DAMMON
ENGINEERING, INC.

554 Old Spanish Trail
Slidell, LA 70458
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dammonengineering.com
info@dammonengineering.com

October 26, 2015

Mr. Marcus N. Redford, P.E.
Office of Public Health
71128 HWY 59, Suite 102-B
Abita Springs, LA 70402

RE: Southern Comfort Lounge Water Supply
2209 Gause Blvd. East
Slidell, LA 70461
St. Tammany Parish

Water Supply Update/Modernization
Water supply disinfection facility, Stenner Model 45 MHP-10 Chemical injection Unit
12 Gallon Chemical Storage Tank (12 ½% Sodium Hypochlorite Solution) with Dual Containment Tank
120 Gallon Hydropneumatic Storage Tank
½ HP Everbilt Well Jet Pump with associated SDR 26 PVC Piping
1 Existing well w/distribution Piping & Appurtenances

Mr. Redford,

In reference to the above captioned, the following information is presented for your review.

The Southern Comfort Lounge Water Supply is a system that was installed approximately 30 years ago. The system has been in operation since that time up until recently. Much of the information detailing the design of the existing system has been culled from well drillers, the current owner, and persons associated with this project. Details may not truly reflect every exact parameters on the current installation of the presented system. Items in the Design Summary Package for this current submittal have been addressed to the best of my knowledge, although not all questions have been answered as information may not be readily available. Surveys of the system were conducted on August 24, 2015 and October 19, 2015. This submittal lists the current parameters of the water system in an as-built water supply condition and the proposed reconfiguration of the water supply.

The current water well furnishes water to three businesses. Each business has its own demand pump located adjacent to the business structure.

1) A Used Tire business that on its own would not normally meet the requirements to be placed on the Safe Drinking Water inventory.
2) A Tattoo parlor.
3) A bar, the Southern Comfort Lounge, which has the potential of meeting the drinking water threshold requirements. As previously mentioned, the water supply for this bar has been in operation for approximately 30 years.

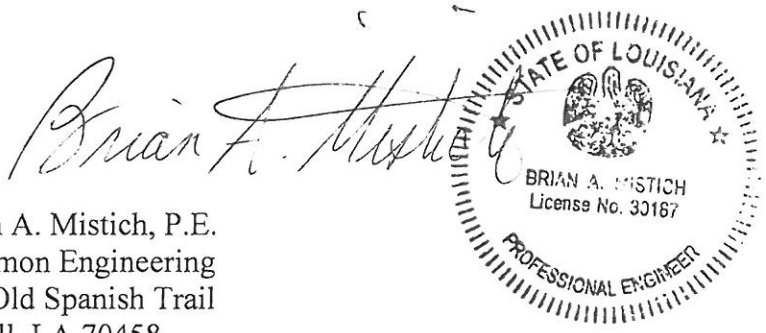
All three businesses together, as a group, require registration on the drinking water inventory. The proposal in this submittal is to modernize the water system for the 3 customers. This shall be done by:

1) Removing the water pump, controls, disinfection facility, and storage tank from the Southern Comfort Pump House.
2) Removing the demand pumps, controls, and storage facilities from the Used Tire Store and Tatoo Parlor.
3) Constructing a well house at the well head site.
4) Installing a water pump, disinfection facility, a 120 Gallon hydropneumatic storage tank (to meet the 30 minute contact time requirement) controls and associated water system appurtenances at the well site.
5) Replacing all 4" sewer piping within a 50' radius of the well with schedule 40 PVC in accord with LSSC 327 – A - 2 – Footnote 1 .
6) Install backflow preventors at each business.
   In essence, the water system shall be centralized at the well head and the distribution shall supply water to the three businesses. Each business shall be outfitted with approved sampling taps and backflow prevention devices.

The attached submittal contains:

1) A complete application package is submitted for your review.
2) A diagram indicating the current layout including possible sources of contamination.
3) A diagram indicating the proposed reconfiguration and modernization plan
4) A product sheet for the Flowtec Model FP720 Hydropneumatic Tank is provided. The specifications sheet does not specifically designate ASME code requirement construction; however, this type of tank is designed for potable water systems and used in many systems.
5) Bypass piping for the Hydropneumatic Tank shall be installed. (see system diagram)
6) As this is an extremely small water supply, the Hydropneumatic Tank will not have automatic controls to maintain water-to-air ratio. The air shall be manually injected using an access valve to be installed on the air tank.
7) See attached calculation sheet for chlorine contact time.
8) The MSDA sheets for AquaChlor 12.5% are provided in the submittal.
9) Sodium Hypochlorite shall be stored in the pump house.
10) Secondary containment for the chlorine supply tank shall be provided.

11) The certified operator shall take the chlorine residuals.
12) The water system shall be disinfected in accord with LAC 51, Part XII, 351 and tested in accord with LAC 51, Part XII, 353.



Brian A. Mistich, P.E.
Dammon Engineering
554 Old Spanish Trail
Slidell, LA 70458
985-649-5832

Permit Application

(Complete All Applicable Pages)

Project:	**Southern Comfort Lounge Water Suppl**		
Project Type:	**WATER SYSTEM**		
Estimated Project Cost:	**$5000.00**		
Engineer:	**Brian A. Mistich**		
Telephone:	**985-285-4564**		
Parish:	**St. Tammany**	Nearest Town:	**Slidell**
Population Served:	**30**		

New System?	Existing System?
☐	☒

Project to be Owned and Operated By: (include name and address)	**Mr. Raymond B. Williams** **64491 Hwy 434** **Lacombe, LA 70445**
Proposed Project Will Connect to: (name of water and/or sewer system)	**Stand Alone**

STATE OF LOUISIANA

BRIAN A. MISTICH
License No. 30187

PROFESSIONAL ENGINEER

10/26/2015

WATER WELL

Project:	**Southern Comfort Lounge Water Supply**		
Engineer:	**Brian A Mistich**		
Date:	**8/24/2015**	Site Fenced? ☒Yes ☐No	
General Scope of Project:	**Water Supply for a Lounge**		
Site Location: (also complete the last section of this table)	**2209 Gause Blvd East, Slidell, La**	50' Radius of Ownership? ☒Yes ☐No	
Maximum # of Lots (or population):	**30**		

INTERNAL STRUCTURE (sketch on separate sheet)	Outer Casing	Linear Feet:	**340**
		Thickness:	**.154**
		Pounds/Foot:	**72**
		Joint:	**unk**
		Type of Seal to Outer Casing:	**n/a**
	Inner Casing	Linear Feet:	**n/a**
		Thickness:	**n/a**
		Pounds/Foot:	**n/a**
		Joint:	**n/a**
	Grouting	Depth of grout:	**50**
		Thickness:	**1 - 1/2"**
		Method With a Setting Time of?	
	Screen	Linear Feet:	**10**
		Type:	**slotted pvc**

EXTERNAL STRUCTURE (sketch on separate sheet)	Casing Head Seal? ☐Yes ☒No	Slab & Motor Foundation? ☒Yes ☐No	
	Well Vent	Diameter: (½"inch minimum) **n/a** inches	
		Down-Turned?	☐Yes ☐No
		Terminates 24" above 10-year Flood Level or floor whichever is greater?	☐Yes ☐No
		Twenty Four Mesh Screen?	☐Yes ☐No
		Watertight Seal at Casing?	☐Yes ☐No
	Drawdown Gauge:	Type (seal): **n/a**	
	Pump	Type: **centrifugal**	Power: **120 v**
		Capacity (GPM): **10**	@ **+/- 20** TDH (FT)
	Prime Mover:	**electric**	

