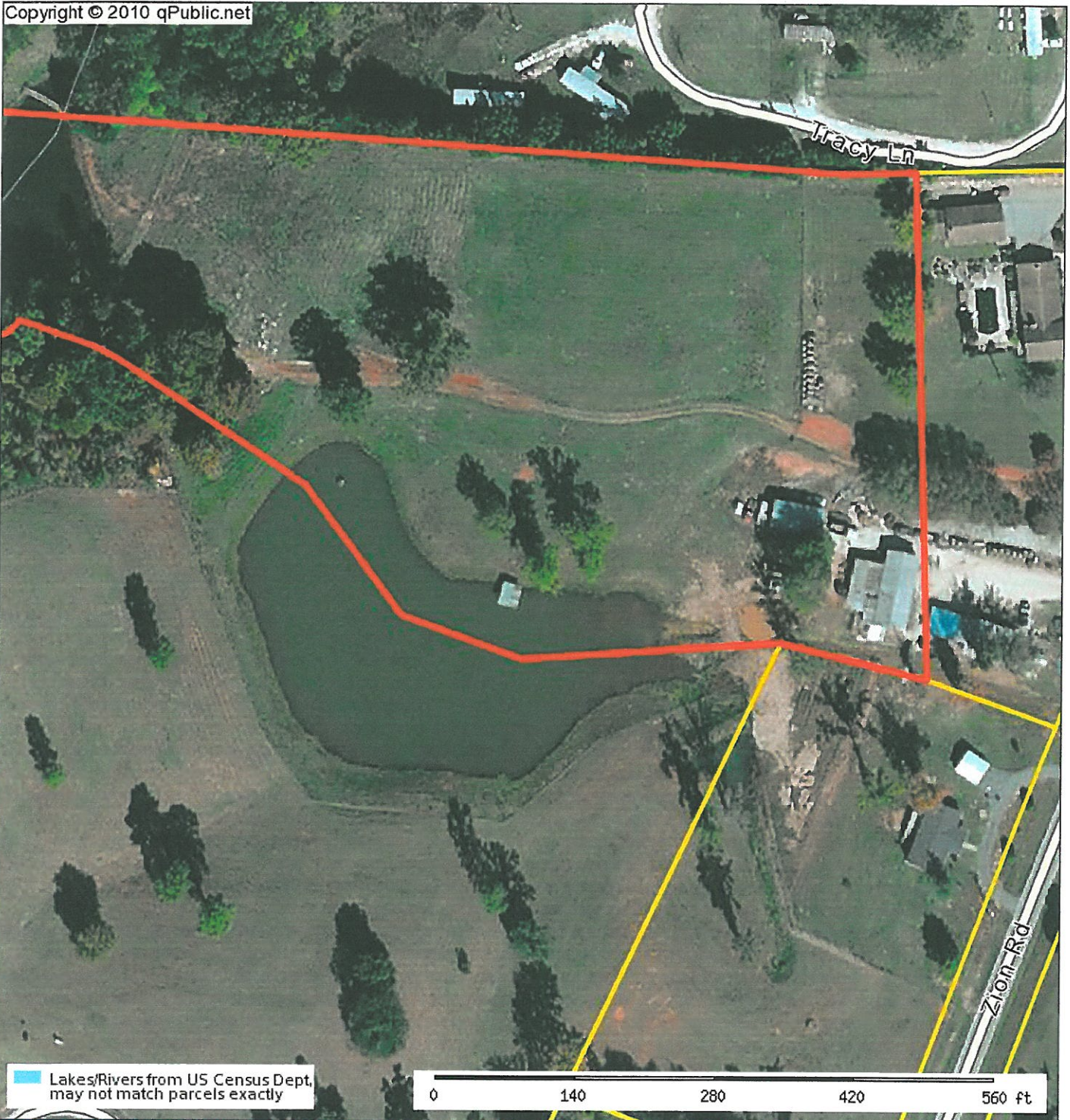
Hannah M. Vinson
Signature

5/22/15
Date of Signature

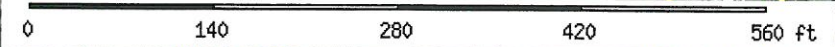
Printed Name of BOW Engineer

Signature

Date of Signature



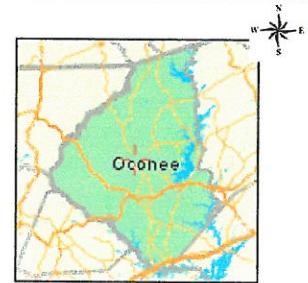
Lakes/Rivers from US Census Dept, may not match parcels exactly



