



To: **Prospective Applicants for a Sanitary Wastewater General Permit**

Attached is a **Sanitary General Wastewater Discharge Permit Notice of Intent (NOI), WPS-G**. To be considered complete, every item on the form must be addressed and the last page signed by an authorized company agent. If an item does not apply, please enter "N/A" (for not applicable) to show that the question was considered.

Two sets (one original and one copy) of your **completed NOI**, each with a site diagram and a marked **U.S.G.S. Quadrangle map** or equivalent attached, as described in Section VI of the NOI, should be submitted to:

**Mailing Address:**

Department of Environmental Quality  
Office of Environmental Services  
Post Office Box 4313  
Baton Rouge, LA 70821-4313  
Attention: Water Permits Division

**Physical Address:**

Department of Environmental Quality  
Office of Environmental Services  
602 N Fifth Street  
Baton Rouge, LA 70821  
Attention: Water Permits Division

**NOIs delivered to the Physical Address above MUST be placed in the drop box specifically for in-person deliveries. A LDEQ date stamp is provided at the drop box location if an additional copy/receipt is needed for your records.** Please be advised that completion of this NOI may not fulfill all state, federal, or local requirements for facilities of this size and type.

According to L. R. S. 48:385, any discharge to a state highway ditch, cross ditch, or right-of-way shall require approval from:

Louisiana DOTD  
Office of Highways  
Post Office Box 94245  
Baton Rouge, LA 70804-9245  
(225) 379-1927

AND

Louisiana Department of Health  
Office of Public Health – Center for  
Environmental Health Services  
Post Office Box 629  
Baton Rouge, LA 70821-0629  
(225) 342-8093

In addition, the plans and specifications for sanitary treatment plants must be approved by the Louisiana Department of Health, Office of Public Health at the address above.

**A copy of the LPDES regulations may be obtained from the Department’s website at <http://deq.louisiana.gov/page/rules-regulations> or from the Office of the Secretary, Regulations Development Section, Post Office Box 4301, Baton Rouge, Louisiana 70821-4303, phone (225) 219-3981.**

After the review of the NOI, this Office will issue written notification to those applicants who are accepted for coverage under a general permit for sanitary discharges.

For questions regarding this NOI please contact the Water Permits Division at (225) 219-3590. For help regarding completion of this NOI please contact DEQ, Small Business/Community Assistance Program at 1-800-259-2890.

**ATTENTION: ANY INFORMATION SUBMITTED TO LDEQ MAY BECOME PUBLIC RECORD IN ACCORDANCE WITH ACT 256 RLS 2019**

Date \_\_\_\_\_  
Agency Interest No. AI \_\_\_\_\_  
LPDES Permit No. LA \_\_\_\_\_

Please check all that apply:  Initial Permit  
 Existing Facility  
 Permit Modification

**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) 219-3590**

**LPDES NOTICE OF INTENT TO DISCHARGE SANITARY WASTEWATER**  
(Attach additional pages if needed.)

**SECTION I - FACILITY INFORMATION**

**A. Permit is to be issued to the following:** (must have operational control over the facility operations - see LAC 33:IX.2501.B and LAC 33:IX.2503.A and B).

1. Legal Name of Applicant (Company, Partnership, Corporation, etc.) \_\_\_\_\_

Facility Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Zip Code: \_\_\_\_\_

If applicant named above is not also the owner, state owner name, phone # and address.

\_\_\_\_\_

Please check status:  Federal  Parish  Municipal  
 State  Public  Private  Other: \_\_\_\_\_

Does the Louisiana Public Service Commission regulate this facility?  Yes  No

If yes, under what Company name is this facility regulated? \_\_\_\_\_

Please consult the LPSC website to determine if your company is regulated.

<http://www.lpsc.louisiana.gov/UtilitySearch.aspx>. If your company is regulated please be aware that you will be required to provide a financial security mechanism for this facility.

2. Location of facility. Please provide a specific address, street, road, highway, interstate, and/or River Mile/Bank location of the facility for which the NOI is being submitted. If possible, please provide the 911 address.

City \_\_\_\_\_ Zip Code: \_\_\_\_\_ Parish \_\_\_\_\_

Front Gate Coordinates:

Latitude- \_\_\_\_ deg. \_\_\_\_ min. \_\_\_\_ sec. Longitude- \_\_\_\_ deg. \_\_\_\_ min. \_\_\_\_ sec.