WATER WELL

2 of 2

DISCHARGE PIPING	Discharge Piping Material: **pvc**		
	Down-Turned Smooth-Nozzle Sample Tap?		☒Yes ☐No
	Check Valve?		☒Yes ☐No
	Shutoff Valve?		☒Yes ☐No
	Discharge Bypass?		☐Yes ☒No
	Pressure Gauge?		☒Yes ☐No
	Means of Measuring Flow?		☒Yes ☐No
COMPLETION SPECIFICATIONS	Disinfection Method: (include chlorine dosage and retention time)	**NSF Sodium Hypochlorite Solution , 3 ppm, 48 minutes contact time**	
	Drinking Water Analysis for New Water Sources	Chemical testing to be performed prior to being placed into service? ☐Yes ☒No	
		Bacteriological testing to be performed prior to being placed into service? ☒Yes ☐No	
	Abandoned Holes? ☐Yes ☒No		
NAME OF CERTIFIED OPERATOR:	**Kerry Craig, #44512**		
LOCATIONAL INFORMATION	Coordinates: Latitude **30°17' 15. 6"N** Longitude **89°43' 51. 2"W** OR Latitude . °N Longitude . °W		
	Geographic Datum: NAD83 ☐ WGS84 ☐ NAD27 ☐		
	Collection Method: GPS ☐ — DGPS/WAAS enabled? Yes ☐ No ☐ — Horizontal Accuracy? ____ meters Map ☐ Specify: ____ Scale: ____		

WATER SUPPLY
BOOSTER STATION

Project:					
Engineer:					
Site Location:					
Water is Transmitted From:		To:			
CONSTRUCTION	Exterior Structure	Length:	Width:	Height:	
		Floor Material:			
		Material:			
		Ventilation? ☐Yes ☐No	Floor Elevation (6" Above Finished Grade?) ☐Yes ☐No		
	Interior Structure	Lighting:			
		Heating:			
		Chlorination? ☐Yes ☐No	Type:		
		Floor Slope (3"/10'):			
	Pumping	Number:			
		Type:	Power:		
		Capacity (GPM):	@	TDH (FT)	
	Piping	Pipes to Pumps	Size:		
			Type:		
		Pump Discharge Pipe	Size:		
			Type:		
		Common Discharge Pipe	Size:		
			Type:		
		Backflow Prevention? ☐Yes ☐No	Type:		
GENERAL COMMENTS:					

WATER SUPPLY FINISHED WATER STORAGE

Project:	**Southern Comfort Lounge Water Suppl**		
Engineer:	**Brian A. Mistich**	Site Fenced? ☒Yes ☐No	
Date:	**8/24/2015**		
Site Location:	**2209 Gause Blvd East, Slidell, La**		

Type of Storage Facility:

☐Treatment Plant Storage (i.e. clearwell) ☒Hydropneumatic Pressure Tank
☐Elevated Storage Tank ☐Ground Storage Tank

SIZE	Diameter/Depth:	**24"**
	Height and/or Length:	**68"**
	Elevation:	**2' above ground level**
	Shape:	**Cylindrical**
	Capacity (gal):	**120**
	Material (type):	**steel**
	Wall Thickness:	**unk**
	Cover Thickness:	**n/a**
	Floor Thickness:	**n/a**
Base Construction:	**steel**	
Corrosion Control:	**paint**	

COATING	Interior: **unk** NSF Approved Yes ☒ No ☐	Cathodic Protection? ☐Yes ☒No
MANHOLE	Size: **n/a**	
	Overlap 2"? ☐Yes ☐No Water Tight? ☐Yes ☐No Accessible? ☐Yes ☐No Secure? ☐Yes ☐No	

OVERFLOW PIPING (n/a for pressure tanks)	Turned Down 12"-24" Above Grade? ☐Yes ☐No Screened? If Flapper, Screened Inside? ☐Yes ☐No Splash Pad or Inlet Drainage Structure? ☐Yes ☐No Diameter **n/a** inches
VENTS (n/a for pressure tanks)	Turned Down 24" Above Roof or Sod? ☐Yes ☐No Twenty Four Mesh Non-Corrodible Screen? ☐Yes ☐No Diameter **n/a** inches
GENERAL	Bypass to Bring Out of Service? ☐Yes ☒No Pressure Gauge? ☒Yes ☐No Water Level Control Equipment? ☒Yes ☐No Water Level Indicating Device? ☐Yes ☒No Steel Structures Meet AWWA Standard? ☒Yes ☐No Down-Turned Smooth-Nozzle Sample Tap? ☒Yes ☐No

WATER SUPPLY FINISHED WATER STORAGE

2 of 2

PRESSURE TANKS	Water Sight Glass? ☐Yes ☒No Automatic or Manual Air Blow Off? ☐Yes ☒No Pressure Switch For Pumps? ☒Yes ☐No Means for Adding Air? ☒Yes ☐No If Air Compressor, Give Capacity: ____CFM @____PSI	
TREATMENT PLANT STORAGE (clearwells only)	Minimum Two Clearwell Compartments Provided? ☐Yes ☐No	
Disinfection Method: (include chlorine dosage and retention time, including calculations)	**NSF Sodium Hypochlorite Solution , 3 ppm, (See Attached Contact Time Sheet)**	Testing ☒Yes ☐No
PIPING	Influent: **1"** (diameter-inches)	**pvc** (type of pipe)
	Effluent: **1"** (diameter-inches)	**pvc** (type of pipe)
LOCATIONAL INFORMATION	Coordinates: Latitude **30°17' 16. 0"N** Longitude **89°43' 53. 5"W** OR Latitude . °N Longitude . °W	
	Geographic Datum: NAD83 ☐ WGS84 ☐ NAD27 ☐	
	Collection Method: GPS ☐ — DGPS/WAAS enabled? Yes ☐ No ☐ — Horizontal Accuracy? _____ meters Map ☐ Specify: _____ Scale: _____	

WATER DISTRIBUTION SYSTEM

Project:	**Southern Comfort Lounge Water Supply**		
Engineer:	**Brian A. Mistich**		
Date:	**8/24/2015**		
General Scope of Project:	**SDR 26 PVC**		
PIPES	Material: (specify ASTM standard, dimension ratio-DR, AWWA Standard, and pressure class)	**SDR 26 PVC**	NSF 61 & NSF 372 Listed? ☒Yes ☐No
	Size: (Min 3" water main. Min 6" water main for fire protection. Water mains proposed with less than 3" diameter require justification with hydraulic analysis and future water use considerations provided and will only be allowed in special circumstances)	**2" Water well, 2" delivery line**	
JOINTS & MATERIALS:	**Glue Joints**		
	PVC		
LAYOUT	Valve Spacing:	**n/a**	
	Means of Flushing Dead Ends?	☒Yes ☐No	
	Number of Surface Water Crossings/Encounters?	**0**	
	Location with Respect to Sewers:	Maintain 18" Minimum Vertical Clearance @ Crossings? ☐Yes ☐No	
		Maintain 6' Minimum Horizontal Clearance? ☐Yes ☐No	
Normal Operating Pressure:	**38 psi**		
Minimum System Pressure:	**25 psi**		
DISINFECTION METHOD (include chlorine dosage and Retention time):	**NSF Sodium Hypochlorite Solution , 3 ppm,(See Attached Contact Time Sheet)**		
Owned and Operated By: (include name and address)	**Mr. Raymond B. Williams 64491 Hwy 434 Lacombe, LA 70445**		
NAME OF CERTIFIED OPERATOR:	**Kerry Craig, #44512**		
ADDITIONAL COMMENTS:	**This is an existing system that has served the lounge for +\- 30 years**		

DISINFECTION

Project:	**Southern Comfort Lounge**
Engineer:	**Brian A. Mistich**
Date:	**8/24/2015**
General Scope of Project:	**Water Supply for a Lounge**
Site Location:	**2209 Gause Blvd East, Slidell, La**
TYPE OF DISINFECTION:	Chlorine: ☐ Gas ☒ Solution Ammonia: ☐ Anhydrous (gas) ☐ Ammonium Sulfate (solution) ☐ Ammonium Hydroxide (Aqua Ammonia) ☐ Other (please explain): **Stenner MDL MHP-10**
FEEDERS/PUMPS:	# of Feeders/Pumps (2 minimum): **1 active, 1 stanby** Type: **positive displacement**
GENERAL:	Standby Equipment? ☒Yes ☐No Stored in Areas Not in Direct Sunlight? ☐Yes ☒No Vented to Outside? ☒Yes ☐No Enough Space for 30 Days Storage? ☒Yes ☐No
STORAGE OF CHLORINE GAS:	Chlorine Storage & Feed System Building Separated? ☐Yes ☐No Doors Open Outward? ☐Yes ☐No Shatter-Resistant Inspection Windows? ☐Yes ☐No Fan/Light Switches Located Outside? ☐Yes ☐No Air Inlet Near Ceiling? ☐Yes ☐No Vent Fan Near Floor? ☐Yes ☐No Cylinders Restrained in Position? ☐Yes ☐No Weighing Scales? ☐Yes ☐No
STORAGE OF AMMONIA GAS or AQUA AMMONIA:	Ammonia Storage & Feed System Building Separated? ☐Yes ☐No Fan/Light Switches Located Outside? ☐Yes ☐No Forced ventilation? ☐Yes ☐No Shatter-Resistant Inspection Windows? ☐Yes ☐No Leak Detection Systems in all Areas Through Which Ammonia is Piped? ☐Yes ☐No

