

LOUISIANA

MUNICIPAL WATER POLLUTION PREVENTION



MWPP

| | |
|---------------------------------------|--|
| Facility Name: | <i>St. Tammany Sewerage District No. 1</i> |
| LWDPS Permit Number: | <i>LA0080403</i> |
| NPDES Permit Number: | |
| Address: | <i>ATTN : Mike Franklin P.O. Box 1478.</i> |
| | <i>Covington</i> |
| | <i>LOUISIANA 70434</i> |
| Parish: | <i>St. Tammany Parish</i> |
| (Person Completing Form) Name: | <i>David Curtis, P.E.</i> |
| Title: | <i>Operations Manager - CES, Inc.</i> |
| Date Completed: | <i>03/01/2022</i> |

Instructions to the Operator-in-Charge

- 1. Complete only the sections of the Environmental Audit which apply to your wastewater treatment system. Leave sections that do not apply blank and enter a "0" for the point value.**
- 2. Parts 1 through 7 contain questions for which points may be generated. These points are intended to communicate to the department and the governing body or owner what actions will be necessary to prevent effluent violations. Place the point totals from parts 1 through 7 on the Point Calculation page.**
- 3. Add up the point totals.**
- 4. Submit the Environmental Audit to the governing body or owner for their review and approval.**
- 5. The governing body must pass a resolution which contains the following items:**
 - a. The resolution or letter must acknowledge the governing body or owner has reviewed the Environmental Audit.**
 - b. The resolution must indicate specific actions, if any, will be taken to maintain compliance and prevent effluent violations. Proposed actions should address the parts where maximum or close to maximum points were generated in the Environmental Audit.**
 - c. The resolution should provide any other information the governing body deems appropriate.**

PART I - INFLUENT FLOW/LOADINGS

Part 1: Influent Flow/Loadings (All plants)

A. List the average monthly volumetric flows and BOD loadings received at your facility during the last reporting year.

| Col. 1 Average Monthly Flow (million gallons per day, MGD) | | Col. 2 Average Monthly BOD ₅ Concentration (mg/l) | | Average Monthly BOD ₅ Loading (pounds per day) |
|--|---|--|----------|--|
| 0.119 | X | 104 | X 8.34 = | 103 |
| 0.185 | X | 59 | X 8.34 = | 91 |
| 0.234 | X | 125 | X 8.34 = | 244 |
| 0.317 | X | 89 | X 8.34 = | 235 |
| 0.309 | X | 96 | X 8.34 = | 247 |
| 0.230 | X | 62 | X 8.34 = | 119 |
| 0.319 | X | 54 | X 8.34 = | 144 |
| 0.193 | X | 150 | X 8.34 = | 241 |
| 0.240 | X | 109 | X 8.34 = | 218 |
| 0.143 | X | 160.5 | X 8.34 = | 191 |
| 0.131 | X | 130 | X 8.34 = | 142 |
| 0.147 | X | 93 | X 8.34 = | 114 |

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in mg/l) x 8.34.

B. List the design flow and design BOD loading for your facility in the blanks below. If you are not aware of these design quantities, refer to your Operation and Maintenance Manual (O & M) or contact your consulting engineer.

| | | | |
|--------------------|-------|----------|-------|
| Design Flow, MGD | 0.190 | X 0.90 = | 0.171 |
| Design BOD, lb/day | 317 | X 0.90 = | 285 |

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- C. How many months did the monthly flow (Col. 1) to the wastewater treatment plant (WWTP) exceed 90% of design flow?
 Circle the number of months and corresponding point total. Write the point total in the box below at the right *

| | | | | | | | | | | | | | | |
|--------|---|---|---|---|---|---|---|---|---|---|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 0 | 0 | 0 | 0 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | points |

Write 0 or 5 in the C point total box C Point Total

- D. How many months did the monthly flow (Col. 1) to the WWTP exceed the design flow?
 Circle the number of months and corresponding point total. Write the point total in the box below at the right. *

| | | | | | | | | | | | | | | |
|--------|---|---|---|----|----|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 5 | 5 | 10 | 10 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | points |