Method of Coordinate Determination: \_\_\_\_\_

(Quad Map, Previous Permit, website, GPS)

Is the facility located on Indian Lands?  Yes  No

## SECTION I - FACILITY INFORMATION (cont.)

Is the facility located within 10,000 yards of an airport  Yes  No

3. Name & Title of Contact Person at Facility \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

SIC (Standard Industrial Classification) Code(s): \_\_\_\_\_

*SIC codes can be obtained from the U. S. Department of Labor internet site at: <https://www.osha.gov/pls/imis/sicsearch.html>*

Facility Federal Tax I.D. \_\_\_\_\_

### B. Name and address of responsible representative who completed the NOI:

Name & Title \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

Address \_\_\_\_\_

### C. Name and address of responsible billing party (*annual water permit invoices will be mailed to this party*):

Name & Title \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

Address \_\_\_\_\_

### D. Facility Information.

1. What is the date by which this permit is needed? \_\_\_\_\_
2. Who/what does the treatment facility serve? (e.g. apartment complex, subdivision, restaurant, office building, warehouse, etc.).  
\_\_\_\_\_  
\_\_\_\_\_

3. Describe operations at your facility in a comprehensive fashion.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Does the treatment facility receive any commercial food service wastes  Yes  No  
3. and/or participate in commercial food preparation?  Yes  No

(e.g. restaurants, catering businesses, hotels/motels/churches/school with kitchens, etc)

4. Do any of the following activities occur at this site?

Yes  No Equipment and/or vehicle washing (with or without soaps/detergents).

Yes  No Loading & unloading of chemicals/compounds.

Yes  No Outside material and/or equipment storage.

Yes  No Vehicle and/or equipment maintenance.

## SECTION I - FACILITY INFORMATION (cont.)

Explain any "Yes" response(s).

**Please be aware that if "Yes" is checked to any of the activities, this facility may not qualify for coverage under the sanitary general permit. In order to avoid submittal of an additional permit application and delayed permit issuance please contact DEQ at 225-219-3590 to determine the correct application to be submitted for your facility.**

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5. Are there any activities that generate wastewater, other than sanitary, which occur at this site? If yes, please explain.

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6. If this application is for a permit modification, please describe the modification (add extra sheets if needed):

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7. Is this an existing treatment system?  Yes  No

8. Is this for a new construction?  Yes  No

9. For new or proposed facilities; if approval of the plans and specifications for the treatment facility has been granted by the Louisiana Department of Health, Office of Public Health, a copy of the approval letter shall be attached to this application.

For existing facilities, a copy of the approval letter from the Louisiana Department of Health, Office of Public Health, shall be provided with this application, if available.

10. Is this a dental office?  Yes  No

If yes, has an amalgam separator been installed at the facility in accordance with 40 CFR Part 441?  Yes  No

## SECTION I - FACILITY INFORMATION (cont.)

10. Complete the following information as it applies to your facility:

SUBDIVISION

\_\_\_\_\_ Number of existing homes

\_\_\_\_\_ Total number of connections

PUBLICLY OWNED TREATMENT WORKS

\_\_\_\_\_ Design capacity of treatment facility in gpd

TRAILER PARK

\_\_\_\_\_ Number of existing trailers

\_\_\_\_\_ Total number of connections

OFFICE/WAREHOUSE

\_\_\_\_\_ Total number of employees

WASHATERIA/LAUNDROMAT

\_\_\_\_\_ Number of washing machines

APARTMENT COMPLEX

\_\_\_\_\_ Number of 1 bedroom apartments

\_\_\_\_\_ Number of 2 bedroom apartments

\_\_\_\_\_ Number of 3+ bedroom apartments

BAR/LOUNGE

\_\_\_\_\_ Does the bar have regular food service?

\_\_\_\_\_ Number of seats

\_\_\_\_\_ Number of employees

RV CAMPGROUND

\_\_\_\_\_ Is there a dump station?

\_\_\_\_\_ Volume of waste accepted/day in gpd

\_\_\_\_\_ Total number of RV spaces

GAS STATION/CONVENIENCE STORE

\_\_\_\_\_ Number of individual fueling points

If food service is offered, please fill out the section regarding restaurants.