March 11, 2003

JCI Jones Chemicals, Inc.
Attn: Timothy J. Gaffney
808 Sarasota Quay
Sarasota, FL 34236

RE SODIUM HYPOCHLORITE SOLUTION 12.5%
Category Code: G4
NSF Registration No. 048799

Dear Timothy J. Gaffney:

NSF has processed the application for Registration of **SODIUM HYPOCHLORITE SOLUTION 12.5%** to *the NSF Registration Guidelines for Proprietary Substances and Nonfood Compounds (2002)*, which are available at www.nsf.org/usda. The NSF Nonfood Compounds Registration Program is a continuation of the USDA product approval and listing program, which is based on meeting regulatory requirements including FDA 21 CFR for appropriate use, ingredient and labeling.

This product is acceptable for use in meat, poultry, and other food processing areas as a Chlorine Water Treatment Product (G4), when used in accordance with the respective label instructions and use limitations. It may be used in all processing of meat and poultry plants at concentrations up to 5 parts per million calculated as available chlorine. Chlorine may be present in poultry chiller water, in water for reprocessing poultry carcasses internally contaminated with feces, and in red meat carcasses final wash water at concentrations between 20 and 50 parts per million calculated as available chlorine. The product must be dispensed at a consistent and uniform level and the method or system must be such that a controlled rate is maintained. The additive may not exceed 3 parts per million residual chlorine dioxide.

NSF Registration of this product is current when the NSF Registration Number, Category Code, and Registration Mark appear on the NSF-approved product label, and the registered product name is included in the current NSF White Book Listing of Nonfood Compounds at the NSF website (http://www.nsf.org/usda). The NSF Registration Mark can be downloaded from the NSF website, at http://www.nsf.org/mark/download_marks.html.

NSF Listing of all registered Nonfood compounds by NSF International is not an endorsement of those compounds, or of any performance or efficacy claims made by the manufacturer.

Registration status may be verified at any time via the NSF web site, at http://www.nsf.org/usda. Changes in formulation or label, without the prior written consent of NSF, will void registration, and will supersede the on-line listing.

Sincerely,

Carmen Grindatti

Carmen Grindatti
NSF Nonfood Compounds Registration and listing program

Model FP7250

Air-Over-Water Pressure Tank (Vertical) - 120 Gallons

Epoxy-lined standard water tanks are excellent corrosion resistant tanks for home water systems applications such as retention tank, holding tank and pressure tank.

Key Features

- Replaces any standard galvanized, glass-lined or epoxy-lined tank
- Precision press fit design minimizes gaps between components, reducing the possibility of corrosion and seam leaks
- Tough polyester exterior paint
- Air volume control tap is standard

Warranty

1 year limited warranty

Chlorine Contact Time

Tank Volume: 120 gallons		90 gallons useful liquid storage	
Southern Comfort Lounge :		40 seats * 25 gallons per seat =	1000 gallons/day
Tatoo Parlor	:	2 Employees * 20 gal/day/emp =	40 gallons/day
Used Tire Store	:	2 Employees * 20 gal/day/emp =	40 gallons/day
Total	:		1080 gallons/day

12 hour operation = 1.5 gallons usage per minute

1.5 gal/minute * 30 minutes = 45 gallons of storage for 30 minute contact time (required)

90 Gallons of storage will exceed the 30 minute contact time required.

Material Safety Data Sheet

AQUACHLOR™ 10%, 12.5%
Sodium Hypochlorite Solution 10% & 12.5%

ALTIVIA

Revised 5.25.2004

ALTIVIA Corporation
1100 Louisiana, Suite 3160
Houston, Texas 77002-5217

Emergency(Chemtrec): (800) 424-9300
Product Information: (713) 658-9000

HAZARDOUS INGREDIENTS/IDENTIFY INFORMATION

Hazardous Components	OSHA PEL	ACGIH TLV	CAS#	Other limits
Sodium Hypochlorite	N/E	N/E	7681-52-9	None listed
Sodium Hydroxide	2 mg/m^3	2 mg/m^3	1310-73-2	None listed

PHYSICAL / CHEMICAL CHARACTERISTICS

Specific Gravity @ 70°F	1.13 - 1.25	NaOCl (wt %):	9.5 – 13.5
Boiling Point:	Decomposes above 40°C (104°F)	Vapor Pressure (mmHg):	N/A
Freezing Point:	< -10°F (-12°C)	Vapor Density (Air = 1):	N/A
Solubility in Water:	Complete	pH (As is):	11.5 - 13.5
Appearance/Color:	Clear, colorless to pale yellow		

FIRE AND EXPLOSION HAZARDS

Flash Point:	Non-Flammable	LEL:	N/A
Flammable Limits:	N/A	UEL:	N/A

Special Fire Fighting Procedure/Precaution: Use extinguishing media that is appropriate for the surrounding fire. Use water spray to cool fire exposed containers. Wear NIOSH/MSHA approved positive-pressure self-contained breathing apparatus and full protective clothing if involved in a fire.

Unusual Fire/Explosion Hazards: **May release toxic gases (hydrogen chloride and chlorine) upon decomposition**. Sodium hypochlorite is an oxidizing agent. Keep away from oxidizable materials in a fire situation. If possible to do so without risk, move containers from fire area to prevent over pressurization and rupture.

REACTIVITY DATA

Reactivity:	Reacts with acids, ammonia compounds, oxidizable materials, metals and reducing agents.
Stability:	Stable under proper storage conditions. May decompose upon heating and exposure to sunlight.
Incompatibility:	Acids, ammonia compounds, oxidizable materials, peroxides, metals (nickel, copper, tin, aluminum, and iron) and reducing agents.
Hazardous Decomposition/Byproducts:	**Combustion:** Hydrogen chloride and chlorine gas. **Thermal Decomposition:** Chlorine gas. Rate of decomposition increases with the concentration and with temperatures above 29°C (85°F).
Hazardous Polymerization:	Will not occur.
Condition to Avoid:	Avoid heat, flames, sparks and other sources of ignition. Avoid direct sunlight. Do not store above 29°C (85°F).

HEALTH HAZARDS & MEDICAL PROCEDURES

DANGER! CORROSIVE. MAY CAUSE SKIN AND EYE IRRITATION OR CHEMICAL BURNS TO BROKEN SKIN. CAUSES EYE DAMAGE. HARMFUL IF SWALLOWED.

ROUTES OF ENTRY

Inhalation:	Irritation of the respiratory system. Mist or fumes may cause bronchial irritation, coughing, difficult breathing, nausea and pulmonary edema.
Ingestion:	Oral or gastrointestinal irritation. Corrosion of mucous membranes, perforation of esophagus and stomach may follow.
Eyes:	Liquid or mist contact can produce severe eye irritation and burns. Prolonged exposures may cause eye damage and blindness.
Skin Contact:	Liquid contact can cause blistering and eczema. Prolonged exposure may cause dermatitis.

MEDICAL PROCEDURES

Inhalation:	Remove person from exposure to fresh air. If person is not breathing, call 911 or an ambulance, and then give artificial respiration (CPR). If individual is breathing, but with difficulty, GET IMMEDIATE MEDICAL ATTENTION.
Ingestion:	Drink large quantities of water. **Do not induce vomiting**. Do not give anything by mouth to an unconscious person. Avoid alcohol. GET IMMEDIATE MEDICAL ATTENTION. Do not use acidic antidotes or sodium bicarbonate.
Eyes:	Hold eye open and rinse slowly and gently for 15-20 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. GET IMMEDIATE MEDICAL ATTENTION.
Skin Contracts:	Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. Thoroughly clean and dry contaminated clothing and shoes before reuse. Discard footwear that cannot be decontaminated. GET IMMEDIATE MEDICAL ATTENTION.
Note to Physician:	The absence of visible signs or symptoms of burns does NOT reliably exclude the presence of actual tissue damage.

