



**To: Prospective Applicants for a Construction/Demolition
Debris and Woodwaste Landfills General Permit**

Attached is a **Construction/Demolition Debris and Woodwaste Landfills General Permit Notice of Intent (NOI) C&D-G**, for a Louisiana Pollutant Discharge Elimination System (LPDES) permit, authorized under EPA's delegated NPDES program under the Clean Water Act. 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 "NA" (for not applicable) to show that the question was considered.

Two copies (one original and one copy) of your **completed NOI**, each with an attached marked **U.S.G.S. Quadrangle map** or equivalent, and the **site/flow diagrams** listed in Section V 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 70802
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 4489
Baton Rouge, LA 70821-4489
(225) 342-7395

In addition, the plans and specifications for sanitary treatment plants must be approved by the LDH, 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/resources/category/regulations-lac-title-33>.

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

For questions regarding this NOI please contact the Water Permits Division at (225) 219-9371. For help regarding completion of this NOI please contact DEQ, Small Business/Small Community Assistance at 1-800-259-2890.

Date _____
Agency Interest No. AI _____
LPDES Permit No. LA _____

Please check: _____ Initial Permit
_____ Permit Modification
_____ Existing Facility

STATE OF LOUISIANA
DEPARTMENT OF ENVIRONMENTAL QUALITY
Office of Environmental Services, Permits Division
Post Office Box 4313
Baton Rouge, La 70821-4313
PHONE#: (225) 219-9371

**LPDES NOTICE OF INTENT TO DISCHARGE CONSTRUCTION/DEMOLITION
DEBRIS AND WOODWASTE LANDFILLS GENERAL PERMIT**
(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/Owner
(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: _____

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

City _____ 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.)

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 <http://www.osha.gov/oshstats/sicser.html>

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

Name & Title _____

Company _____

Phone _____ Fax _____ e-mail _____

Address _____

C. Facility Information.

1. Is the facility located adjacent to a Sanitary Landfill? Yes No

2. If this NOI is for a permit revision, please describe the requested revision to the existing permit.

3. Source of water supply in gallons per day. List each source giving quality such as fresh, brackish, salt, hard, or soft; and give breakdown as to how each source is used.

4. Processes used which produce industrial wastes discharged into waters of the State. Please explain the operations in your facility in a comprehensive fashion. Explain how the wastewater discharges originate from the activities at your site.

5. Anticipated date or original date of startup or change in operations. When did, or will, present operations start?

SECTION I - FACILITY INFORMATION (cont.)

6. If this is new construction, describe the site property prior to construction. For example, was it undisturbed or was there a previous structure on the site?

7. If this is new construction, when was or when will the facility be completed? (Provide the actual date if completed or anticipated date if under construction.)

8. Is this facility located in a designated industrial area? Yes No

9. List any solid or liquid waste disposal methods. Include a description of the ultimate disposal of any solid or fluid wastes that are disposed of other than by discharge.

SECTION II – SITE HISTORY

A. 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	

SECTION III - DISCHARGE INFORMATION

A. Stormwater Management

1. Are storm water discharges covered by a storm water General Permit? Yes No
2. Acreage. For all outfalls that convey storm water only or that include storm water combined with other waste streams, give the area drained by the outfall in acreage, extent of impervious surfaces (paved areas, rooftops), and describe the activities that occur in that area.

3. List all chemicals and petroleum products stored outside and provide a description of the containment area.

4. Describe all significant materials that are currently or in the past three years have been treated, stored, or disposed of in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

5. Provide information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak and the type and amount of material released.

6. Describe evaluation method for the presence of non-storm water discharges in storm water outfalls named in this NOI. For any storm water outfalls covered by this NOI, signature on page 17 constitutes certification that the outfalls have been tested or evaluated for the presence of non-storm water discharges, and that all non-storm water discharges from these outfall(s) are identified in this NOI. Refer to LAC 33:IX.2511.C.1.a.iii.

SECTION III - DISCHARGE INFORMATION (cont.)

