

Application for Levee Safety Permit



Southeast Louisiana Flood Protection Authority – East

6920 Franklin Ave., New Orleans, LA 70122

Submission of requested information is voluntary, however, if information is missing from the permit application it cannot be evaluated nor can a permit be issued. An application that is not completed in full will be returned.

(Items 1 through 3 to be filled out by levee district)

1. Permit Number:	2. Date received:	3. Completed Date:
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(Items below to be filled by applicant)

4. Applicant's Information:

First: _____ M.I. ____ Last: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number (including area code): _____

Email Address: _____

5. Authorized Agent's Information:

First: _____ M.I. ____ Last: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number (including area code): _____

Email Address: _____

Statement of Authorization

6. I hereby authorize, _____, to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application.

Applicant Signature: _____ Date: _____

Project name, location, and description of activity

7. Project name or title: _____

8. Name of levee system (if known): _____	9. Parish: _____
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10. Location of project: Latitude: N _____ Longitude: W _____

Levee Station (if known): _____ Offset (ft): _____ Flood side Protected side Within levee right-of-way

11. Other location descriptions (if known):

Physical Address: _____

Street Intersection: _____

Section - _____ Township - _____ Range - _____

12. Nature of Activity (Project description, include all features):

13. Project Purpose (Describe the reason or purpose of the project):

14. Is any portion of this work already complete? If yes, describe the completed work and any associated permit: Yes or No

15. Is this a renewal or extension of a previous permit? Yes or No	If yes, identify the permit number and date of issuance or submit a copy of previous permit:
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16. Applicant type: *Residential* *Commercial/Industrial* *Government* *Non-profit*

17. Insurance and Surety bond requirements met when applicable (see guidelines for assistance)? Yes No

Attachments

18. List all attachments (drawings, sketches, photos, insurance documents, etc.):

Signature of Applicant and/or Agent

19. Application is hereby made for permit or permits to authorize the work described in this application. I certify that this information in this application is complete and accurate. I further certify that I possess the authority to undertake the work described herein or am acting as the duly authorized agent of the applicant.

Signature of Applicant: _____ Date: _____

Signature of Agent: _____ Date: _____

The Application must be signed by the person who desires to undertake the proposed activity (applicant) or it may be signed by a duly authorized agent if the statement in block 6 has been filled out and signed.