TOXICITY

The toxicity and corrosivity of sodium hypochlorite is a function of concentration and pH. This material is irritating and may be corrosive to all tissue.

Carcinogenicy: Sodium Hypochlorite is not listed as a carcinogen by NTP, IARC, ACGIH, or OSHA.

Toxicity: The acute oral LD50 (rat) is 12 g/kg.

CONTROL MEASURES

PERSONAL SAFETY EQUIPMENT

Ventilation: Use closed systems when possible. Provide local exhaust ventilation where vapor or mist may be generated. Ensure compliance with applicable exposure limits.

Respiratory: Cartridges must be NIOSH/MSHA approved against chlorine. In case of fire, use SCBA for rescue. A respiratory protection program that meets 29 CFR 1910.134 must be followed whenever workplace conditions warrant use of a respirator.

Hands-Body: Wear chemical resistant clothing, rubber gloves (natural rubber, neoprene, nitrile, or PVC), aprons, or slicker suit and rubber boots when potential for contact with the material exists. Contaminated clothing should be removed, then discarded or laundered.

Face-Eyes: Wear splash resistant safety goggles with a face shield. Provide an emergency eye wash fountain and quick drench shower in the immediate work area.

HANDLING AND STORAGE

Storage: Sodium Hypochlorite can be stored in approved rubber lined stainless steel tanks, fiberglass tanks (with a UV stabilizer package) or high density cross linked polyethylene (HDXLPE) tanks. As materials of construction vary, consult the tank manufacturer for compatibility with sodium hypochlorite before use. Store in a cool dry place away from heat sources and direct sunlight. Avoid heat, flames, sparks and other sources of ignition. Keep separated from incompatible substances. Do not reuse storage containers unless properly reconditioned.

Handling: Wear appropriate protective clothing. Avoid prolonged contact with eyes, skin and clothing. Avoid breathing vapors and mists. After handling, always wash hands thoroughly with soap and water. Use only with adequate ventilation.

Spill or Leak: Wear protective clothing and equipment. For large spills isolate hazard area and deny entry to unnecessary or unprotected personnel. Dike far ahead of liquid spill for later disposal. Prevent liquid from entering sewers or waterways. Sodium hypochlorite can be neutralized with weak reducing agents. Adequate ventilation is required when containing spills/leaks.

Disposal: Any disposal practice must be in compliance with local, state and federal laws and regulations. May be subject to disposal regulations: U.S. EPA 40 CFR 262. Hazardous waste Number: D002. This product is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, streams, ponds, estuaries, oceans or other waters unless in accordance with the requirements of a National Pollutant Discharge Elimination System (NPDES) Permit and the permitting authority has been notified in writing prior to the discharge. Do not discharge effluent containing this product to sewer systems without previously notifying the sewage treatment plant authority. For guidance contact your State Water Board or Regional Office of the EPA.

CONTAINER DISPOSAL: Triple rinse container. Then offer for recycling or reconditioning, or puncture and dispose of it in a sanitary landfill, or incineration, or if allowed by state and local authorities by burning.

OTHER INFORMATION

TRANSPORTATION INFORMATION

DOT Shipping Name: Hypochlorite Solution, Corrosive

Class: 8	UN#: 1791	Packing Group: PG III	RQ: 100 lbs. (Sodium Hypochlorite)

REGULATORY INFORMATION

TSCA (TOXIC SUBSTANCE CONTROL ACT):
All components of this mixture are listed on the TSCA Chemical Inventory.

SARA TITLE III, SECTION 302:
Not listed as an Extremely Hazardous Substance.

CERCLA (COMPREHENSIVE RESPONSE COMPENSATION, AND LIABILITY ACT):
Subject to reporting requirements under CERCLA (40 CFR 302).

CERCLA REPORTABLE QUANTITY:
Releases of Sodium Hypochlorite in quantities equal to or greater than the reportable quantity (RQ) of 100 pounds are subject to reporting to the National Response Center under CERCLA, Section 304 SARA Title III.

SARA TITLE III - HAZARD CLASSES:
Acute Health Hazard: Yes
Chronic Health Hazard: No
Fire Hazard: Yes (May release toxic gases on decomposition)
Sudden Release of Pressure Hazard: No
Reactivity Hazard: No

SARA TITLE III - SECTION 313 SUPPLIER NOTIFICATION:
This product contains the following toxic chemicals subject to the reporting requirements of Section 313 of the Emergency Planning and Community Right-To Know Act (EPCRA) of 1986 and of 40 CFR 372:

CAS NUMBER	INGREDIENT NAME	PERCENT BY VOLUME
No	No	No

This information must be included on all MSDS's that are copied and distributed for this material.

OTHER INFORMATION
HAZARD CODES

NFPA		HMIS	
Health:	3	Health:	3
Flammability:	0	Flammability:	0
Reactivity:	1	Reactivity:	1
OXIDIZER			

Rating System
0= No Hazard
1= Slight Hazard
2= Moderate Hazard
3= Serious Hazard
4= Severe Hazard

Disclaimer of Warranty:
The information provided in this Material Safety Data Sheet has been obtained from sources believed to be reliable. ALTIVIA provides no warranties, either expressed or implied and assumes no responsibility for the accuracy or completeness of the data contained herein. This information is offered for your information, consideration, and investigation. You should satisfy yourself that you have all current data relevant to your particular use. ALTIVIA knows of no medical condition, other than those noted on this material safety data sheet, which are generally recognized as being aggravated by exposure to this product.

Amico 2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input

Description Item # SPM9818198625 Model # PRO3286783878

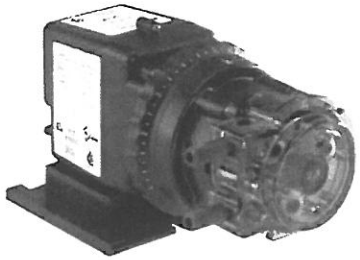
2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input - Flowmeter measuring the oil or water easy to read for its clear scale.Straight tube style connect the liquid tube by two end thread.Stainless steel material inner and glasses tube design.Read float at largest diameter you will kow the flow of water.
Amico - 2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input

- Flowmeter measuring the oil or water easy to read for its clear scale.
- Straight tube style connect the liquid tube by two end thread.
- Stainless steel material inner and glasses tube design.
- Read float at largest diameter you will kow the flow of water.

SPECIFICATION SHEET: 45 PUMP SERIES

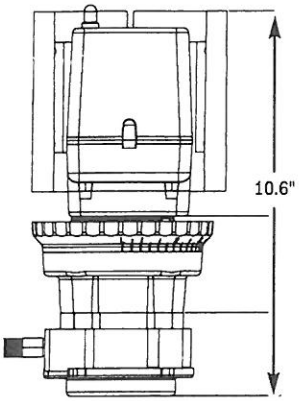
STENNER PUMPS

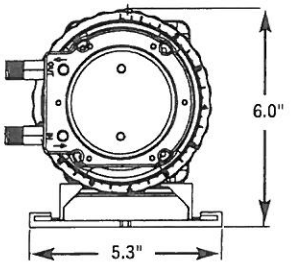
SINGLE HEAD ADJUSTABLE OUTPUT



MODELS

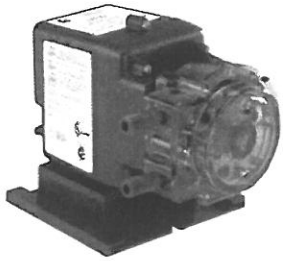
- 45MHP2
- 45MHP10
- 45MHP22
- 45M1
- 45M2
- 45M3
- 45M4
- 45M5





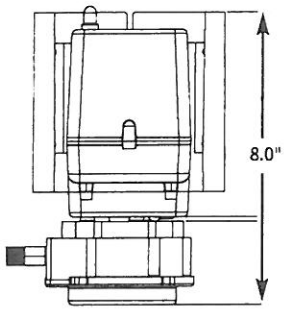
SHIPPING WEIGHT 9 lbs (4 kg)

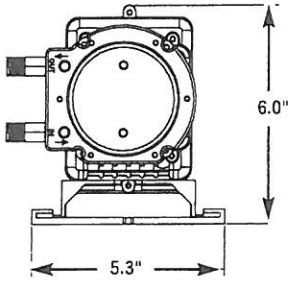
SINGLE HEAD FIXED OUTPUT



MODELS

- 45MPHP2
- 45MPHP10
- 45MPHP22
- 45MP1
- 45MP2
- 45MP3
- 45MP4
- 45MP5





SHIPPING WEIGHT 8 lbs (3.6 kg)

METERING PUMP
UL LISTED
96F0

METERING PUMP
LR79585
NRTL /C

CE IPX4

ETL SANITATION LISTED
94247
CONFORMS TO STD. NSF-50
CIRCULATION SYSTEM COMPONENTS FOR SWIMMING POOLS, SPAS, OR HOT TUBS

THIS PRODUCT HAS BEEN TESTED AND CERTIFIED BY THE WATER QUALITY ASSOCIATION ACCORDING TO NSF/ANSI 61 FOR MATERIALS SAFETY ONLY.