\_\_\_\_\_ Total number of employees

SCHOOLS/DAYCARES

\_\_\_\_\_ Elementary school/daycare, number of pupils

\_\_\_\_\_ Junior/ high schools, number of pupils

\_\_\_\_\_ Total number of employees

HOTELS/MOTELS

\_\_\_\_\_ Any food service available? (Yes/No)

\_\_\_\_\_ Number of rooms

\_\_\_\_\_ Total number of employees

RESTAURANT

\_\_\_\_\_ Is the restaurant open 24 hours/day?

\_\_\_\_\_ Is the restaurant along a freeway?

\_\_\_\_\_ Is the restaurant considered a "Fast Food" Restaurant? (Yes/No)

\_\_\_\_\_ Total number of employees

\_\_\_\_\_ Number of seats

\_\_\_\_\_ Is this a seafood restaurant that boils?

\_\_\_\_\_ If yes, does the boil water enter the sanitary treatment plant?

CHURCH

\_\_\_\_\_ Does the church have a kitchen?

\_\_\_\_\_ Number of sanctuary seats

RETAIL SHOPPING CENTER

\_\_\_\_\_ Total number of employees

VIDEO POKER

\_\_\_\_\_ Number of machines

HOSPITAL

\_\_\_\_\_ Number of beds

\_\_\_\_\_ Number of employees

NURSING HOME

\_\_\_\_\_ Total number of patients

\_\_\_\_\_ Total number of employees

SHOWERS

\_\_\_\_\_ Number of individual showers

11. If your facility is not listed above, please give a detailed description including the number of units, number of employees/residents, etc.

**\* If you are a POTW (including schools, libraries, fire stations, etc. owned and operated by a municipality), you MUST supply the design capacity of your treatment facility in gpd**

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## SECTION I - FACILITY INFORMATION (cont.)

12. If this facility is a shopping center, list the types of businesses, square footage of the shopping center, and total number of employees served by the treatment facility.

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## SECTION II - TREATMENT INFORMATION

### A. Treatment Facility Information

1. What type of treatment system serves this facility? (i.e. aerated treatment system, septic system, or oxidation pond)

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What disinfection method does the facility utilize?

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2. If this treatment plant receives any wastewater other than sanitary, list the source(s) and amounts.

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3. Are any indirect discharges introduced into the treatment facility (septic hauled wastes, port-o-let wastes, etc.)? **Please note that acceptance of hauled sewage sludge may prohibit coverage under a general sanitary permit.**

Yes       No

If yes, provide the following for each indirect discharger:

| Company Name | Address | Type of Waste | Average Daily Flow in GPD | Current LDEQ Hauler's License Number |
|--------------|---------|---------------|---------------------------|--------------------------------------|
|              |         |               |                           |                                      |
|              |         |               |                           |                                      |
|              |         |               |                           |                                      |
|              |         |               |                           |                                      |

### SECTION III - DISCHARGE INFORMATION

#### A. Discharges requiring approval from the US Fish and Wildlife Service:

Discharges to certain sensitive waters deemed important for the conservation of threatened and endangered species require approval from the US Fish and Wildlife Service (USFWS) prior to eligibility for automatic coverage under the general permit. You must consult the attached GUIDANCE DOCUMENT FOR DETERMINING IF YOUR DISCHARGE(S) REQUIRE PRIOR APPROVAL FROM THE FISH AND WILDLIFE SERVICE

Note: For further environmental review process consultation, including listed species, critical habitat, migratory birds, or other natural resources that may be impacted by your project, please see the USFWS IPaC project planning tool: <https://ipac.ecosphere.fws.gov/>

After consultation with the attached guidance document, please check the appropriate statement:

- I have determined that the discharge(s) will not enter sensitive waters and that I do not need to obtain approval from the US Fish and Wildlife Service prior to submittal for coverage under this general permit.
- I have determined that the discharge(s) will enter sensitive waters. I have obtained the necessary approval from the US Fish and Wildlife Service and a copy of that approval is attached.

#### B. Discharges Requiring Approval from the Louisiana State Historic Preservation Officer:

If this NOI is being completed for a facility that has not yet been cleared or excavated, you should contact the *Section 106 Review Coordinator in the Office of Cultural Development, Archaeology Division (P. O. Box 44247, Baton Rouge, LA 70804 or telephone (225) 342-8170)* to determine if construction activities or the proposed discharges will adversely affect properties listed or eligible for listing in the National Register of Historic Places.