B. 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. Please provide your after-treatment test results in the units asked for on the NOI in Section IV. For proposed facilities, estimates should be provided for any expected contaminants even though the facility is not in place yet.

1. Outfall Identification. Provide a description of all operations contributing wastewater to each effluent for the outfall including process wastewater, sanitary wastewater, cooling water, and storm water runoff; the average flow contributed by each operation; and the treatment received by the wastewater. Make additional copies for each outfall.

Outfall No(s).	Operation Contributing Flow	Location of Outfall	Treatment Method	Average Flow (gpd)
	Contact stormwater from the construction/ demolition landfill			
	Maintenance and Repair Shop Floor Wastewater			
	Treated Sanitary Wastewater under 5,000 GPD			
	Non-Contact stormwater from the			

2. Does this facility utilize vegetative mulch for a beneficial reuse at the landfill? Yes No

3. Latitude/Longitude of Discharge point:

Outfall

Latitude: deg. min. sec. Longitude deg. min. sec.

Outfall

Latitude: deg. min. sec. Longitude deg. min. sec.

Outfall

Latitude: deg. min. sec. Longitude deg. min. sec.

Outfall

Latitude: deg. min. sec. Longitude deg. min. sec.

SECTION II – DISCHARGE INFORMATION (cont.)

4. Receiving Waters

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*. You should 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 (See Section III). Include river mile of discharge point if available. If a discharge enters an unnamed water body, identify it as unnamed.

Complete the discharge route and receiving stream information for all the outfalls at your facility. If all the outfalls discharge by the same route (i.e., open ditch) and into the same receiving stream, then you need only complete the first **Outfall Number(s)** section, however, you should list all the outfall numbers that you identified on the previous page of this form. If different outfalls discharge by different routes or into different receiving streams then complete as many of the **Outfall Number(s)** sections as necessary to properly characterize all outfalls. If you need additional space, please attach a separate sheet and use the same format to supply the additional discharge route and receiving stream information for other outfalls.

Outfall Numbers (s) _____

By _____ (effluent pipe, ditch, etc.)
thence into _____ (Parish drainage ditch, canal, etc.)
thence into _____ (named bayou, creek, stream, etc.)
thence into _____ (river, lake, etc.)

Outfall Numbers (s) _____

By _____ (effluent pipe, ditch, etc.)
thence into _____ (Parish drainage ditch, canal, etc.)
thence into _____ (named bayou, creek, stream, etc.)
thence into _____ (river, lake, etc.)

Outfall Numbers (s) _____

By _____ (effluent pipe, ditch, etc.)
thence into _____ (Parish drainage ditch, canal, etc.)
thence into _____ (named bayou, creek, stream, etc.)
thence into _____ (river, lake, etc.)

Outfall Numbers (s) _____

By _____ (effluent pipe, ditch, etc.)
thence into _____ (Parish drainage ditch, canal, etc.)
thence into _____ (named bayou, creek, stream, etc.)
thence into _____ (river, lake, etc.)

SECTION III - DISCHARGE INFORMATION (cont.)

C. Miscellaneous Discharges

1. List any other discharges to the waters of the state such as hydrostatic wastewaters, once-through noncontact cooling water or other wastewater types not covered under the LAG780000 Master General Permit? **NOTE: Discharges of other wastewater types may preclude you from coverage under the Master General Permit LAG780000.** How are these waters discharged? Describe any treatment associated with each.

D. New Source Dischargers. If the facility will be discharging C&D landfill wastewater (including, but not limited to, cell dewatering wastewater, vehicle washwater, and contaminated storm water), complete the following items:

1. Engineering Report. Provide any technical evaluations concerning your wastewater treatment system, including engineering reports or pilot plant studies.

2. Similar Operations: Provide the name and location of any existing plant(s) that, to the best of your knowledge, resembles this facility with respect to processes, wastewater constituents, or wastewater treatment.