PRODUCT LISTINGS VARY BY MODEL. CONTACT FACTORY FOR DETAILS.

FEATURES

- Positive displacement pump
- 3-point roller design assists in anti-siphon protection.
- Pump head requires no valves, allows for easy maintenance.
- Self-priming against maximum working pressure, foot valve not required.
- Pump does not lose prime or vapor lock.
- Pumps off-gassing solutions and can run dry.
- Output volume is not affected by back pressure.
- Injection check valve included with 45MHP & 45MPHP models.
- Easy to change pump tube; lubrication is not required.
- Pump tubes and pump heads interchange between models.
- Models tested by WQA to conform to ANSI/NSF STD 61.
- Adjustable models tested by ETL to conform to ANSI/NSF STD 50.
- All pump accessories included allow a fast and easy installation.

STENNER

Stenner Pump Company
3174 DeSalvo Road
Jacksonville, Florida 32246

Phone 904.641.1666
US Toll Free 800.683.2378
Fax 904.642.1012

www.stenner.com
sales@stenner.com

SPECIFICATION SHEET: 45 PUMP SERIES

STENNER PUMPS

SPECIFICATIONS

OUTPUT RANGE
adjustable models only, 5%-100%,
2.5% increments

MAXIMUM WORKING PRESSURE
100psi (1.7 bar) for the following models
45MHP2, 45MHP10, 45MHP22
45MPHP2, 45MPHP10, 45MPHP22
25 psi (6.9 bar) for the following models
45M1, 45M2. 45M3, 45M4, 45M5
45MP1,45MP2, 45MP3, 45MP4, 45MP5

MAXIMUM AMBIENT and FLUID TEMPERATURE
125°F (52° C)

MAXIMUM SUCTION LIFT
25' vertical lift

MOTOR TYPE
1/30 HP, shaded pole, class B

FINAL MOTOR RPM
26

DUTY CYCLE
Continuous

MOTOR VOLTAGE (AMP DRAW)
120V 60Hz 1PH (1.7)
220V 60Hz 1PH (0.9)
230V 50Hz 1PH (0.9) International
250V 50Hz 1PH (0.9) International

POWER CORD PLUG END
120V 60Hz - NEMA 5/15, 230V 50Hz - CEE 7/VII
220V 60Hz - NEMA 6/15, 250V 50Hz - CEE 7/VII

WET END COMPONENTS

PERISTALTIC TUBE
Santoprene® *FDA approved
optional Tygothane®** FDA approved

TUBE FITTINGS, COMPRESSION NUTS
Type 1 rigid PVC-NSF listed

SUCTION STRAINER & WEIGHT
Type 1 rigid PVC body, ceramic weight - NSF listed

SUCTION/DISCHARGE TUBING & FERRULES
LDPE polyethylene, NSF and FDA approved

CHECK VALVE (injection fitting & body)
Type 1 rigid PVC-NSF listed

CHECK VALVE DUCKBILL
Santoprene®* FDA Approved
Pellathane®† (with Tygothane® tube)

OTHER COMPONENTS

ALL PUMP HOUSINGS
GE Lexan®†† Polycarbonate

PUMP HEAD ROLLERS
HDPE

ROLLER BUSHINGS
Bronze Oilite

ALL FASTENERS
Stainless Steel

POWER CORD TYPE
SJTOW

*Santoprene® is a registered trademark of Advanced Elastomer System.
**Tygothane® is a registered trademark of Saint-Gobain Performance Plastics.
†Pellathane® is a registered trademark of The Dow Company.
††Lexan® is a registered trademark of General Electric. Consult General Electric for chemical resistance of Lexan®

ACCESSORY KIT SHIPPED WITH EACH PUMP
- 3 connecting nuts 1/4" or 3/8"
- 3 ferrules 1/4" or 6mm *Europe*
  OR 2 ferrules 3/8"
- 1 injection check valve 26-100 psi (1.7-6.9 bar)
  OR 1 injection fitting 0-25 psi (0-1.7 bar)
- 1 weighted suction line strainer
  1/4", 3/8" or 6mm *Europe*
- 1 20' roll suction/discharge tubing
  1/4" or 3/8', white or UV black
  OR 6 mm white *Europe*
- 1 spare pump tube
- 1 mounting bracket
- 1 manual

45 SERIES PUMP ADJUSTABLE OUTPUT

			Approximate Output @ 60 Hz						Approximate Output @ 50 Hz		
Single Head Model	Maximum Pressure	Pump Tube Number	gallons per day	liters per day	gallons per hour	liters per hour	ounces per minute	milliliters per minute	liters per day	liters per hour	milliliters per minute
45MHP2* 45M1	100 psi (6.9 bar) 25 psi (1.7 bar)	#1 #1	0.2 to 3.0	0.8 to 11.4	0.01 to 0.13	0.03 to 0.48	0.02 to 0.27	0.56 to 7.92	0.6 to 9.1	0.03 to 0.38	0.31 to 6.32
45MHP10* 45M2	100 psi (6.9 bar) 25 psi (1.7 bar)	#2 #2	0.5 to 10.0	1.9 to 37.9	0.02 to 0.42	0.08 to 1.58	0.04 to 0.89	1.32 to 26.32	1.5 to 30.3	0.06 to 1.26	1.04 to 21.04
45MHP22* 45M3	100 psi (6.9 bar) 25 psi (1.7 bar)	#7 #3	1.1 to 22.0	4.2 to 83.3	0.05 to 0.92	0.18 to 3.47	0.10 to 1.96	2.92 to 57.85	3.3 to 66.6	0.14 to 2.78	2.29 to 46.25
45M4	25 psi (1.7 bar)	#4	1.7 to 35.0	6.4 to 132.5	0.07 to 1.46	0.27 to 5.52	0.15 to 3.11	4.44 to 92.01	5.1 to 106.0	0.21 to 4.42	3.54 to 73.61
45M5	25 psi (1.7 bar)	#5	2.5 to 50.0	9.5 to 189.3	0.10 to 2.08	0.40 to 7.89	0.22 to 4.44	6.60 to 131.46	7.6 to 151.4	0.32 to 6.31	5.28 to 105.14

*Pump supplied with injection check valve for 26-100 psi (1.7-6.9 bar) applications