- This is an existing facility and no construction activities related to this NOI are proposed.
- This is a proposed facility and construction activities are not yet complete. I have not obtained approval from the State Historic Preservation Officer for the proposed construction activities. Please refer to the permit for instructions related to additional permitting requirements for storm water discharges related to construction activities.
- This is a proposed facility and construction activities are not yet complete but I have obtained approval from the State Historic Preservation Officer for the proposed construction activities. (Submit a copy of the approval letter with your NOI.) Please refer to the permit for instructions related to additional permitting requirements for storm water discharges related to construction activities.

**Please note that if an application for a new proposed facility is received without the certification form from SHPO, it will not be considered administratively complete. The applicant is responsible for obtaining and submitting this certification to LDEQ; therefore, the applicant is encouraged to submit the SHPO certification along with the NOI to avoid processing delays.**

## SECTION III - DISCHARGE INFORMATION (cont.)

**C. Complete this section for each discharge outfall.** Outfalls are discharge points. An external outfall is a discrete discharge point beyond which the waste stream receives no further mixing with other waste streams prior to discharging into a receiving waterbody. An internal outfall is an outfall for a waste stream that combines with other waste stream(s) before discharging into an "external" outfall. Make additional copies for each outfall.

1. Outfall Identification. Provide a description of all the wastewater types to the effluent.  
(ex: Outfall 001 – sanitary wastewater – 5,000 gpd)

The average flow reported below relates solely to discharge flow, not treatment system size requirements. The Louisiana Department of Health and Hospitals uses additional criteria including, but not limited to, biological loading to determine design capacity requirements which may differ from the discharge flow.

| Outfall No. | Wastewater Type | Average Flow (gpd) |
|-------------|-----------------|--------------------|
|             |                 |                    |
|             |                 |                    |

2. Outfall Location. Provide a description of the physical location for each outfall.

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3. Latitude/Longitude of Discharge Point:

Latitude- \_\_\_ deg. \_\_\_ min. \_\_\_ sec.    Longitude- \_\_\_ deg. \_\_\_ min. \_\_\_ sec.

Method of Coordinate Determination: \_\_\_\_\_

*(Quad Map, Previous Permit, website, GPS)*

4. If a new discharge, when do you expect to begin discharging? \_\_\_\_\_

5. Indicate how the wastewater reaches state waters (named water bodies). This will usually be either *directly*, by *open ditch* (if it is a highway ditch, indicate the highway), or by *pipe*. **Please specifically name all of the minor water bodies that your wastewater will travel through on the way to a major water body.** This information can be obtained from U.S.G.S. Quadrangle Maps. Include river mile of discharge point if available.

By \_\_\_\_\_ (effluent pipe, ditch, etc.);

thence into \_\_\_\_\_ (parish drainage ditch, canal, etc.);

thence into \_\_\_\_\_ (named bayou, creek, stream, etc.);

thence into \_\_\_\_\_ (river, lake, etc.).

**If this section is left blank, or specifically name waterbody and/or discharge point coordinates are not included, this application will not be accepted as complete.**



### SECTION III - DISCHARGE INFORMATION (cont.)

6. If the discharge is intermittent or seasonal, please complete the following table.

| Frequency of Flow (average) |                         |                         | Flow Rate (mgd) |               |
|-----------------------------|-------------------------|-------------------------|-----------------|---------------|
| Number of Months per Year   | Number of Days per Week | Number of Hours per Day | Long Term Avg.  | Daily Maximum |
|                             |                         |                         |                 |               |

### SECTION IV – COMPLIANCE HISTORY

**A.** Report the history of all violations and enforcement actions for this facility and all other facilities owned or operated by this applicant, a summary of all permit excursions including effluent violations reported on the facility's Discharge Monitoring Reports (DMRs) and bypasses for the last three years. Using a brief summary, report on the current status of all administrative orders, compliance orders, notices of violation, cease and desist orders, and any other enforcement actions either already resolved within the past 3 years or currently pending. The state administrative authority may choose, at its discretion, to require a more in-depth report of violations and compliance actions for the applicant covering any law, permit, or order concerning pollution at this or any other facility owned or operated by the applicant. **Please attach the report to this application.**

### SECTION V – 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): \_\_\_\_\_

No other environmental permits.

