

STATE OF LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Environmental Services – Water Permits Division
Post Office Box 4313
Baton Rouge, LA 70821-4313
PHONE#: (225) 219-3050

NOTICE OF INTENT

FOR

THE DISPOSAL OF SEWAGE SLUDGE (BIOSOLIDS) IN PERMITTED LANDFILLS

IN

LOUISIANA

Date		Select	☐ Initial Permit
Agency Interest	ΑI	One:	☐ Permit Renewal
			☐ Existing Facility

STATE OF LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY

Office of Environmental Services
Post Office Box 4313
Baton Rouge, LA 70821-4313
PHONE#: (225) 219-3181

NOTICE OF INTENT FOR THE DISPOSAL OF SEWAGE SLUDGE (BIOSOLIDS) IN PERMITTED LANDFILLS

(Attach additional pages if needed.)

SECTION I - GENERAL INFORMATION

Α.	Permit is	to be	issued to	the	following:
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1.	Legal Name of Applicant/Or (Company, Partnership, Co		etc.)				
	Facility Name						
	Mailing Address						
					Zip Code:		
	Please check status:	Federal State	Parisl	<u>=</u> '		:	
2.	Physical Address of the Fac	ility:					
	City			Parish			
	Front Gate Coordinates:						
	Latitudedeg	_min	_sec.	Longitude-	deg.	_ min	_sec.
	Method of Coordinate Determinate Determina	mination:					
			(Qı	ıad Map, Previou	us Permit, web	site, GPS)	
3.	Name & Title of Contact Person at Facility						
	Phone	Fax _		e-mail			
В.	Name and address of resp	onsible rep	oresentativ	e who complete	ed the applica	ation:	
	Name & Title	_		•			
	Company						
	Phone						
	Address						

SECTION I - GENERAL INFORMATION (continued)

Please	check ($$) the appropriate blank.	
The app	olicant is:	
1.	Owner of the facility	
2.	Operator of the facility	
3.	Owner & Operator of the facility	
Provide	the name and telephone number of t	he Operator of the facility, if other than the owner:
Na	me:	Telephone:
C. Fa	cility Category (Select all that applies)	:
	Publicly Owned Treatment Works	
	· · · · · · · · · · · · · · · · · · ·	ter Treatment Facility Businesses and Industrial or Petro-Chemical Facilities separate from any process wastewater.)
		NOTE: If the sewage sludge is prepared as a Biosolids sercial Preparer of Sewage Sludge and do not fit in the category.)
	Commercial Preparer of Sewage SI	udge (Includes a solidification/dewatering facility)

Provide the following information for each facility where sewage sludge is generated. Make extra copies of the "SPECIFIC FACILITY INFORMATION" pages to address each facility that will generate and/or treat sewage sludge that is addressed in this permit application.

A.	Type of sewage sludge that	will be hand	l <u>e</u> d at this fac	ility (Select all	l t <u>ha</u> t a	appli	es):		
	Sludge from POTW or POTW	SWTF	Domestic S	Septage	F	orta	ble Toile	<u>t W</u> a	aste
B.	Is Grease Trap Waste hand	dled and mixe	ed with sewa	ge sludge at tl	his				
	facility?						Yes		No
C.	Tons/Yr of sewag	e sludge that	t is generated	at your facilit	y on a	Dry	Weight	Basi	is
D.	Tons/Yr of sewag							sis	
E.	Is the sewage sludge that is		m off-site tota	Illy generated	at a fa	acilit	y that is		
	owned/operated by the appl	icant?							
	Yes			s to the follow					
	1. Name, address, owner/							ecei\	/ed for
	each off-site location as 2. Will the blending, comp							ecei	ved
	from an off-site facility t	hat is not ow	ned/operated						
	monetary profit or other				_				
				ance of the F i APPENDIX SF					:O –
	FINANCIAL A			ALL LINDIA OF	LOIF	10 1	AUILIII	11 111	<u> </u>
	No								
_		1	de teest 1 t	(l f ''')	- 5			_	
F.	Tons/Yr of sewag	e sludge that	is treated at	tne facility on	a Dry	wei	gnt Basi	S	
G.	Sewage Sludge Treatment	`			•		•		
	requirements for each Trea		ss that pertain	ns to your fac	cility as	s AF	PENDIX	(SE	WAGE
	SLUDGE TREATMENT PR	•							
	Oxidation Pond/A						one die	aror	ma and
	Provide a detailed schematics that are								
	process.		15 1411, 4000		ai				
	Indicate as to who					_			
	wetland system is protection:	adequately	lined (natura	i soils or art	iticial	liner) for gro	ounc	ı water
	protection.								
	1 163	•		C FACILITY			•		
	by a Q			ntist (As defir					•
				e pond or lago vater contami					
				ydraulic cond					
	per se	cond or les	ss and ade	quately prote	ect aç	gains	t the p	ooter	ntial to
				Document				rtifie	d by a
				d Groundwate FIC FACILIT			-	a 1	datailad
				ualified Grou					
				w the groun					
		tely protec		t potential					NOTE:
				I by a signate	ure ar	nd s	eal of th	ie Q	ualified
	Ground	lwater Scient	ا&ا.]						