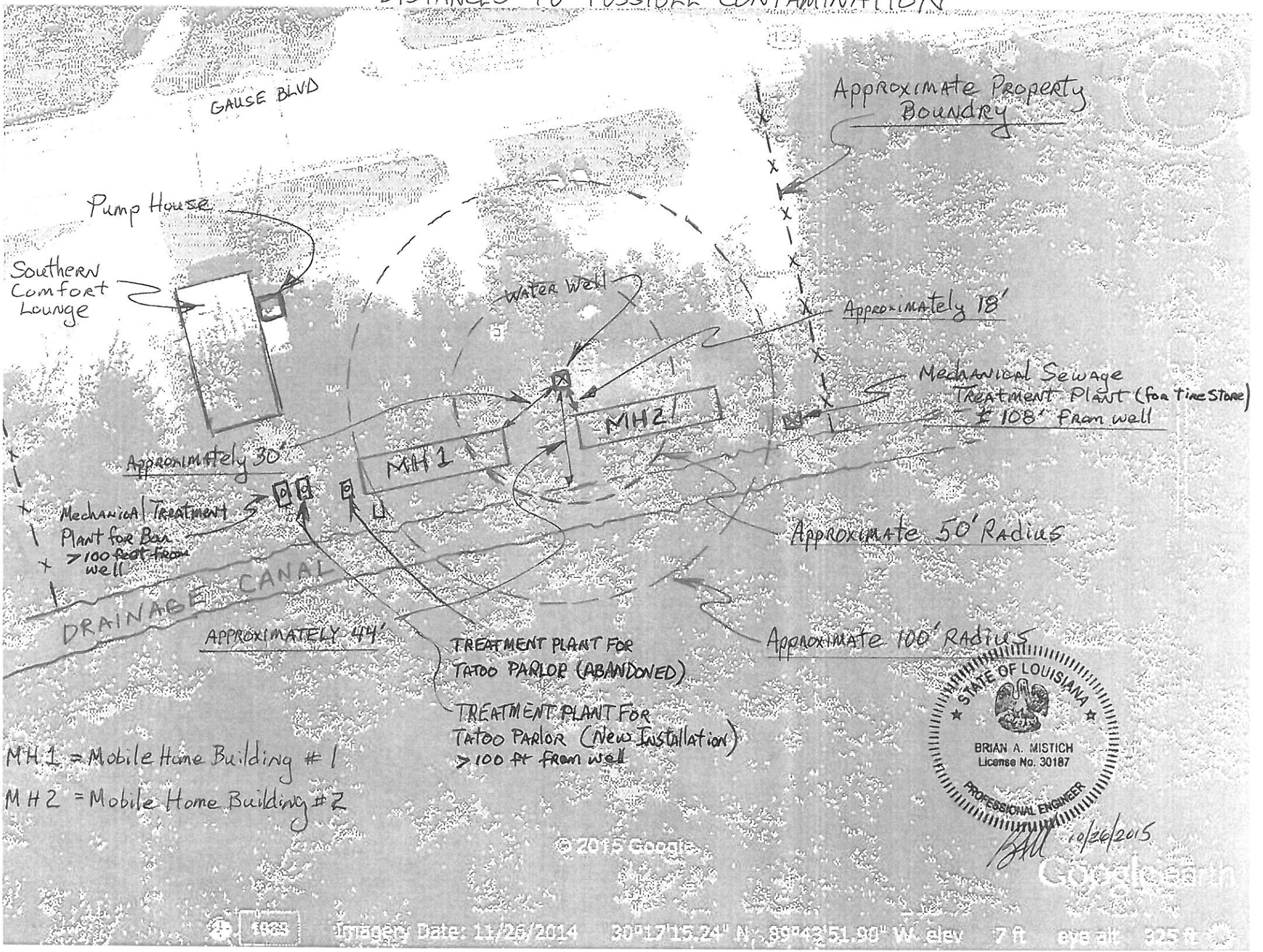
45 SERIES PUMP FIXED OUTPUT

			Approximate Output @ 60 Hz						Approximate Output @ 50 Hz		
Single Head Model	Maximum Pressure	Pump Tube Number	gallons per day	liters per day	gallons per hour	liters per hour	ounces per minute	milliliters per minute	liters per day	liters per hour	milliliters per minute
45MPHP2* 45MP1	100 psi (6.9 bar) 25 psi (1.7 bar)	#1 #1	3.0	11.4	0.13	0.48	0.27	7.92	9.1	0.38	6.32
45MPHP10* 45MP2	100 psi (6.9 bar) 25 psi (1.7 bar)	#2 #2	10.0	37.9	0.42	1.58	0.89	26.32	30.3	1.26	21.04
45MPHP22* 45MP3	100 psi (6.9 bar) 25 psi (1.7 bar)	#7 #3	22.0	83.3	0.92	3.47	1.96	57.85	66.6	2.78	46.25
45MP4	25 psi (1.7 bar)	#4	35.0	132.5	1.46	5.52	3.11	92.01	106.0	4.42	73.61
45MP5	25 psi (1.7 bar)	#5	50.0	189.3	2.08	7.89	4.44	131.43	151.4	6.31	105.14

*Pump supplied with injection check valve for 26-100 psi (1.7-6.9 bar) applications

NOTICE: The information within this chart is solely intended for use as a guide. The output data is an approximation based on pumping water under a controlled testing environment. Many variables can affect the output of the pump. Stenner Pump Company recommends that all metering pumps undergo field calibration by means of analytical testing to confirm their outputs.