**B.** 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 Louisiana Secretary of State?  Yes  No

**If yes, attach a copy of your company's Certificate of Registration and/or Certificate of Good Standing from the Louisiana Secretary of State.**

### SECTION VI – MAPS/DIAGRAMS

**A. Site Diagram.** Attach to this NOI a complete site diagram of your facility showing the boundaries of your facility, the location of all buildings and/or storage areas, the location of treatment units (such as settling basins, oxidation ponds, sewage treatment plants), and demonstrate how the wastewater flows through your facility into each **clearly labeled discharge point** (including all treatment points). Please indicate the location of the facility and the front gate or entrance to the facility on the site diagram. The diagram does not need to be drawn to scale.

## SECTION VI – MAPS/DIAGRAMS (cont.)

- B. Topographic Map.** Attach to this NOI a map or a copy of a section of the map which has been **highlighted to show the path of your wastewater from your facility to the first named water body**. Include on the map the area extending at least one mile beyond your property boundaries. Indicate the outline of the facility, the location of each of its existing and proposed discharge structures.

A U.S.G.S. 1:24,000 scale map (7.5' Quadrangle) would be appropriate for this item. Maps can be obtained online at <http://map.deq.state.la.us/>. Go through the following links to create a map: ABOUT LDEQ – HELPFUL LINKS – Make a Map. Private map companies can also supply you with these maps.

**IF A SITE DIAGRAM AND A TOPOGRAPHIC MAP ARE NOT INCLUDED THIS APPLICATION WILL NOT BE ACCEPTED AS COMPLETE**

## SECTION VII – SITE HISTORY

- A.** If this is an existing system, date operations began at this site: \_\_\_\_\_

- B.** Is the current operator the original operator?  Yes  No

If **no**, give a reverse chronological list of previous operators. Include the company name and telephone number (if available), and the dates through which the company operated this facility.

| Company | Dates of Operation |    | Telephone Number |
|---------|--------------------|----|------------------|
|         | From               | To |                  |
|         |                    |    |                  |
|         |                    |    |                  |
|         |                    |    |                  |

According to the Louisiana Water Quality Regulations, LAC 33:IX.2503, the following requirements shall apply to the signatory page in this application:

## Chapter 25. Permit Application and Special LPDES Program Requirements

### 2503. Signatories to permit applications and reports

- A. All permit applications shall be signed as follows:
1. For a corporation - by a responsible corporate officer. For the purpose of this Section responsible corporate officer means:
    - (a) A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
    - (b) The manager of one or more manufacturing, production, or operating facilities provided: the manager is authorized to make management decisions that govern the operation of the regulated facility, including having the explicit or implicit duty of making major capital investment recommendations and initiating and directing other comprehensive measures to ensure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken together complete and accurate information for permit application requirements; and the authority to sign documents has been assigned or delegated to the manager in accordance with corporation procedures.
  2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or
  3. For a municipality, state, federal or other public agency – by either a principal executive officer or ranking elected official. For the purposes of this section a principal executive officer of a federal agency includes:
    - (a) The chief executive officer of the agency, or
    - (b) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of EPA).
- B. All reports required by permits and other information requested by the state administrative authority shall be signed by a person described in Permit **Standard Conditions, Section D.10.a.**, or by a duly authorized representative of that person. A person is a duly authorized representative only if:
1. The authorization is made in writing by a person described in Permit **Standard Conditions, Section D.10.a.**
  2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, operator of a well or well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental

matters for the company, (a duly authorized representative may thus be either a named individual or any individual occupying a named position); and

3. The written authorization is submitted to the state administrative authority.
- C. Changes to authorization. If an authorization under Permit **Standard Conditions, Section D.10.b** is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of **Section D.10.b** must be submitted to the state administrative authority prior to or together with any reports, information, or applications to be signed by an authorized representative.
- D. Any person signing any document under Permit **Standard Conditions, Section D.10.a. or b** shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a 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 submitted 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."

### SIGNATORY AND AUTHORIZATION

Pursuant to the Water Quality Regulations (specifically LAC 33:IX.2503) promulgated September 1995, the state NOI must be signed by a responsible individual as described in LAC 33:IX.2503 and that person shall make the following certification:

**"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a 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 submitted 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."**

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Company \_\_\_\_\_

Date \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Federal Tax ID \_\_\_\_\_

## CHECKLIST

To prevent any unnecessary delay in the processing of your notice of intent to be covered under the general permit, please take a moment and check to be certain that the following items have been addressed and enclosed:

1. ALL questions and requested information have been answered (N/A **only** if the question or information was not applicable).
2. ALL required maps, drawings, lab analysis, and other reports are enclosed.
  - Site Map
  - Topographical Map
  - Compliance History Report
  - LDH Wastewater Approval Letter
  - SHPO certification (if applicable)
3. The **appropriate** person has signed the signatory page. **If an unauthorized representative of the facility signs the application, the application will not be processed.** Please note that electronic or digital signatures will not be accepted.
4. Please forward the original and one copy of this NOI and all attachments.