Air Drying/Drying Beds
Provide a detailed description of the drying bed(s). Include maps, diagrams and schematics that are necessary to fully describe the location and handling of the air drying/drying beds operation. Include in the description time (in months), and the ambient average daily temperature for the months that the sewage sludge will undergo the air drying/drying bed process. Also include in the description a discussion as to how stormwater runoff and run-on will be prevented or controlled.
Belt Press
Provide a detailed description of the belt press. Include maps, diagrams and schematics that are necessary to fully describe the size, type, location and handling of the belt press operation.
Solidification & De-watering
Provide a detailed description of the solidification & de-watering. Include maps, diagrams and schematics that are necessary to fully describe the size, type, location, process flow, and handling of the solidification & de-watering process.
Anaerobic Digestion
Provide a detailed description of the anaerobic digestion process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the anaerobic digestion process. Include adequate documentation to show that the appropriate anaerobic conditions, solids retention time, and temperature requirements will be maintained.
Aerobic Digestion
Provide a detailed description of the aerobic digestion process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the aerobic digestion process. Include adequate documentation to show that the aerobic conditions, solids retention time, and temperature requirements will be maintained.
Thermal Treatment
Provide a detailed description of the thermal treatment operation. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the thermal treatment process. Include calculations to document an accurate determination of the "time & temperature" requirements and how all sewage sludge particles will meet the appropriate time and temperature requirements.
Alkaline Treatment/Lime Stabilization
Provide a detailed description of the alkaline treatment process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the alkaline treatment process. Include documentation to show how all sewage sludge particles will meet the appropriate pH value and time requirements.

Composting
Within-Vessel Static Aerated Pile Windrow Provide a detailed description of the composting operation. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the composting operation. Include calculations to document an accurate determination of the "time & temperature" requirements and how all sewage sludge particles will meet the appropriate time and temperature requirements.).
Provide a list and detailed description of all Feedstocks or Supplements that will be blended, mixed, and composted with the sewage sludge. [For each Feedstock or Supplement, include all laboratory results to (1) prove that the feedstock or supplement is non-hazardous by a hazardous waste determination in accordance with LAC 33:Part V and/or 40 CFR Part 261 and (2) to show that the level of Polychlorinated biphenyls (PCB's) is less than 50 milligrams per kilogram of total solids (dry weight basis)].
Heat Drying
Provide a detailed description of the thermal treatment operation. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the thermal treatment process. Include documentation as to how the process will meet the "time & temperature" and "moisture content" requirements.).
Heat Treatment
Provide a detailed description of the heat treatment process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the heat treatment process. Include documentation that will insure that "time & temperature" requirements will be attained.
Thermophilic Aerobic Digestion
Provide a detailed description of the thermophilic aerobic digestion process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the thermophilic aerobic digestion process. Include adequate documentation to show that the aerobic conditions and the appropriate retention time & temperature requirements will be maintained.
Beta or Gamma Ray Irradiation
Beta Ray Irradiation Gamma Ray Irradiation Provide a detailed description of the irradiation treatment process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and operation of the irradiation treatment process. Include adequate documentation to show that the dosages and temperature requirements will be maintained.
Pasteurization
Provide a detailed description of the pasteurization treatment process. Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the pasteurization treatment process. Include adequate documentation to show

that the time & temperature requirements will be maintained.