Write 0, 5, 10, or 15 in the D point total box D Point Total

- E. How many months did the monthly BOD loading (Col. 3) to the WWTP exceed 90% of the design loading?
 Circle the number of months and corresponding point total. Write the point total in the box below at the right. *

| | | | | | | | | | | | | | | |
|--------|---|---|---|---|---|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 0 | 5 | 5 | 5 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | points |

Write 0, 5, or 10 in the E point total box E Point Total

- F. How many times did the monthly BOD loading (Col. 3) to the WWTP exceed the design loading?
 Circle the number of months and corresponding point total. Write the point total in the box below at the right. *

| | | | | | | | | | | | | | | |
|--------|---|----|----|----|----|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 10 | 20 | 30 | 40 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | points |

Write 0, 10, 20, 30, 40, or 50 in the F point total box F Point Total

- G. Add together each point total for C through F and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 1 (max=80)

Also enter this value on the point calculation table on page 16.

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PART 25 EFFLUENT QUALITY AND PERFORMANCE

A. List the monthly average effluent BOD and TSS concentrations produced by your facility during the last reporting year.

| Month | Column 1 Avg. Monthly CBOD (mg/l) | Column 2 Avg. Monthly TSS (mg/l) |
|-----------|---|--|
| January | 6 | 11 |
| February | 7 | 9 |
| March | 2 | 11 |
| April | 4 | 12 |
| May | 2 | 6 |
| June | 4 | 6 |
| July | 3 | 5 |
| August | 2 | 4 |
| September | 3 | 7 |
| October | 6 | 18 |
| November | 4 | 6 |
| December | 18 | 28 |

B. List the monthly average permit limits for your facility in the blanks below.

| | Permit Limit | | 90% of Permit Limit |
|-----------|--------------|----------|---------------------|
| BOD, mg/l | 10 | X 0.90 = | 9 |
| TSS, mg/l | 15 | X 0.90 = | 13.5 |

C. Continuous Discharge to Surface Water

i. How many months did the effluent CBOD concentration (Col. 1) exceed 90% of permit limits?
Circle the number of months and corresponding point total. Write the point total in the box below at the right.

*

| | | | | | | | | | | | | | | |
|--------|---|---|----|----|----|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 0 | 10 | 20 | 30 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | points |

Write 0, 10, 20, 30 or 40 in the i point total box i Point Total

ii. How many months did the effluent CBOD concentration (Col. 1) exceed permit limits?
Circle the number of months and corresponding point total. Write the point total in the box below at the right.

*

| | | | | | | | | | | | | | | |
|--------|---|---|---|----|----|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 5 | 5 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | points |

Write 0, 5, or 10 in the ii point total box ii Point Total

iii. How many months did the effluent TSS concentration (Col. 2) exceed 90% of permit limits?
Circle the number of months and corresponding point total. Write the point total in the box below at the right.

*

| | | | | | | | | | | | | | | |
|--------|---|---|----|----|----|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 0 | 10 | 20 | 30 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | points |

Write 0, 10, 20, 30, or 40 in the iii point total box iii Point Total

iv. How many months did the effluent TSS concentration (Col.2) exceed permit limits?
Circle the number of months and corresponding point total. Write the point total in the box below at the right.

*

| | | | | | | | | | | | | | | |
|--------|---|---|---|----|----|----|----|----|----|----|----|----|----|--------|
| months | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | months |
| points | 0 | 5 | 5 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | points |

Write 0, 5, or 10 in the iv point total box iv Point Total

v. Add together each point total for i through iv and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 2
Also enter this value on the point calculation table on page 16.

| |
|----|
| 20 |
| |

(max=100)

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D. Other Monitoring and Limits

i. At any time in the past year was there an exceedance of a permit limit for other pollutants such as: ammonia-nitrogen, phosphorus, pH, residual chlorine, or fecal coliform?