**ANY NOI THAT DOES NOT CONTAIN ALL OF THE REQUESTED INFORMATION WILL BE CONSIDERED INCOMPLETE. NOI PROCESSING WILL NOT PROCEED UNTIL ALL REQUESTED INFORMATION HAS BEEN SUBMITTED.**

**NOTE: UPON RECEIPT AND SUBSEQUENT REVIEW OF THE NOI BY THE PERMITS DIVISION, YOU MAY BE REQUESTED TO FURNISH ADDITIONAL INFORMATION IN ORDER TO COMPLETE THE PROCESSING OF THE PERMIT.**

**GUIDANCE DOCUMENT  
FOR DETERMINING IF YOUR DISCHARGE(S) REQUIRE PRIOR APPROVAL  
FROM THE US FISH AND WILDLIFE SERVICE**

If discharges from your operation will enter any of the segments listed below in the Lake Pontchartrain, Pearl River, Vermilion-Teche, Red River, or Ouachita River Basins then a copy of your NOI must be submitted to the US Fish and Wildlife Service for their approval PRIOR TO SUBMITTAL TO LDEQ. Discharges into the subsegments listed below will be automatically authorized by LDEQ only if you have received comments from the US Fish and Wildlife Service. You must attach a copy of their comments to your NOI in order to be automatically authorized to discharge under this general permit.

Your request to the US Fish and Wildlife Service should be directed to:

**Fish and Wildlife Service  
646 Cajundome Boulevard  
Suite 400  
Lafayette LA 70506  
(337) 291-3100**

You must submit a copy of your correctly completed NOI, including a copy of the topographic map depicting the proposed location of the facility, each outfall number and location, and the route that discharges will flow from the facility to the nearest receiving water body.

**ATCHAFALAYA RIVER BASIN:**

Atchafalaya River Headwaters and Floodplain – from Old River Control Structure to Simmesport; includes Old River Diversion Channel, Lower Red River, Lower Old River  
Atchafalaya River Mainstem – from Simmesport to Whiskey Bay Pilot Channel at mile 54  
Lower Atchafalaya Basin Floodway – from Whiskey Bay Pilot Channel at mile 54 to US Hwy 90 bridge in Morgan City; includes Grand Lake and Six Mile Lake  
Intracoastal Waterway (ICWW) – Morgan City-Port Allen Route from Bayou Sorrel Lock to Morgan City  
Atchafalaya River – from ICWW south of Morgan City to Atchafalaya Bay; includes Sweetwater Lake and Bayou Shaffer  
Wax Lake Outlet – from US Hwy 90 bridge to Atchafalaya Bay; includes Wax Lake  
Intracoastal Waterway – from Bayou Boeuf Lock to Bayou Sale; includes Wax Lake Outlet to US Hwy 90

**CALCASIEU RIVER BASIN:**

No US Fish and Wildlife Service coordination required

**LAKE PONTCHARTRAIN BASIN:**

Comite River – from Wilson-Clinton Highway to White Bayou  
Comite River – from White Bayou to Amite River  
Amite River – from Mississippi state line to LA 37  
Colyell Creek; includes tributaries and Colyell Bay  
Blind River – from Amite River Diversion Canal to mouth at Lake Maurepas  
Amite River – from LA 37 to Amite River Diversion Canal  
Amite River – from Amite River Diversion Canal to Lake Maurepas  
Gray's Creek – from headwaters to Amite River