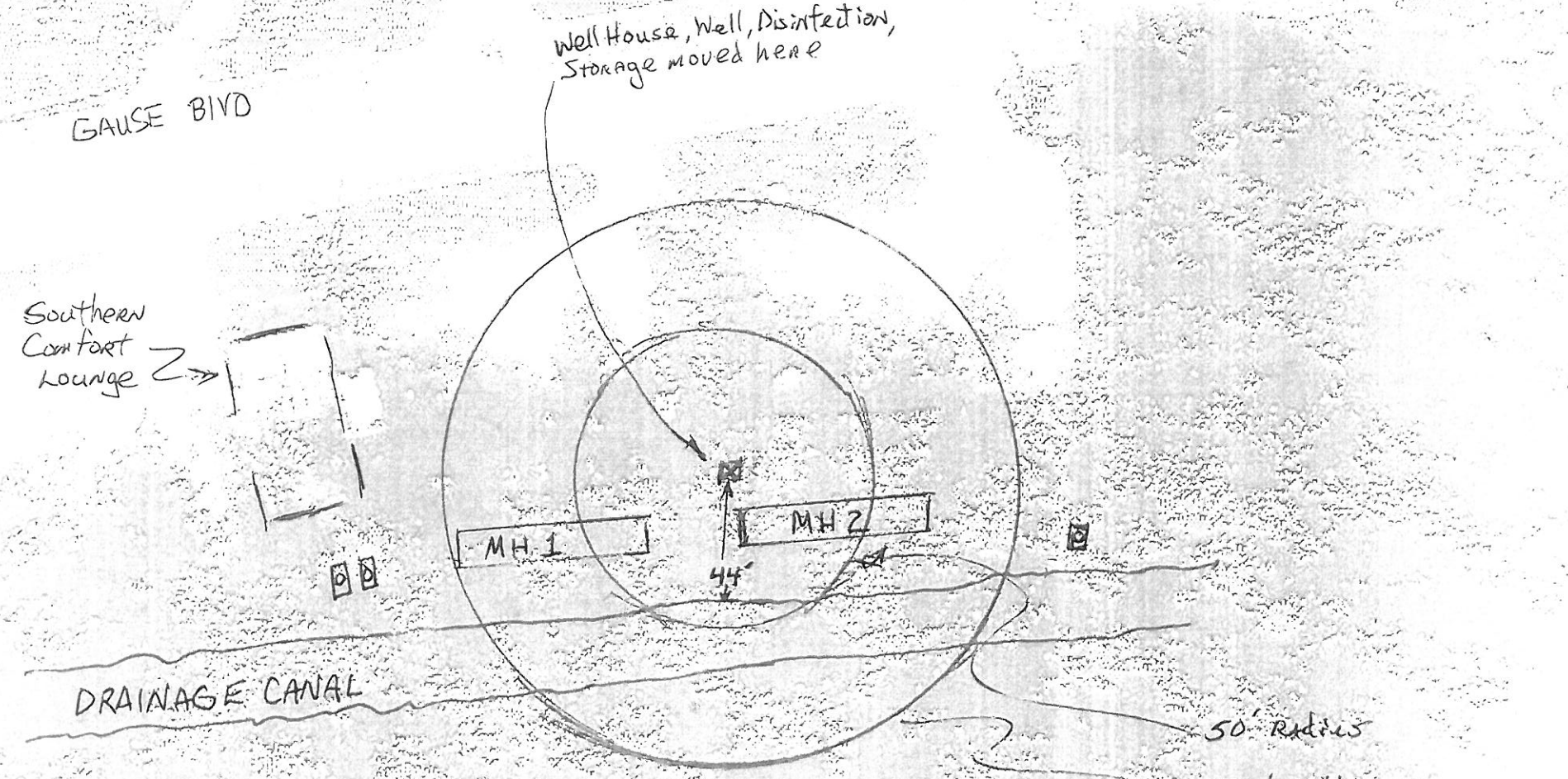
DISTANCES TO POSSIBLE CONTAMINATION



STATE OF LOUISIANA
BRIAN A. MISTICH
License No. 30187
PROFESSIONAL ENGINEER

10/26/2015

NEW UPGRADE of Water Supply



1) All Treatment plants are greater than 100' from water well

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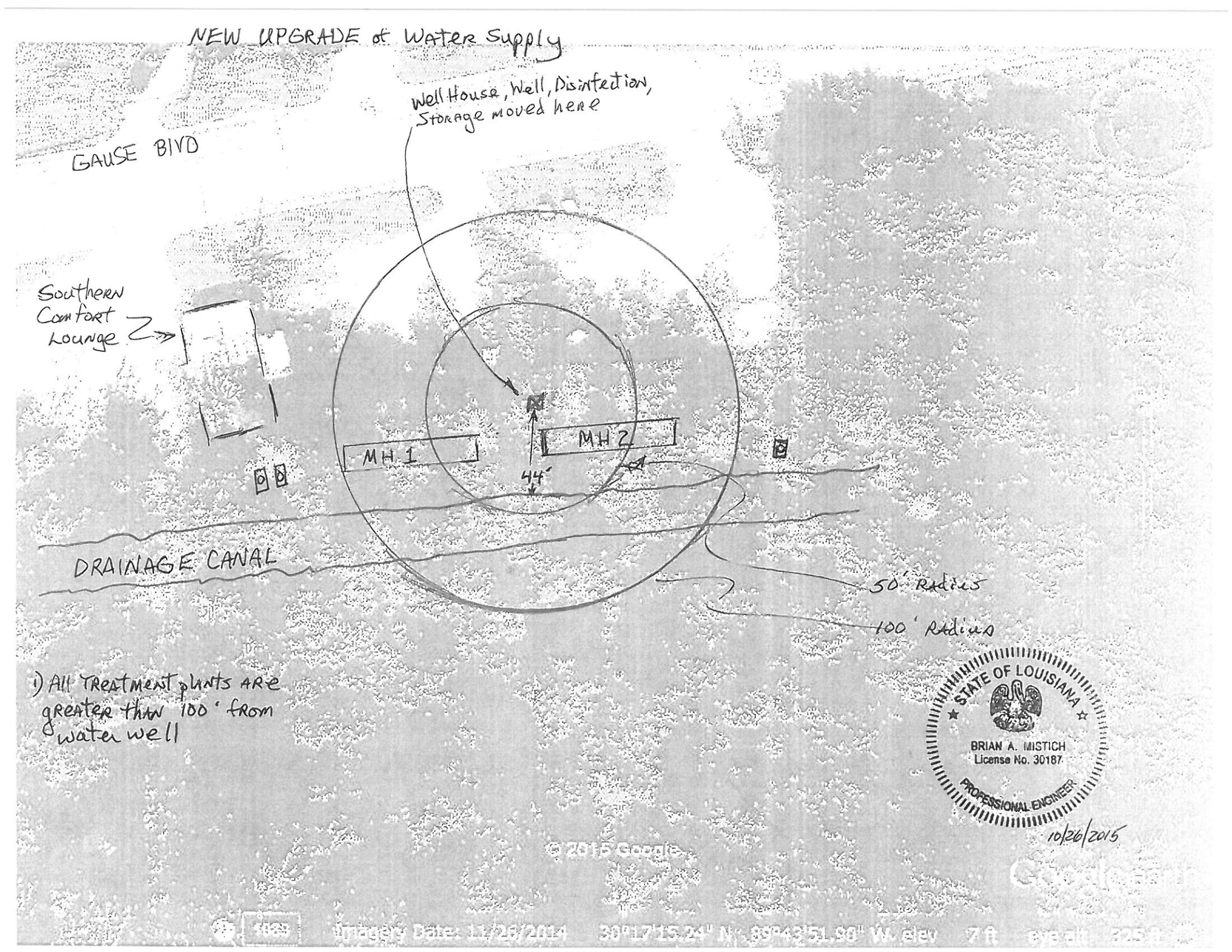
10/26/2015


NEW UPGRADE of Water Supply
Well House, Well, Disinfection, Storage moved here
GAUSE BLVD
Southern Comfort Lounge
MH 1
MH 2
44'
DRAINAGE CANAL
50' Radius
100' Radius
1) All Treatment plants are greater than 100' from water well
STATE OF LOUISIANA
BRIAN A. MISTICH
License No. 30187
PROFESSIONAL ENGINEER
10/26/2015
© 2015 Google
Imagery Date: 11/26/2014 30°17'15.24" N 90°43'51.90" W elev 7 ft

MILTON ROY

Calibration Column

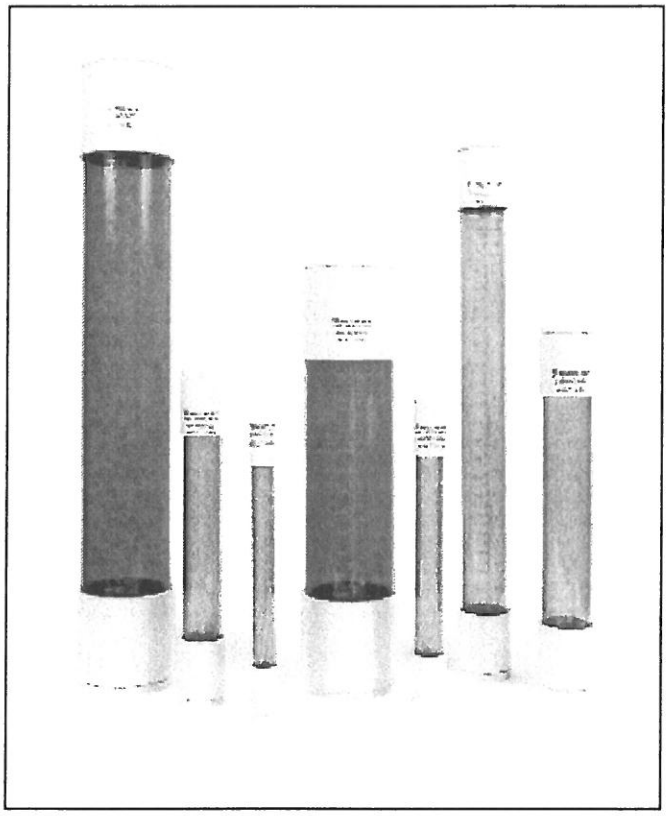
DESCRIPTION

Milton Roy test tube Calibration Columns are designed specifically for use in determining flow rates of chemical metering pumps. Pump flow rate verification on periodic basis or after maintenance is important to system accuracy.

The test tube Calibration Columns provide a fast, easy, economical means of checking flow rates of your chemical metering pump. The units are easily installed (see instructions and diagram on reverse side).

Test tube Calibration Columns are available in the six sizes shown below. Flow rates shown below are based on a 30 second sample time.

- 60 ml . . . .for pumps up to 2.0 GPH
- 100 ml . . . for pumps up to 3.3 GPH
- 250 ml . . . for pumps up to 8.3 GPH
- 500 ml . . . for pumps up to 16 GPH
- 1000 ml . . for pumps up to 34 GPH
- 2000 ml . . for pumps up to 67 GPH
- 4000 ml . . for pumps up to 120 GPH

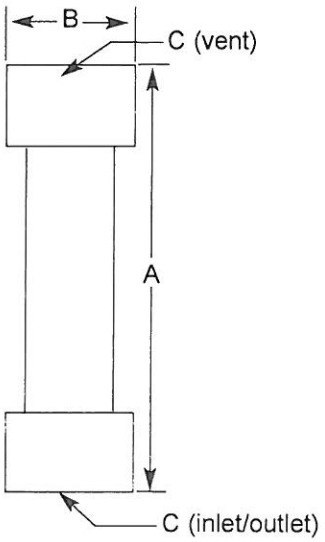


FEATURES

- Rugged PVC materials of construction
- Large, easy to read label with operating instructions for ease of use
- Graduated in ml and standard divisions -- no conversion needed
- Easy to Clean
- Available from stock

DIMENSIONS

Model Number	Capacity	A	B	C
TT-0060	60 ml	13-3/4"	1-5/16"	1/4" Female NPT
TT-0100	100 ml	14-3/8"	1-5/8"	1/2" Female NPT
TT-0250	250 ml	15-3/4"	2-1/4"	1/2" Female NPT
TT-0500	500 ml	17-3/16"	2-3/4"	3/4" Female NPT
TT-1000	1000 ml	27-1/16"	2-3/4"	3/4" Female NPT
TT-2000	2000 ml	21-1/4"	5"	2" Female NPT
TT-4000	4000 ml	31"	5"	2" Female NPT



AD 4331
Effective 9/1/99

MILTON ROY

INSTALLATION INSTRUCTIONS

The recommended installation is shown below.