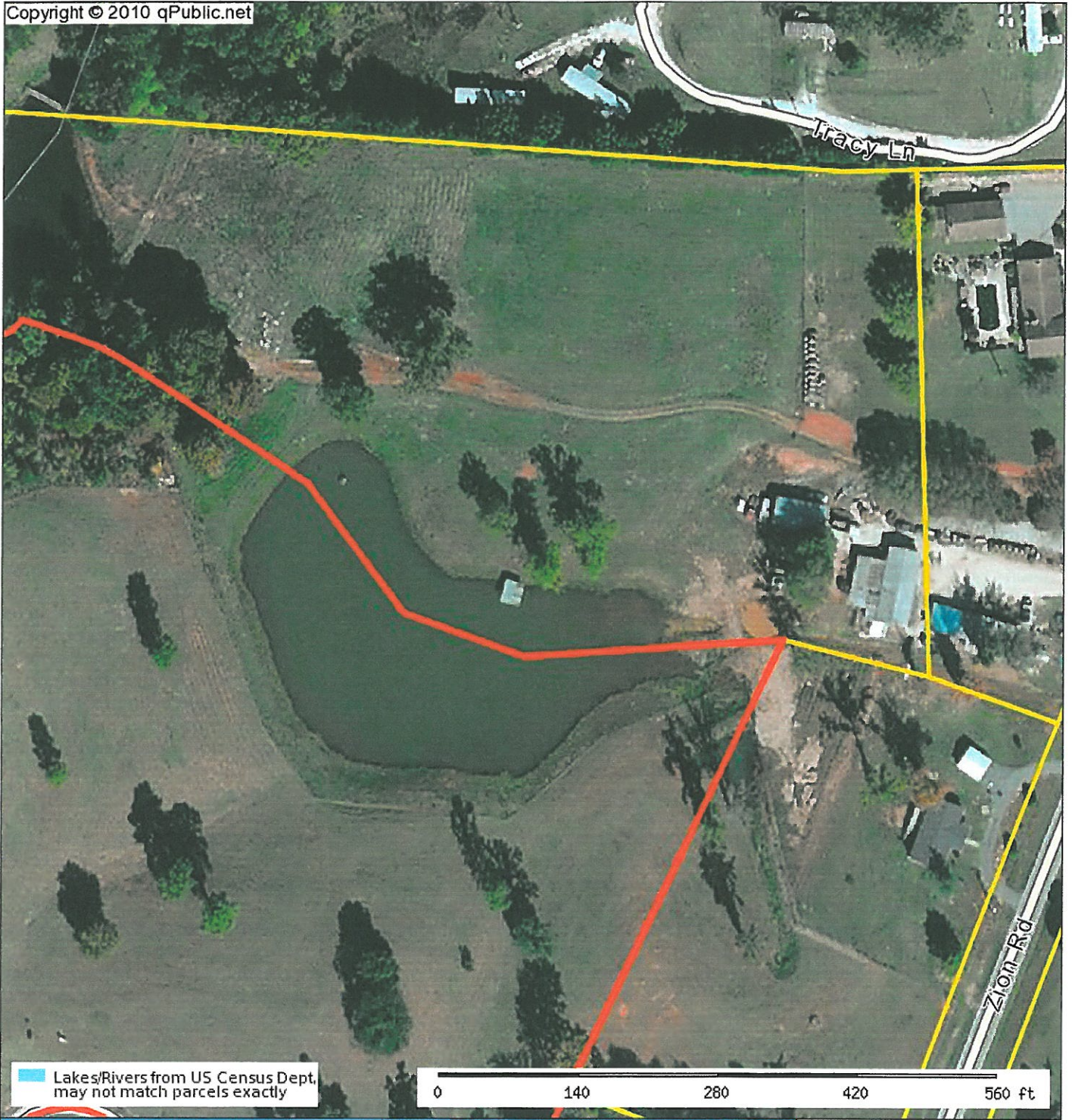
Oconee County Assessor

Parcel: 159-00-01-022 Acres: 21.92

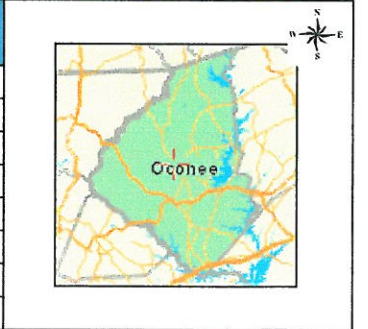
Name:	GALLOWAY DORIS D	Land Value:	119600
Site:		Improvement Value:	14760
Sale:		Accessory Value:	0
Mail:	300 ZION RD WALHALLA, SC 296910000	Total Value:	134360



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Date printed: 05/22/15 : 12:06:10



Oconee County Assessor			
Parcel: 159-00-01-007 Acres: 20.04			
Name:	GALLOWAY C WAYNE & DORIS D	Land Value:	102360
Site:		Improvement Value:	0
Sale:	\$30000 on 1995-01-12 Reason=0 Qual=Q	Accessory Value:	0
Mail:	300 ZION ROAD WALHALLA, SC 296910000	Total Value:	102360



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 Date printed: 05/22/15 : 12:04:44



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: 5/22/15 SC Dam Inventory Number D 4530 County: Oconee
Dam Name: Lewis G. Stubbs 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): Henry T + Arlene M. Stubbs / John P. + Joan F. Campton

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 130 Hemlock House Ln / 199 Stubbs Ln

City: Westminster State: SC Zip: 29693

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hemlock House Ln.

Latitude: 34 ° 39 '51.5" N Longitude: -83 ° 12 '31" 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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/22/15
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: 5/22/15 SC Dam Inventory Number D 4531 County: Oconee

Dam Name: H.H. Moore 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): River Creek LLC

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 10323 Linksland Dr.

City: Huntersville State: NC Zip: 28078

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Academy Rd.

Latitude: 34° 46' 36" N Longitude: -83° 15' 12" W Tax map # (list all): 141-00-03-018
28 6

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/22/15
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: 5/22/15 SC Dam Inventory Number D _____ County: Oconee

Dam Name: Jimmy Watkins

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): Jimmy Watkins

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 8

City: Westminster State: SC Zip: 29693

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Coffee Rd. near Piney Bluff Lane

Latitude: 34° 42' 21" N Longitude: -83° 7' 30" W Tax map # (list all): 204-00-01-025
39 29.5

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/22/15
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: 6/1/15 SC Dam Inventory Number D 4897 County: Oconee

Dam Name: Ed Land 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.): _____

Latitude: 34° 47' 60" N Longitude: -83° 13' 30" W Tax map # (list all): 115-00-01-011

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

Charlie Cobb Rd. just below dam

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.