SECTION IV – LABORATORY ANALYSIS

- A. Lab Analysis.** Make additional copies as necessary. Sampling and analytical protocols must conform to the requirements in LAC 33:IX.Chapters 25 and 65, and 40 CFR Part 136; when no analytical method is approved, the applicant may use any suitable method but must provide a description of the method. For storm water discharges, indicate date & duration of storm event sampled, total inches of precipitation, and number of hours since the end of the previous storm event that was greater than 0.1 inches.

Complete this section for each outfall. Complete this section for each pollutant, unless the applicant demonstrates a waiver for that pollutant is appropriate.

SECTION IV – LABORATORY ANALYSIS (cont.)

1. Landfill Wastewater

For discharges of *landfill wastewater* (includes cell dewatering wastewater, vehicle wash water, and contaminated storm water) from a Construction/Demolition Debris and Woodwaste Landfill complete the table below. (Proposed facilities shall have up to two years from commencement of operations to complete and submit the information below. An estimate based on engineering calculations and/or knowledge may be submitted in the interim.):

Outfall Number: _____ Description: _____

Pollutant	Effluent Analysis			
	Concentration (mg/l)		Mass (lbs/day)	
	Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
BOD ₅				
COD				
TOC				
Oil and Grease				
Ammonia (as N)				
Alpha Terpineol				
Benzoic Acid				
Total Suspended Solids				
P-Cresol				
Toluene				
Total Zinc				
Total Copper				
Total Mercury				
Total Lead				
	Daily Maximum	Monthly Average Maximum*	Monthly Average Minimum	Method of Measure
Flow (GPD)				
	Minimum	Maximum		
Discharge Duration (hrs/day)				
pH (SU)				

* Within the previous two years. (The maximum monthly average value is the highest value of all the monthly averages over the previous two years. The monthly average minimum is the lowest value of the monthly averages over the previous two years.)

SECTION IV – LABORATORY ANALYSIS (cont.)

2. Washrack wastewater, maintenance and repair shop floor washdown waters

For discharges of For Discharges of washrack wastewater, maintenance and repair shop floor washdown from a Construction/Demolition Debris and Woodwaste Landfill complete the table below.

(Proposed facilities shall have up to two years from commencement of operations to complete and submit the information below. An estimate based on engineering calculations and/or knowledge may be submitted in the interim.):

Outfall Number: _____ Description: _____

Pollutant	Effluent Analysis			
	Concentration (mg/l)		Mass (lbs/day)	
	Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
COD				
Oil and Grease				
TSS				
	Daily Maximum	Monthly Average Maximum*	Monthly Average Minimum	Method of Measure
Flow (GPD)				
	Minimum	Maximum		
Discharge Duration (hrs/day)				
Soaps and Detergents (Amount Used)				
pH (SU)				

* Within the previous two years. (The maximum monthly average value is the highest value of all the monthly averages over the previous two years. The monthly average minimum is the lowest value of the monthly averages over the previous two years.)

SECTION IV – LABORATORY ANALYSIS (cont.)

3. Uncontaminated Stormwater

For discharges of uncontaminated stormwater from areas outside of the Construction/Demolition Debris and Woodwaste Landfill complete the table below. (Proposed facilities shall have up to two years from commencement of operations to complete and submit the information below. An estimate based on engineering calculations and/or knowledge may be submitted in the interim.):

Outfall Number: _____ Description: _____

Pollutant	Effluent Analysis			
	Concentration (mg/l)		Mass (lbs/day)	
	Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
COD				
TOC				
Oil and Grease				
	Daily Maximum	Monthly Average Maximum*	Monthly Average Minimum	Method of Measure
Flow (GPD)				
	Minimum	Maximum		
Discharge Duration (hrs/day)				
pH (SU)				

* Within the previous two years. (The maximum monthly average value is the highest value of all the monthly averages over the previous two years. The monthly average minimum is the lowest value of the monthly averages over the previous two years.)

SECTION IV – LABORATORY ANALYSIS (cont.)