Check one box X Yes No If yes, please describe:

3 NH3 Monthly Avg (Jan, Feb, March), weekly average, and loading monthly loading.

ii. At any time in the past year was there a "failure" of a Biomonitoring (Whole Effluent Toxicity) test of the effluent?

Check one box Yes X No If yes, please describe:

NA

iii. At any time in the past year was there an exceedance of a permit limit for a toxic substance?

Check one box Yes X No If yes, please describe:

NA

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PART 3: AGE OF THE WASTEWATER TREATMENT FACILITIES

A. What year was the wastewater treatment plant constructed or last major expansion/improvements completed?
Built 1962 / major improvements 2015

Current Year - (Answer to A) = Age in years
2021 - 2015 = 6 years

Enter Age in Part C below.

B. Check the type of treatment facility that is employed:

Table with 2 columns: Facility Type and Factor. Includes Mechanical Treatment Plant (2.5), Aerated Lagoon (2.0), Stabilization Pond (1.5), and Other (Specify) (1.0).

Additional Plant upgrades in 2016.

C. Multiply the factor listed next to the type of facility your community employs by the age of your facility to determine the total point value of Part 3:

TOTAL POINT VALUE FOR PART 3 = (2.5 / FACTOR) x (6 / AGE) = 15 (max = 50)

Also enter this value or 50, which ever is less, on the point calculation table on page 16.

D. Please attach a schematic of the treatment plant.

0

Headworks -> Aeration Basin -> Settling -> Chlorination -> Digester then liquid solids removal

PART 4 OVERFLOWS AND BYPASSES

- A. (1) List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due to heavy rain: 18
 (Circle One) 0 = 0 points 1 = 5 points 2 = 10 points
 3 = 15 points 4 = 30 points **X 5 or more = 50 points**
- (2) List the number of bypasses, overflows, or unpermitted discharges shown in A (1) that were within the collection system and the number at the treatment plant.

Collection System 18 Treatment Plant 0

- B. (1) List the number of times in the last year there was a bypass or overflow of untreated or incompletely treated wastewater due to equipment failure, either at the treatment plant or due to pumping problems in the collection system: 10
 (Circle One) 0 = 0 points 1 = 5 points 2 = 10 points
 3 = 15 points 4 = 30 points **X 5 or more = 50 points**
- (2) List the number of bypasses or overflows shown in B (1) that were within the collection system and the number at the treatment plant.

Collection System 10 Treatment Plant 0

- C. Specify whether the bypasses came from the city or village sewer system or from contract or tributary communities/sanitary districts, etc.

From the Districts System

- D. Add the point values circled for A and B and place the total in the box below.

TOTAL POINT VALUE FOR PART 4 100 (max=100)

Also enter this value on the point calculation table on page 16.

- E. List the person responsible for reporting overflows, bypasses, or unpermitted discharges to State and Federal authorities:

CEU, Inc. - operator

Describe the procedure for gathering, compiling, and reporting:

Entire system is continuously monitored during adverse conditions or weather events to insure proper operation to prevent the occurrence of a by-pass or overflow. Data collected by operator and reported to Board for reporting.

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PART 5 - SLUDGE STORAGE AND DISPOSAL SITES

A. Sludge Storage

How many months of sludge storage capacity does your wastewater treatment facility have available, either on-site or off-site?

Circle the number of months and corresponding point total. Write the point total in the box below at the right.

months <2 2 3 4 to 5 >6 months
points 50 30 20 10 0 points

Write 0, 10, 20, 30, or 50 in the A point total box A Point Total

B. For how many months does your facility have access to (and approval for) sufficient land disposal sites to provide proper land disposal?