Hannah Vinson

Printed Name of Regional Inspector

Hannah M. Vinson

Signature

6/1/15

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: 1/16/15 SC Dam Inventory Number D 1630 County: Oconee
Dam Name: Keasler's 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): Keasler Family Rev Living Trust % Susan Snipes
Contact Person (if owner is company): _____
Phone: _____ Email: _____
Mailing Address: 2723 Amstel Way
City: Raleigh State: NC Zip: 27613

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Starnes Dr. off Watershed Rd.
Latitude: 34° 34' 18" N Longitude: -82° 58' 48" W Tax map # (list all): 310-00-02-013

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.

Hannah M. Vinson Printed Name of Regional Inspector Hannah M. Vinson Signature 1/16/15 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: 3/5/15 SC Dam Inventory Number D 1631 County: Oconee

Dam Name: Lakefront Homes 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): Donald Kelly + Bettina Bailey George

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 70

City: Mtn. Rest State: SC Zip: 29664

II. Site Information

A. Site Location (street address, nearest intersection, etc.): end of Nicholson Ford Rd.

Latitude: 34° 923334 N Longitude: -83° 123334 W Tax map # (list all): 041-00-01-001

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

3/5/15
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: 3/5/15 SC Dam Inventory Number D 1640 County: Oconee
Dam Name: Gordons Lake / Camp Chatuga Lake

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): Camp Chatuga, Inc.

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 291 Camp Chatuga Rd.

City: Mtn. Rest State: SC Zip: 29664

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____

Latitude: 34° 52' 54" N Longitude: -83° 7' 54" W Tax map # (list all): 071-00-01-001

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.

Hannah Vinson
Printed Name of Regional Inspector

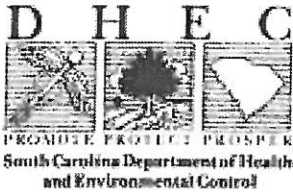
Hannah M. Vinson
Signature

3/5/15
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: 12/3/13 SC Dam Inventory Number D 1642 County: Oconee
Dam Name: Oconee State Park Dam #1

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): Oconee State Park

Contact Person (if owner is company): _____

Phone: 864-638-5353 Email: _____

Mailing Address: 624 State Park Rd.

City: Mtn. Rest State: SC Zip: 29664

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Oconee State Park, Hwy 107

Latitude: 34° 86' 76" N Longitude: -83° 10' 32" W Tax map # (list all): 072-00-01-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

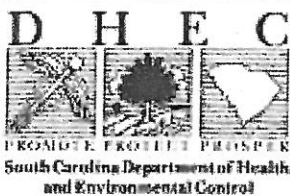
Hannah M. Vinson
Signature

12/31/13
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: 12/3/13 SC Dam Inventory Number D 1643 County: Oconee
Dam Name: Oconee State Park Dam # 2

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): Oconee State Park

Contact Person (if owner is company): _____

Phone: 864-638-5353 Email: _____

Mailing Address: 624 State Park Rd.

City: Mtn Rest State: SC Zip: 29664

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Hwy 107 @ Lisa Lane

Latitude: 34° 85843 " N Longitude: -83° 10321 " W Tax map # (list all): 072-00-01-001

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/31/13
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: 3/5/15 SC Dam Inventory Number D 1644 County: Oconee
Dam Name: SC NO NAME 37030 / Thrift Brothers 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): Jeff Sadler

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 220

City: Hartwell State: GA Zip: 30643

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Chatoga Ridge Rd. @ Rocky Gap Rd.

Latitude: 34° 51' " N Longitude: -83° 10' 18" W Tax map # (list all): 091-00-03-012

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

3/5/15
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: 3/5/15 SC Dam Inventory Number D 1645 County: Oconee
Dam Name: Crystal 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): Benjamin L + Sara Elizabeth Vissage
Contact Person (if owner is company): R L Vissage (1650 Crystal Lake Rd.)
Phone: 864-638-7234 (Benjamin) Email: _____
Mailing Address: 358 Vissage Rd.
City: Mtn. Rest State: SC Zip: 29664

II. Site Information

A. Site Location (street address, nearest intersection, etc.): _____
Latitude: 34° 82704" N Longitude: -83° 14321" W Tax map # (list all): 104-00-02-031

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.

