



Request for PL 84-99 Rehabilitation Assistance for Levee Systems Following a Flood

1. Legal name of levee system / segment:

2. Non-Federal Sponsor contact information:

Name: _____ Phone: _____

Address: _____

Email: _____

3. Location of Project (closest city, county, and state):

4. Date of last inspection by the Corps of Engineers:

5. System/segment(s) status:

Active Inactive

6. Name of waterway(s) experiencing high water event (above flood stage):

7. Categories of damages (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Breach | <input type="checkbox"/> Drainage Structure Damage (flap gate) |
| <input type="checkbox"/> Slide – Critical slide with failure to crown | <input type="checkbox"/> Drainage Structure Damage (pipe) |
| <input type="checkbox"/> Slide – Surficial Slide | <input type="checkbox"/> Gravity Drain (no loss of foundation) |
| <input type="checkbox"/> Severe Erosion | <input type="checkbox"/> Gravity Drain (with loss of foundation) |
| <input type="checkbox"/> Moderate Erosion | <input type="checkbox"/> Relief Well Damage |
| <input type="checkbox"/> Minor Erosion | <input type="checkbox"/> Pump plant (Mechanical/Electrical) |
| <input type="checkbox"/> Sod Cover Loss | <input type="checkbox"/> Pump plant (Structural) |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Closure Structure |

Please sign below and provide a description of the location of flood damages on page 2, extent of damage at each location and dates damages were observed.

By signing this application for rehabilitation assistance, the levee sponsor acknowledges the responsibility to provide all land easements, right of entry, borrow, disposal, and applicable cost share required for pre-construction coordination and construction of the rehabilitation project.

Signature _____ Date _____
Public Sponsor or Responsible Official

Title _____

8. Use the following space to describe location(s) of flood damages, to include extent of damage at each location and date damages were observed. The location should be described by stationing, latitude/longitude, distance to known landmarks(s), or similar description(s) (see example). Attach photograph(s) and/or map(s) if possible. A description must be included in order to process the rehabilitation assistance request. Incomplete applications will be returned to the applicant.

Example: At ~STA 34+00, widespread erosion of the riverside slope, approx.. 1000 feet long. Observed on 17 May 2023. See attached photo.

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**NONSTRUCTURAL ALTERNATIVES TO
REHABILITATION OF FLOOD CONTROL WORKS**

Authority. Under Public Law 84-99, the Chief of Engineers is authorized, when requested by the non-Federal sponsor, to implement non-structural alternatives (NSA's) to the rehabilitation, repair, or restoration of flood control works damaged by floods or coastal storms.

I, _____ (name), _____ (title)

representing the _____ (local sponsor) have been provided with information indicating that the option of pursuing a Non-Structural Alternative Project has been made available to the public entity that I represent.

The _____ (local sponsor)

does / **does not** (check one) wish to pursue the option of a Non-Structural Alternat Project.

Corps of Engineers Representative
Providing Information on NSA

Name of Local Sponsor

Date Information Provided

Signature

Name (Printed)

Title

Date