H.	Tons/Yr of treated sewage sludge (Biosolids) that is produced at your facility (Dry Weight Basis)
I.	Storage:
	Will untreated sewage sludge be stored at this facility?
	Yes Indicate the length of time (in months) Months
	No
	Will treated sewage sludge (Biosolids) be stored at this facility?
	Yes Indicate the length of time (in months) Months
J.	If the response to any of the questions in "I.", above, is "Yes", then provide a detailed description of the storage process as APPENDIX SPECIFIC FACILITY INFO – STORAGE (Include maps, diagrams and schematics that are necessary to fully describe the location, handling, and flow of the storage process. Include adequate documentation to show that stormwater run-on, stormwater runoff, and infiltration will be prevented or controlled. Stormwater run-on and runoff protection shall be based upon a 24-hour/25-year storm event.). Provide as APPENDIX SPECIFIC FACILITY INFO – OTHER REQUIREMENTS, a description of how the following will be addressed: 1. Collection, treatment, and disposal of leachate, vehicle and equipment wash-down water, or other contaminated wastewater that will be generated during the sewage sludge treatment process. 2. Odor control.
K.	Is the applicant a POTW?
	Yes If Yes, Is the POTW's Sewage Sludge Treatment Facility located outside of the perimeter of or at a separate location then the POTW? Yes You must complete Section III Siting and Operation
	No You must Provide a copy of the Facility Operations and Maintenance Manual as APPENDIX SPECIFIC FACILITY INFO - POTW O & M, (The O & M Manual must describe, in specific detail, how the sewage sludge and the other feedstock or supplements to be blended, composted, or mixed with the sewage sludge will be managed during all phases of processing operations. See LAC 33:IX.7305.C.1.a.ii for a list of the minimum items that the O & M Manual must address.)
	If no, you may skip Section III Siting and Operation and complete Section IV Landfill Information
	No You must complete Section III Siting and Operation

SECTION III - SITING AND OPERATION

Complete the following information for each facility where sewage sludge will be blended, composted, mixed, prepared, or treated. Make extra copies if needed to cover each facility.

Siti	ng Distance	es (Buffer Zones):
1.		cility located 200 feet from a property line?
	Yes	
	No	Provide a copy of the notarized affidavit, of the adjoining landowners and occupants waiving the 200-foot buffer zone that was entered in the mortgage and conveyance records of the parish for the adjoining landowner's property as APPENDIX SITE & OP – WAIVER PLB.
2.	Is the Face Park?	cility located within the boundaries of a legally zoned and established Industrial
	Yes	Provide documentation that the Facility is located within the boundaries of a legally zoned and established Industrial Park as APPENDIX SITE & OP – IP (The documentation must include a signed legal document and maps showing the location of the Industrial Park.)
	No	If the selection is " No ", indicate if the Facility meets the following buffer zones in 2.a – 2.d ?
	a.	500 feet from an established home residence –
		Yes
	b.	No Provide a copy of the special notarized affidavit that was executed by the owner granting waiver of the 500 feet buffer down to 200 feet as APPENDIX SITE & OP – WAIVER HOME. 1,000 feet from an established school, hospital, institution, day-care facility, nursing home, hotel/motel, playground, park, golf course or restaurant/food establishment -
		Yes
		No Provide a copy of the special notarized affidavit that was executed by a qualified representative of the established school, hospital, institution, day-care facility, nursing home, hotel/motel, playground, park, golf course or restaurant/food establishment granting waiver of the 1,000 feet buffer down to 200 feet as APPENDIX SITE & OP – WAIVER OTHER B.
	C.	300 feet from a private potable water supply or a private water supply elevated or ground storage tank –
		Yes
		No Provide a copy of the special permission that was granted by the private water supply or private water supply elevated or ground storage tank owner that allows the locating of the Facility at a distance of less than 300 feet from a private potable water supply or a private water supply elevated or ground storage tank APPENDIX SITE & OP – WAIVER PRIVATE H ₂ O.

A.

