



FLOOD PROTECTION AUTHORITY

Your Flood Defense System

PRESS RELEASE

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For Immediate Release

March 11, 2019

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LAKE BORGNE BASIN LEVEE DISTRICT
P.O. Box 216
6136 E. St. Bernard Highway
Violet, LA 70092
504.682.5941


ORLEANS LEVEE DISTRICT
6920 Franklin Ave
New Orleans, LA 70122
504.286.3100

SPECIAL WAIVERS AVAILABLE FOR LEVEE ACCESS DURING HIGH RIVER

New Orleans, LA – The Flood Protection Authority has special waiver permits available for businesses and contractors wishing to operate on the levee system while under the State of Louisiana Emergency Declaration. The waivers will follow strict guidelines that may limit access in some regards. On March 1, 2019, Governor John Bel Edwards declared a State of Emergency for the State of Louisiana due to imminent flooding of the Mississippi River and its tributaries and other state rivers and water bodies. The Coastal Protection and Restoration Authority Board adopted these Emergency Regulations which restricted activities on all levees and flood control structures within the Coastal Area of Louisiana. This waiver will allow for limited access during this declaration.

To view the application for the operating permit [click here](#) and follow the steps on how to submit. If you have any questions, contact the Flood Protection Authority at 504-286-3100 or email aharris@floodauthority.org

Application for Waiver from CPRA Emergency Rule Pursuant to 33 JBE 2019

 <p>Southeast Louisiana Flood Protection Authority – East 6920 Franklin Ave., New Orleans, LA 70122</p> <p>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.</p>		
(Items 1 through 3 to be filled out by levee district)		
1. Permit Number:	2. Date received:	3. Completed Date:
(Items below to be filled by applicant)		
<p>4. Waiver Applicant's Information:</p> <p>First: _____ M.I.: _____ Last: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>Phone Number (including area code): _____</p> <p>Email Address: _____</p>		
<p>5. Authorized Agent's Information:</p> <p>First: _____ M.I.: _____ Last: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>Phone Number (including area code): _____</p> <p>Email Address: _____</p>		
Statement of Authorization		
<p>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 application for waiver.</p> <p>Applicant Signature: _____ Date: _____</p>		
Activity name, location, and description of activity requiring Applicant to traverse in and around levee		
7. Activity name or title: _____		
8. Name of levee system (if known): _____		9. Parish: _____
10. Location of Activity: Latitude: N _____ Longitude: W _____		
Levee Station (if known): _____ Offset (ft): _____ <input type="checkbox"/> Flood side <input type="checkbox"/> Protected side <input type="checkbox"/> Within levee right-of-way		

11. Location of Proposed Activity Requiring Waiver (if S/T/R is not known, describe location in detail in response to item 12.)	
Physical Location: _____	
Proximity to Levee: _____	
Section - _____	Township - _____ Range - _____
12. Description of Activity, including whether Applicant will cross Levee (ALL crossings limited to existing ramps and crown of levee)	

13. Purpose of Proposed Activity Requiring Applicant to Traverse in or around Levee while Emergency Rule in Effect	

14. Description of Duration of Proposed Activity Specifying Frequency of Activity	

15. Will a vehicle or heavy equipment be used? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, identify type(s) and MAX weight(s): _____	
16. Applicant type: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Government <input type="checkbox"/> Non-profit	
17. Current Levee Safety Permit Holder? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Attachments	
18. List all attachments (drawings, sketches, photos, etc.): _____	

Signature of Applicant and/or Agent and Acknowledgement of Indemnification	
19. I certify that the information in this application is complete and accurate. I further certify that I am authorized to undertake the work described herein or am acting as the duly authorized agent of the applicant. I further agree to indemnify and hold harmless the Flood Protection Authority, the levee district, the CPRA, the state, or any employee or agent thereof for any liability arising out of the issuance of or use of a waiver, including damage to any levee or flood protection structure.	
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.	