Circle the number of months and corresponding point total. Write the point total in the box below at the right.

months <2 6 to 11 12 to 23 24 to 35 >36 months
points 50 30 20 10 0 points

Write 0, 10, 20, 30, or 50 in the B point total box B Point Total

C. Add together the A and B point values and place this sum in the box below at the right:

TOTAL POINT VALUE FOR PART 5 **(max=100)**

Also enter this value on the point calculation table on page 16.

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PART 6. NEW DEVELOPMENT

A. Please provide the following information for the total of all sewer line extensions which were installed during the last year.

Design Population: 1
Design Flow: 0.0004 MGD
Design BOD₅: 200 mg/l

B. Has an industry (or other development) moved into the community or expanded production in the past year, such that either flow or pollutant loadings to the sewerage system were significantly increased (5% or greater)?
(Circle One) No = 0 points Yes = 15 points

Describe: NA

List any new pollutants: NA

C. Is there any development (industrial, commercial, or residential) anticipated in the next 2-3 years, such that either flow or pollutant loadings to the sewerage system could significantly increase?
(Circle One) No = 0 points Yes = 15 points

Describe: NA

List any new pollutants that you anticipate: NA

D. Add together the point value circled in B and C and place the sum in the blank below.

TOTAL POINT VALUE FOR PART 6 0 (max=30)

Also enter this value on the point calculation table on page 16.

PART 7 OPERATOR CERTIFICATION AND EDUCATION

- A. What was the name of the operator-in-charge for the reporting year? Jeff Bertoniere
- B. What is his/her certification number? 07402 **Cert. #**
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant? II **Level Required**
- D. What is the level of certification of the operator-in-charge? II **Level Certified**
- E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant? Check one box X yes = 0 points no = 50 points
Write 0 or 50 in the E point total box E Point Total
- F. Has the operator-in-charge maintained recertification requirements during the reporting year? Check one box X yes no
- G. How many hours of continuing education has the operator-in-charge completed over the last two calendar years? Check one box X 12 hours or more = 0 points Less than 12 hours = 50 points
Write 0 or 50 in the G point total box G Point Total
- H. Is there a written policy regarding continuing education and training for wastewater treatment plant employees? Check one box X yes no

Explain:

District and Operation Company has policy on plant requirements.

- I. What percentage of the continuing education expenses of the operator-in-charge were paid for:
By the permittee? 0
By the operator? 100%
- J. Add together the E and G point values and place this sum in the box below at the right:

TOTAL POINT VALUE FOR PART 7 **(max=100)**

Also enter this value on the point calculation table on page 16.

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PART 8 - FINANCIAL STATUS

A. Are User-Charge Revenues sufficient to cover operation and maintenance expenses?
Check one box Yes No If no, how are O & M costs being financed?
Explain:

user fees collected for each user provide adequate funds for routine O&M.

B. What financial resources do you have available to pay for your wastewater improvements and reconstruction needs?

Revenues, loans, invested savings and increased user fees.

PART OF SUBSTRUCTURE EVALUATION

A. Collection System Maintenance

1. Describe what sewer system maintenance work has been done in the last year.

General repairs, flow meter repairs, Collection system repair projects and repairs due to system camera work. Repaired several main line cracks and leaks.

2. Describe what lift station work has been done in the last year.

General maintenance, cleaning, belts, lubrication. Pump and motor repairs.

3. What collection system improvements does the community have under consideration for the next 5 years?

District has lined or repaired large sections of the collection system pipes in years past to minimize INI/overflow issues in collection system. District obtained a loan to upgrade collection system lift stations and piping. On-going work to the collection system continues in 2022 as a new force main is being added to minimize hydraulic loading on current lift stations.