Hannah Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

3/5/15
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: 12/16/13 SC Dam Inventory Number D 1647 County: Oconee
Dam Name: Walhalla Reservoir

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 Walhalla

Contact Person (if owner is company): _____

Phone: 864-638-5833 Email: _____

Mailing Address: PO Box 1099

City: Walhalla State: SC Zip: 29691

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Upstream of Isaqueena Falls

Latitude: ____° ____' ____" N Longitude: - ____° ____' ____" W Tax map # (list all): 105-00-02-007

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.

Hannah M. Vinson
Printed Name of Regional Inspector

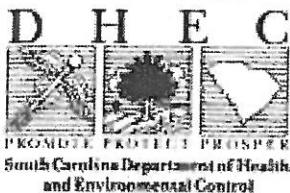
Hannah M. Vinson
Signature

12/19/13
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: 12/3/13 SC Dam Inventory Number D 1649 County: Oconee
Dam Name: Lake Jemike #2

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): Donald Payne

Contact Person (if owner is company): _____

Phone: 864-710-1231 Email: All Locked Up @ bellsouth.net

Mailing Address: PO Box 910

City: West Union State: SC Zip: 29696

II. Site Information

A. Site Location (street address, nearest intersection, etc.): end of Lake Jemike Rd.

Latitude: 34° 78009" N Longitude: -83° 13488" W Tax map # (list all): 145-00-04-119

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/31/13
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: 12/16/13 SC Dam Inventory Number D 1656 County: Oconee
Dam Name: Conecross WCD 21

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 Henry Jones, III + Linda D. Jones

Contact Person (if owner is company): George Grobusky → EFIS

Phone: 638-2415 Email: _____

Mailing Address: 286 Bountyland Rd.

City: Seneca State: SC Zip: 29672

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Bountyland Rd @ Chetola Rd.

Latitude: 34° 70176" N Longitude: -83° 01487 W Tax map # (list all): 222-00-01-127

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/19/13
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature



Low Hazard Dam Classification Inspection Form for South Carolina
Regulated Dams
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Date of Inspection: 12/16/13 SC Dam Inventory Number D 1657 County: Oconee
Dam Name: Webbs 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): Gary Thrift

Contact Person (if owner is company): _____

Phone: 864-882-4582 Email: _____

Mailing Address: PO Box 2125

City: Seneca State: SC Zip: 29679

II. Site Information

A. Site Location (street address, nearest intersection, etc.): End of Rushford Lane off Bountyland Rd.

Latitude: 34° 69565" N Longitude: -83° 00237 W Tax map # (list all): 222-00-01-054

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/19/13
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: 12/16/13 SC Dam Inventory Number D 1658 County: Oconee
Dam Name: Country Club 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): Oconee Country Club

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 781 Richland Rd.

City: Seneca State: SC Zip: 29678

II. **Site Information**

A. Site Location (street address, nearest intersection, etc.): Oconee Country Club near #11 Green

Latitude: 34° 68510" N Longitude: -83° 01321" W Tax map # (list all): 222-00-01-009

Kenneth P. Richardson III 222-00-01-014

653 Greenview Lane
Seneca, SC 29672

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/19/13
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: 1/16/15 SC Dam Inventory Number D 1660 County: Oconee
Dam Name: Nickols 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): Etrulia M. Nichols Rev Trust

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 13051 Radio Station Rd.

City: Seneca State: SC Zip: 29678

II. Site Information

A. Site Location (street address, nearest intersection, etc.): behind Seneca High School

Latitude: 34° 40' 18" N Longitude: -82° 59' 36" W Tax map # (list all): ~~252-00-02-025~~
238-00-06-001

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

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

1/16/15
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature

FERC Dam → Exempt



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: 8/5/14 SC Dam Inventory Number D 3840 County: Oconee Dam Name: Stevens Coneross 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): Coneross Power Corp.