Amite River Diversion Canal – from Amite River to Blind River  
Blind River – from headwaters to Amite River Diversion Canal  
Tickfaw River – from Mississippi state line to LA 42  
Tickfaw River – from LA 42 to Lake Maurepas  
Natalbany River – from headwaters to Tickfaw River  
Ponchatoula Creek  
Ponchatoula River  
Pass Manchac – from Lake Maurepas to Lake Pontchartrain  
Lake Maurepas  
South Slough; includes Anderson Canal to I-55 borrow pit  
Tangipahoa River – from Mississippi state line to I-12  
Tangipahoa River – from I-12 to Lake Pontchartrain  
Big Creek – from headwaters to Tangipahoa River  
Chappepeela Creek – from LA 1062 to Tangipahoa River  
Tchefuncte River – from headwaters to Bogue Falaya River; includes tributaries  
Tchefuncte River – from Bogue Falaya River to LA 22  
Tchefuncte River – from LA 22 to Lake Pontchartrain  
Bogue Falaya River – from headwaters to Tchefuncte River  
Bayou LaCombe – from headwaters to US 190  
Bayou LaCombe – from US 190 to Lake Pontchartrain  
Bayou Cane – from US 190 to Lake Pontchartrain  
Bayou Liberty – from headwaters to LA 433  
Bayou Liberty – from LA 433 to Bayou Bonfouca  
Bayou Bonfouca – from LA 433 to Lake Pontchartrain  
Salt Bayou – from headwaters to Lake Pontchartrain  
Lake Pontchartrain – West of US 11 bridge  
Lake Pontchartrain – East of US 11 bridge  
The Rigolets  
Bayou Sauvage – from New Orleans hurricane protection level to Chef Menteur Pass; includes Chef  
Menteur Pass  
Intracoastal Waterway – from Chef Menteur Pass to Lake Borgne  
Lake St. Catherine  
Lake Borgne  
Bayou La Loutre – from MRGO to Eloi Bay  
Chandeleur Sound  
Bay Boudreau  
Drum Bay  
Morgan Harbor  
Eloi Bay  
Bogue Falaya River – from the headwaters to the Tchefuncte River  
Bayou Cane – from U.S. Highway 190 to Lake Pontchartrain  
Amite River – LA Highway 37 to the Amite River Diversion Canal

**MERMENTAU RIVER BASIN:**

No US Fish and Wildlife Service coordination required

**VERMILION-TECHE RIVER BASIN:**

Bayou Boeuf – Headwaters to Bayou Courtableau

Irish Ditch/Big Bayou – unnamed ditch to Irish Ditch No. 1 to Big Bayou to Irish Ditch No. 2 to Bayou Rapides

**MISSISSIPPI RIVER BASIN:**

Mississippi River – from Arkansas state line to Old River Control Structure

Mississippi River – from Old River Control Structure to Monte Sano Bayou

Mississippi River – from Monte Sano Bayou to Head of Passes

Thompson Creek – from Mississippi state line to Mississippi River

**OUACHITA RIVER BASIN:**

Bayou Bartholomew – Arkansas State Line to Dead Bayou (Lake Bartholomew)

**PEARL RIVER BASIN:**

Bogue Chitto River – from the Mississippi River State Line to the Pearl River Navigation Canal

Thigpen Creek – from the headwaters to the Bogue Chitto River

Pearl River – from Mississippi state line to Pearl River Navigation Canal

East Pearl River – from Holmes Bayou to I-10

East Pearl River – From I-10 to Lake Borgne

Pearl River Navigation Canal – from Pools Bluff to Lock No. 3

Holmes Bayou – from Pearl River to West Pearl River

Pearl River – From Pearl River Navigation Canal to Holmes Bayou

West Pearl River – from headwaters to Holmes Bayou

West Pearl River – from Holmes Bayou to the Rigolets; includes east and west mouths

Morgan River – from Porters River to West Pearl River

Lower Bogue Chitto – from Pearl River Navigation Canal to Wilson Slough

Pearl River Navigation Canal – from below Lock No. 3

Wilson Slough – from Bogue Chitto to West Pearl River

Bradley Slough – from Bogue Chitto to West Pearl River

Middle Pearl River and West Middle Pearl River – from West Pearl River to Little Lake

Morgan Bayou – from headwaters near I-10 to Middle River

Little Lake

Pushepatapa Creek – from headwaters and tributaries at Mississippi state line to Pearl River floodplain

Bogue Lusa Creek – from headwaters to Pearl River floodplain

Bogue Chitto River – from Mississippi state line to Pearl River Navigation Canal

Thigpen Creek – from headwaters to Bogue Chitto River

**RED RIVER BASIN:**

Red River – from US Hwy 165 to Old River Control Structure Outflow Channel

Rigolette Bayou – from headwaters to the Red River latt Lake

**SABINE RIVER BASIN:**

No US Fish and Wildlife Service coordination required

**TERREBONNE BASIN:**

No US Fish and Wildlife Service coordination required