B. If you have ponds, please answer the following questions: **NA**

- | | | |
|--|------------------------------|-----------------------------|
| 1. Do you have duckweed buildup in your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Do you mow your dikes regularly (at least monthly), to the waters edge? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Do you have bushes or trees growing on the dikes or in the ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you have excess sludge buildup (>1 foot) on the bottom of any of your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Do you exercise all of your valves? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Are your control manholes in good structural shape? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Do you maintain at least three feet of freeboard in all your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Do you visit your pond system, at least weekly? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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C. Treatment Plants

1. Have the influent and effluent flow meters been calibrated in the last year? Yes No

Influent flow meter calibration date(s):

Effluent flow meter calibration date(s):

| | |
|------|-------------------|
| NONE | February 23, 2021 |
|------|-------------------|

2. What problems, if any, have been experienced over the last year that have threatened treatment?

System flow during rainfall may hydraulically overload the plant.

3. Is your community presently involved in formal planning for treatment facility upgrading?

Yes No

If yes, describe:

Plant upgrade was initiated during 2013 and continued in 2015-work was completed in 2016.

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D. Preventive Maintenance

1. Does your plant have a written plan for preventive maintenance on major equipment items?

Yes No If yes, describe:

Daily inspection of plant and lift stations to identify present and future maintenance issues.

2. Does this preventive maintenance program depict frequency of intervals, types of lubrication, and other preventive maintenance tasks necessary for each piece of equipment? Yes No

3. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assessed properly? Yes No

E. Sewer Use Ordinance

1. Does your community have a sewer use ordinance that limits or prohibits the discharge of excessive conventional pollutants (BOD, TSS, or pH) or toxic substances to the sewer from industries, commercial users, and residences?

Yes No If yes, describe:

NA

2. Has it been necessary to enforce? Yes No If yes, describe:

NA

F. Any additional comments about your treatment plant or collection system? (Attach additional sheet if necessary.)

NONE

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POINT CALCULATION TABLE

Fill in the values from parts 1 through 7 in the columns below. Add the numbers in the left column to determine the point total that the wastewater system has generated for the previous year.

| Actual Values | Actual Values | Maximum |
|--|---------------|------------|
| Part 1: Influent Flow/Loadings | <u>20</u> | 80 Points |
| Part 2: Effluent Quality/Plant Performance | <u>20</u> | 100 Points |
| Part 3: Age of WWTT | <u>15</u> | 50 Points |
| Part 4: Overflows and Bypasses | <u>100</u> | 100 Points |
| Part 5: Ultimate Disposition of Sludge | <u>0</u> | 100 Points |
| Part 6: New Development | <u>0</u> | 30 Points |
| Part 7: Operator Certification Training | <u>0</u> | 100 Points |

TOTAL POINTS

155

MWPP RESOLUTION

St. Tammany Parish Sewerage District No. 1 - Covington Country Club

Resolved that the Board of St. Tammany Sewerage District No. 1 informs Louisiana Department of Environmental Quality that the following actions were taken by the Sewerage Board (governing body).

1. Reviewed the Municipal Water Pollution Prevention Environmental Audit Report which is attached to this resolution.
2. Set forth the following actions necessary to maintain permit requirements contained in the Louisiana Water Discharge Permit System (LPDES) number LA0080403.

(Please be specific in listing the actions that will be taken to address the problems identified in the audit report.)

- a. Continue to provide certified operators for operation and provide 16 hours of training per operator over the next year. This training will be conducted thru outside training sessions.
- b. Minimize I&I flow to the system by proper sewer collection planning and additional pipe lining when identified.
- c. Maintain and provide general maintenance to the upgraded Plant and lift stations to address problems as they appear.
- d. Investigate new procedures for solids handling at the facility including investigate a more cost effective method of solids disposal.
- e. Continue monitoring Influent testing for elevated BOD/TSS results and compare to effluent discharge results to monitor overall plant efficiency for plant annual audit.
- f. Ensure flow meter calibration during Audit Year.
- g. Continue to monitor Collection System using smoke testing and camera results.
- h. Monitor, review and report on "high flow" conditions in the Plant during heavy rainfall and normal high flow times.

Passed by a majority unanimous (circle one) vote of the Board of St. Tammany Sewerage District No. 1 on April 6, 2022 (date).



Roger Kocken Secretary

CLERK