SECTION III - SITING AND OPERATION

	 d. 300 feet from a public potable water supply or a public water supply elevated or ground storage tank –
	Yes
	No Provide a copy of the special permission that was granted by the Department of Health and Hospitals that allows the locating of the Facility at a distance of less than 300 feet from a public potable water supply or a public water supply elevated or ground storage tank APPENDIX SITE & OP – WAIVER PUBLIC H ₂ O.
3.	Is this facility located on an airport property?
	Yes
	a. Provide a copy of the approval from the U.S. Department of Transportation's Federal Aviation Administration (FAA) as APPENDIX SITE & OP – FAA.
	b. Is the facility 1,200 feet from any aircraft's approach or departure airspace or <i>Air Operations Area</i> as defined in LAC 33:IX.7301.B; or the distance called for by the U. S. Department of Transportation Federal Aviation Administration's airport design requirements for a facility that prepare or compost only sewage sludge or blend, mix, or compost sewage sludge and have only woodchips or yard waste (e.g., leaves, lawn clippings, or branches) as feed stock or supplements Yes No Is the facility 5,000 feet from any airport property boundary (including any aircraft's approach or departure airspace or Air Operations Area) if the airport
	does not sell Jet-A fuel and serves only piston-powered aircrafts; or 10,000 feet from any airport property boundary (including any aircraft's approach or departure airspace or Air Operations Area) if the airport sells Jet-A fuel and serves turbine-powered aircrafts or sells Jet-A fuel and is designed to serve turbine-powered and/or piston-powered aircrafts for a facility that blend, mix, or compost sewage sludge that include food or other municipal solid waste as feed stock or supplements
4.	L Yes No Is the facility located 100 feet from a wetlands, surface waters (streams, ponds, lakes), or areas historically subject to overflow from floods?
	Yes No
5.	Sensitive Areas. Provide the following documentation: Swamps, marshes, wetlands → Provide as APPENDIX SITE & OP – CORPS OF ENGINEERS a copy of the correspondence(s) from the Department of the Army/US Corps of Engineers that indicates that the facility will have no effects on these sites. Estuaries, wildlife-hatchery areas, habitat of endangered species → Provide as APPENDIX SITE & OP – WILDLIFE & FISHERIES a copy of the correspondence(s) from the Louisiana Department of Wildlife & Fisheries and the U.S. Fish & Wildlife Services that indicates that the facility will have no effects on these sites.
	Archaeological, historical, cultural, or other sensitive ecological sites → Provide as APPENDIX SITE & OP − CRT a copy of the correspondence(s) from the Louisiana Department of Culture, Recreation, and Tourism that indicates that the facility will have no effects on these sites.

SECTION III - SITING AND OPERATION

	6.	Will untreated sewage sludge and/or supplement or feedstock material to be utilized at the facility be located less than 25 feet from a subsurface drainage pipe or drainage ditch that discharges directly to waters of the state?
		Yes No
В	Stor	age:
	1.	Will untreated sewage sludge be stored at this facility?
		Yes Indicate the length of time (in months) Months
		No
	2.	Will treated sewage sludge (Biosolids) be stored at this facility?
		Yes Indicate the length of time (in months) Months
		No
	3.	Will "supplements", "feedstock", or "fillers" be stored at this facility?
		Yes Indicate the length of time (in months) Months
		No
		If the response to any of the questions in "b.", above is "Yes", then provide a detailed
		description of the storage process as APPENDIX SITE & OP – S (Include maps, diagrams
		and schematics that are necessary to fully describe the location, handling, and flow of the storage process. Indicate the length of time that treated sewage sludge will be stored at
		the facility. Include adequate documentation to show that stormwater run-on, stormwater
		runoff, and infiltration will be prevented or controlled. Stormwater run-on and runoff
_	_	protection shall be based upon a 24-hour/25-year storm event.)
C.		vide, as APPENDIX SITE & OP – SIGNS, an artist design, photo, or copy of signs that will be
	•	ted around the facility perimeter. At the minimum, the signs must contain the Name of the ility, Contact Person, Contact Telephone Number, Emergency Telephone Number, Hours of
		eration, and Types of Materials that will be handled at this facility.
D.	Pro۱	vide a copy of the Facility Operations and Maintenance Manual as APPENDIX SITE & OP
		ACILITY O & M MANUAL. (The O & M Manual must describe, in specific detail, how the
		age sludge and the other feedstock or supplements to be blended, composted, or mixed with
		sewage sludge will be managed during all phases of processing operations. See LAC X.7305.C.1.a.ii for a list of the minimum items that the O & M Manual must address.)
E.		vide as APPENDIX SITE & OP – CLOSURE PLAN, a detailed explanation of how Closure
		be addressed for this facility (See LAC 33:IX.7305.C.3 for the proper closure requirements.)

