Project Number (to be assigned by ABP)_____

FISCAL YEAR 2013 ANNUAL PLAN
WATER MANAGEMENT PROJECT
NOMINATION FORM

1. Nominating Party (Please note affiliation, i.e. Parish, Association, Organization)

Name:_____Affiliation:_____

Address:_____

Phone:_____email:_____

Signature:_____

2. Statement of the Problem. (Please give a brief description of problem and current area conditions. If you think the problem relates to water quality, sediment accumulation, access, forest health, fisheries or other issues, please indicate as well).

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3. Project Boundary: (draw specific location of project area on attached map):

Parish**:**_____Water Management Unit (if known):_____

Lat/Long (if known**):**_____

4. Affected Area: (draw specific area anticipated to benefit from project on attached map - if known):

_____

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5. Action Description: (any proposed action or suggestion to rectify the problem. List any anticipated benefits from the water management project-if known)

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6. Survey and Preliminary Assessments: (Please attach any pertinent information or documents that you might have pertaining to the problem area for review and provide a list of the documents you have attached.)

_____

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7. Additional information regarding the water management project area, problem or proposed action (if known):

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Please return this form by mail to the address below, fax to (225) 342-6887, email to Atchafalaya@dnr.com or bring in person to an Atchafalaya Basin Water Management Project Nomination meeting.

Louisiana Department of Natural Resources
Atchafalaya Basin Program
P O Box 94396
Baton Rouge, LA 70804

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