Contact Person (if owner is company):

Phone: Email:

Mailing Address: PO Box 512

City: Greenville State: SC Zip: 29602

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Valley Farm Rd. @ Hwy 59

Latitude: 34° 38' 7" N Longitude: -82° 58' 10" W Tax map # (list all): 280-00-03-006

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.

Hannah M. Vinson Printed Name of Regional Inspector

Hannah M. Vinson Signature

8/7/14 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: 12/16/13 SC Dam Inventory Number D 4097 County: Oconee
Dam Name: Walhalla Reservoir #3

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 Walhalla

Contact Person (if owner is company): _____

Phone: 864-638-5833 Email: _____

Mailing Address: PO Box 1099

City: Walhalla State: SC Zip: 29691

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Upstream of Isaqueena Falls

Latitude: _____° _____' _____" N Longitude: - _____° _____' _____" W Tax map # (list all): 105-00-02-007

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

12/19/13
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: 8/5 SC Dam Inventory Number D 4104 County: Oconee

Dam Name: Dickerson Fishing Lake

I. Dam Owner Information

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

A. Owner/ Operator (Company or person): Eunice Dickerson L/E

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: PO Box 117

City: Westminster State: SC Zip: 29693

II. Site Information

A. Site Location (street address, nearest intersection, etc.): (230 Dickerson Lake Rd.)
Armstrong Rd. @ Ridgerest Rd.

Latitude: 34° 38' 52" N Longitude: -83° 2' 20" W Tax map # (list all): 265-00-03-021

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/7/14
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: 5/14/14 SC Dam Inventory Number D 4105 County: Oconee

Dam Name: Beaver Lake

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): Beaver Lake Est / Property Owners Assn

Contact Person (if owner is company): W C Richardson

Phone: _____ Email: _____

Mailing Address: PO Box 302

City: West Union State: SC Zip: 29696

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Beaver Lake Dr off Mtn. Springs Rd.

Latitude: 34° 49' 0" N Longitude: -83° 0' 48" W Tax map # (list all): 108-00-04-079

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/14/14
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: 8/5 SC Dam Inventory Number D 4357 County: Oconee
Dam Name: Joseph B. James 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): Chestnut Return Farm LLC

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 260 Steve Nix Rd.

City: Seneca State: SC Zip: 29678

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Steve Nix Rd @ Brown Farm Rd.

Latitude: 34° 38' 52" N Longitude: 83° 1' 4" W Tax map # (list all): 266-00-01-002

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/7/14
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: 5/14/14 SC Dam Inventory Number D 4416 County: Oconee

Dam Name: Angus Warren 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): Ellen Covington Warren

Contact Person (if owner is company): _____

Phone: _____ Email: _____

Mailing Address: 498 Sonlit Way

City: Seneca State: SC Zip: 29678

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Tall Oaks Farm Rd.

Latitude: 34° 44' 30" N Longitude: 83° 0' 42" W Tax map # (list all): 148-00-02-035

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

5/14/14
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: 8/5/14 SC Dam Inventory Number D 4586 County: Oconee
Dam Name: Falta 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): Ronald W. Falta, Jr.
Contact Person (if owner is company): _____
Phone: 864-710-3448 Email: _____
Mailing Address: 160 Penn Farm Lane
City: Seneca State: SC Zip: 29678

II. Site Information

A. Site Location (street address, nearest intersection, etc.): Penn Farm Lane off Snow Creek Rd.
Latitude: 34° 36' 45.5" N Longitude: -83° 0' 30.5" W Tax map # (list all): 290-00-04-0007

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.

Hannah M. Vinson
Printed Name of Regional Inspector

Hannah M. Vinson
Signature

8/7/14
Date of Signature

Printed Name of BOW Engineer

Signature

Date of Signature