SECTION IV - LANDFILL INFORMATION

Provide the information for each Solid Waste Landfill where sewage sludge from your facility is disposed. If more than one Solid Waste Landfill is utilized for the disposal of sewage sludge from your facility, make extra copies to address each Solid Waste Landfill.

Α.	Name of the Solid Waste Landfill:					
	Physical Address					
	City: State: Parish:					
	Telephone Number:					
	Contact Person:					
	Title:					
	Contact Telephone Number:					
	Email Address:					
	Is the Contact Person the owner or operator (or both) of the Solid Waste Landfill?					
В.	Check One: Owner Operator Both Provide the following Permit Numbers for this Solid Waste Landfill (Type in N/A if the Solid Waste Landfill does not possess the requested Permit.):					
	Solid Waste Permit Number:					
	Hazardous Waste Permit Number:					
	Louisiana Pollutant Discharge Elimination System (LPDES) Permit Number:					
C.	Air Quality or Title V Permit Number: If the Solid Waste Landfill is located in a state other than Louisiana, provide the following Permit Numbers (Type in N/A if the Solid Waste Landfill does not possess the requested Permit.):					
	Solid Waste Permit Number:					
	Hazardous Waste Permit Number:					
	Wastewater Discharge Permit Number:					
D.	Air Quality or Title V Permit Number: Provide documentation (Signed letter from the Solid Waste Landfill Owner/Operator) that this Solid Waste Landfill is capable and willing to accept the sewage sludge from your facility. Provide this information as APPENDIX LANDFILL - A of this permit application.					
E. F.	Tons/Yr of sewage sludge disposed at this Landfill (Dry Weight Basis) Submit, with this application as APPENDIX LANDFILL - B, documentation that the sewage sludge meets the applicable requirements for disposal in this Solid Waste Landfill. Documentation shall include, but is not limited to, the following:					

- A determination that the sewage sludge is non-hazardous by a hazardous waste determination in accordance with LAC 33:Part V and/or 40 CFR Part 261.
- A determination that the sewage sludge level of Polychlorinated biphenyls (PCB's) is less than 50 milligrams per kilogram of total solids (dry weight basis).
- A determination that the sewage sludge does not contain "free liquids" as defined by Method 9095 (Paint Filter Liquids Test), as described in "Test Methods for Evaluating Solid Wastes, Physical/Chemical Methods" (EPA Pub. No. SW-846).
- G. If any of the analysis reported in **g.** above were performed by a contract lab or consulting firm, provide the firm name, address, phone number, LELAP Certification Number, and pollutants analyzed as APPENDIX LANDFILL LAB.

SECTION V - TRANSPORATION

OLOTION V - INAMOLOMATION				
Is raw, untreated sewage sludge transported to this facility from an off-site location?				
Yes				
A. Are you the owner of the vehicles being utilized for the transportation of the raw, untreated sewage sludge?				
Ye	es			
1.	Office of Environmental Services, Water Permits Division or (ii) provide as APPENDIX TRANSPORT – TRANSPORTER LICENSE, a copy of your Transporter's License and Number that was obtained from the Office of Environmental Service, Water Permits Division.			
2.	assure that the vehicles are in compliance with the following			
N ₁				
1.	Provide either the name of the transporter or the name of the transporter company:			
2.	Provide the address of the transporter or transporter company:			
3.	Provide the name of the contact person of the transporter company:			
4.	Provide the contact telephone number of the transporter or transporter company:			
No				

SECTION VI - ENVIRONMENTAL IMPACT QUESTIONAIRE

There is no requirement that the information furnished in response to this questionnaire be certified by a professional engineer or other expert. However, simple "yes" or "no" answers will not be acceptable. A measured response should be given for each question posed, taking into consideration appropriate factors such as: the environmental sensitivity of the area, both for the proposed site and alternative sites; impacts on the economy of the area, both favorable and unfavorable; availability of raw materials, fuels and transportation and the impact of potential sites on their availability and economics; relationship of the facility to other facilities, either within or independent of the company, and the effects of location on these relationships; and other factors which may be appropriate on a case-by-case basis. (Attach any additional pages if needed.) Provide responses to the following as APPENDIX ENVIRONMENTAL IMPACT