4. Treated Sanitary Wastewater

For discharges of *treated sanitary wastewater* from the Construction/Demolition Debris and Woodwaste Landfill complete the table below. (Proposed facilities shall have up to two years from commencement of operations to complete and submit the information below. An estimate based on engineering calculations and/or knowledge may be submitted in the interim.):

Outfall Number: _____ Description _____

Pollutant	Effluent Analysis			
	Concentration (mg/l)		Mass (lbs/day)	
	Monthly Average	Weekly Average	Monthly Average	Daily Maximum
BOD ₅				
TSS				
Total Residual Chlorine (if Chlorine used)				
Fecal Coliform Colonies/100 ml				
Oil and Grease				
	Monthly Average	Monthly Average Maximum*	Monthly Average Minimum	Method of Measure
Flow (GPD)				
	Minimum	Maximum		
Discharge Duration (hrs/day)				
pH (SU)				

* Within the previous two years. (The maximum monthly average value is the highest value of all the monthly averages over the previous two years. The monthly average minimum is the lowest value of the monthly averages over the previous two years.)

SECTION IV – LABORATORY ANALYSIS (cont.)

B. Additional Laboratory Data.

- 1 List any pertinent physical and chemical properties (e.g., toxic components, taste and odor compounds, heavy metals, etc.) that may be associated with the effluent.

2. Toxicity Data. List any bioassay tests conducted on the effluent from the facility. Provide a summary of the test results.

C. Laboratory Accreditation

If any of the analysis reported above were performed by a contract lab or consulting firm, provide the firm name, address, phone number and pollutants analyzed.

Laboratory procedures and analyses performed by commercial laboratories shall be conducted in accordance with the requirements set forth under LAC 33:I.Subpart 3, Chapters 49-55.

Laboratory data generated by commercial laboratories that are not accredited under LAC 33:I.Subpart 3, Chapters 47-57, will not be accepted by the department. Retesting of analysis will be required by an accredited commercial laboratory.

Regulations on the Environmental Laboratory Accreditation Program and a list of labs that have applied for accreditation are available on the department website located at:

<https://internet.deq.louisiana.gov/portal/divisions/lalap/accredited-laboratories>

Questions concerning the program may be directed to the Office of Environmental Services, Public Participation and Permit Support Division at (225) 219-3247.

SECTION V – MAPS/DIAGRAMS

- A. Site Diagram.** Attach to this NOI a complete site diagram of your facility demonstrating how the wastewater flows through your facility into each clearly labeled discharge point (including all treatment points). Indicate stormwater flow pattern on this diagram or provide additional diagrams if needed. Please indicate the location of the facility and the front gate or entrance to the facility on the site diagram.
- 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, and any existing hazardous waste treatment storage or disposal facilities.

A U.S.G.S. 1:24,000 scale map (7.5' Quadrangle) would be appropriate for this item. Appropriate maps can be obtained from local government agencies such as DOTD or the Office of Public Works. Maps can also be obtained online at <http://map.deq.state.la.us/>. Private map companies can also supply you with these maps. If you cannot locate a map through these sources you can contact the Louisiana Department of Transportation and Development at:

1201 Capitol Access Road
Baton Rouge, LA 70802
(225) 379-1107
maps@dotd.louisiana.gov

SECTION VI – 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 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 Secretary of State.

SECTION VII – COMPLIANCE HISTORY

Report the history of all violations and enforcement actions for the facility, 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.

According to the Louisiana Water Quality Regulations, LAC 33:IX.2503.B, 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 employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
 2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or
 3. For a municipality, parish, State, Federal or other public agency - 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 Administrator 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 LAC 33:IX.2503.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 LAC 33:IX.2503.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 a 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 LAC 33:IX.2503.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 LAC 33:IX.2503.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 LAC 33:IX.2503.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 _____

Date _____

Telephone _____

Email Address _____

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 if the question or information was not applicable).
2. ALL required maps, drawings, lab analysis, and other reports are enclosed.
3. The appropriate person has signed the signatory page.
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.