- A. Provide a detailed discussion demonstrating that the potential and real adverse environmental effects of the proposed facility have been avoided to the maximum extent possible [Determine any "potential" effects that the project may have upon human health and/or the environment Air Quality, Surface Waterbodies, Drinking water supplies, Soils & Crops, Potential adverse effects on children and the elderly, Economy of the area. If any "potential" effects exist, explain how they will be avoided to the "maximum" extent possible (Address each "potential" effect separately.). If no "potential" effects should exist, there is a need to indicate that no human health and/or environmental adverse effects exist and provide some "documented" support as to why none exist. Indicate any benefits that will be derived from the project with regards to any environmental or human health issues. Provide any documentation that will support the benefits that will be derived from the project.].
- B. Provide a cost benefit analysis that balances the environmental-impact costs against the social and economic benefits of the facility and demonstrates that the latter outweighs the former (If any "potential" adverse effects to human health and/or the environment should exist, provide adequate documentation to show that they will be outweighed by any social & economic benefits. Demonstrate the social & economic benefits that will be derived from the project. Provide any documentation that will support the benefits. If no "potential" adverse effects to human health and/or the environment exist, demonstrate any benefits that will be derived from the project that will further enhance the social & economic status of the area. Provide any documentation that will support the benefits that will be derived from the project.).
- C. Provide a discussion and description of possible alternative projects which would offer more protection to the environment than the proposed facility without unduly curtailing non-environmental benefits [Survey and evaluate, in detail, as many alternative sewage sludge use or disposal projects as possible More than one project must be evaluated. List all the projects evaluated. Indicate, in detail the reasons why the particular project was chosen above the other projects that were evaluated (Indicate the reasons why the alternative projects were not feasible.)].
- D. Provide a detailed discussion of possible alternative sites which would offer more protection to the environment than the proposed facility site without unduly curtailing non-environmental benefits [Survey and evaluate, in detail, as many alternative sites for the projects as possible More than one site must be evaluated. List all the sites evaluated. Indicate, in detail the reasons why the particular site was chosen above the other sites that were evaluated (Indicate the reasons why the alternative sites were not feasible.)].
- E. Provide a discussion and description of mitigating measures which would offer more protection to the environment than the facility as proposed without unduly curtailing non-environmental benefits (Indicate any additional measures, other than documented "mitigating measures" that you are willing to undertake which goes beyond the minimum requirements of the regulations that will afford increased protection of human health and/or the environment. Give supporting documentation as to why these measures will afford increased protection of human health and/or the environment.).

SECTION VII - LAC 33.I.1701 REQUIREMENTS

A.	Does the company or owner have federal or state environmental permits identical to, or of a similar nature to, the permit for which you are applying in other states? (This requirement applies to all individuals, partnerships, corporations, or other entities who own a controlling interest of 50% or more in your company, or who participate in the environmental management of the facility for an entity applying for the permit or an ownership interest in the permit.) Permits in Louisiana. List Permit Numbers:
	Permits in other states (list states):
В.	No other environmental permits. Do you owe any outstanding fees or final penalties to the Department? Yes No
	If yes, please explain.
C.	Is your company a corporation or limited liability company? Yes No
	If yes, is the corporation or LLC registered with the Secretary of State? Yes No If yes, include a copy of the registration in APPENDIX LAC 33:I.1701

SECTION VIII - CERTIFICATION AND SIGNATURE

Print out this sheet, read the "Certification Statement", fill out the sheet as indicated, sign and date and attach to the completed application form.

Certification: Sign the certification statement that follows:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name and Official Title:	
Signature:	
Date	
If the application was completed by a prepresenting the applicant, complete th	erson other than the applicant or a consultant "officially" e following:
Name and Official Title:	
Name of Firm/Organization/Business:	
Signature:	
Date	
Professional License Number or "Offic	ial" Seal:
	or Affix Official Seal Below

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