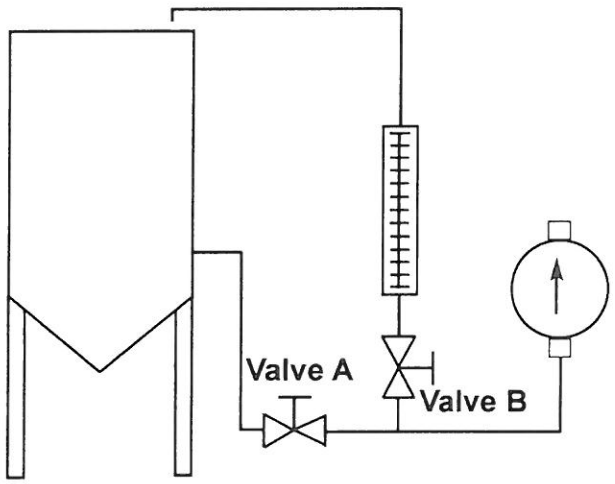
1. Install the test tube in the suction line to the chemical feed pump. The test tube should be installed in a vertical position, adjacent to the chemical storage tank. The test tube is filled by gravity; therefore, the tank must be full, or nearly full, in order to use the test tube.

2. Two (2) ball valves are required and must be installed as shown below. Valves are not included with the test tube, but may be purchased from Milton Roy.

3. A return (overflow) line must be provided, connection the top of the calibration column to supply tanks. Do not install any valve in this overflow line, as the test tube must be vented to atmosphere at all times.

4. A support strap is provided with each test tube for added stability at the top if needed.

RECOMMENDED INSTALLATION



IMPORTANT INSTALLATION NOTES:

A. This unit must be vented to atmosphere when in use.
B. Never use this device on discharge side of pump.
C. This device is intended for verification of metering pump flow rate.
D. Maximum pressure = static head pressure of tank. Maximum temperature = 130° F.
E. Not suitable for all chemicals. Consult factory.

OPERATING INSTRUCTIONS

A stop watch or standard wrist watch with sweep second hand is required.

1. With the pump operating normally, storage tank full or nearly full, and both valve A and valve B in the full open position, the test tube will fill with liquid.
2. When the liquid level reaches the zero division mark, close valve A. (Any division mark may be used as a starting point; however, by filling to the zero mark, you may measure over a longer period of time, enabling you to get a better calibration.)
3. Allow liquid level to drop for a period of at least 309 seconds before reopening valve A. (It is simplest to reopen valve A when liquid level is at one of the division lines.)
4. Finally, divide the number of divisions that the liquid has dropped by the number of minutes used. The answer is the pump flow rate in gallons per hour (GPH). For TT-4000 only, divide the number of divisions that the liquid has dropped by the number of minutes used and multiply the answer by ten. The answer is the pump flow rate in gallons per hour (GPH).
5. Example: Using the TT-1000 unit, the liquid level drops from the zero division to the 10th division in 30 seconds (0.5). The flow rate, then, is 10 / 0.5 = 20.0 GPH.
6. Check the actual measured flow rate against the setting on the pump.
7. When the test tube is not in use, valve B may be closed.
8. Valve A must remain open at all times except while the test tube is in use.

NOTE:

With both valves in the open position, the test tube may be used as a level gauge. This practice should only be followed when process liquid level is below the maximum calibration column height. If liquid level is higher than maximum calibration column height, the calibration column will overfill and force the process liquid to return to the tank.

AVAILABLE ACCESSORIES:

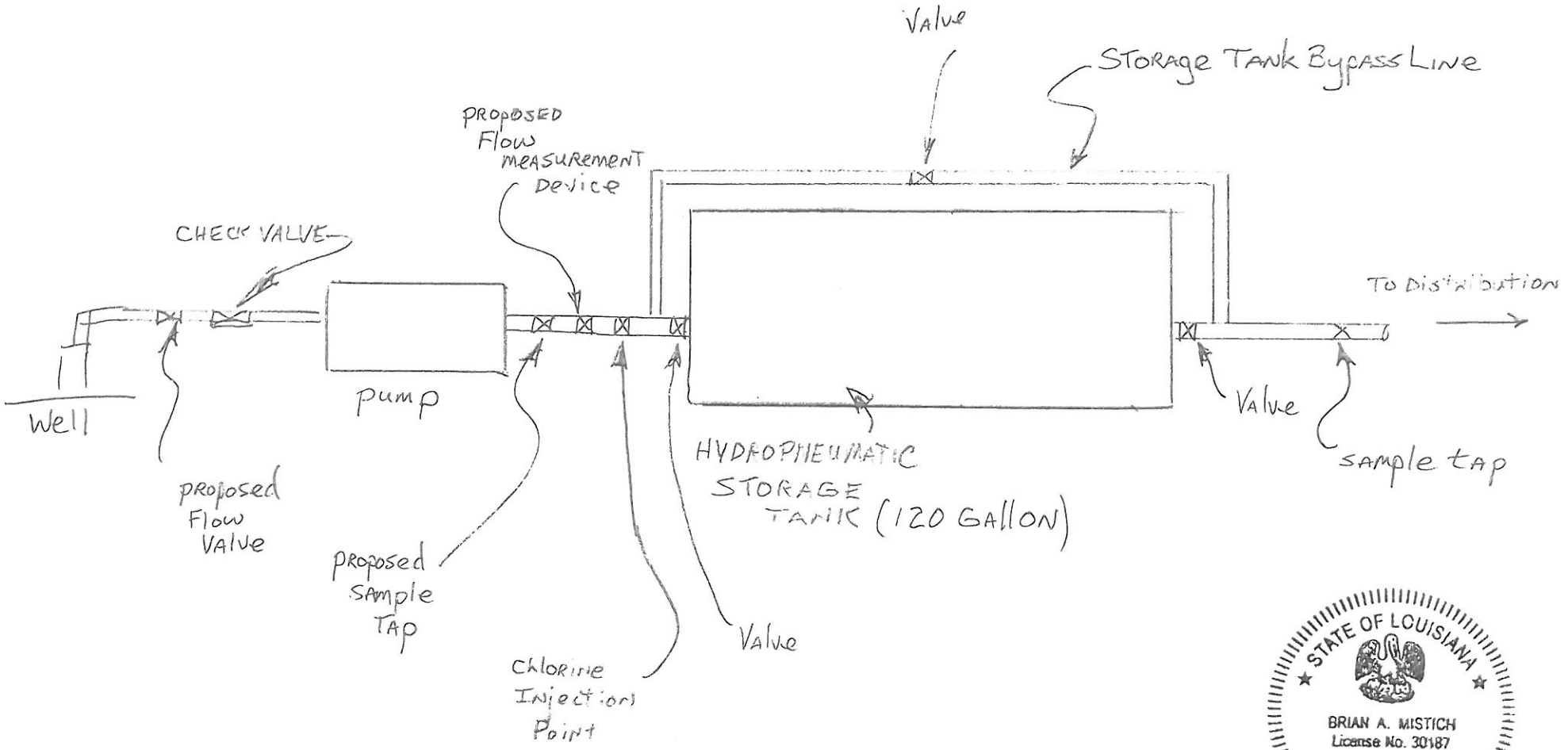
In addition to metering pumps & chemical feed systems, Milton Roy offers the following accessories:

- Back Pressure Valves
- Pulsation Dampeners
- Gauge Glasses
- Valve Actuators
- Safety Valves
- Dissolving Baskets
- Pressure Gauges
- Floats
- Tanks
- Mixers
- Traps

Milton Roy Company • *Flow Control Division*
201 Ivyland Road • Ivyland, PA 18974-0577 • 215-441-0800 • FAX: 215-441-8620 • www.miltonroy.com

AD 4331
Effective 9/1/99

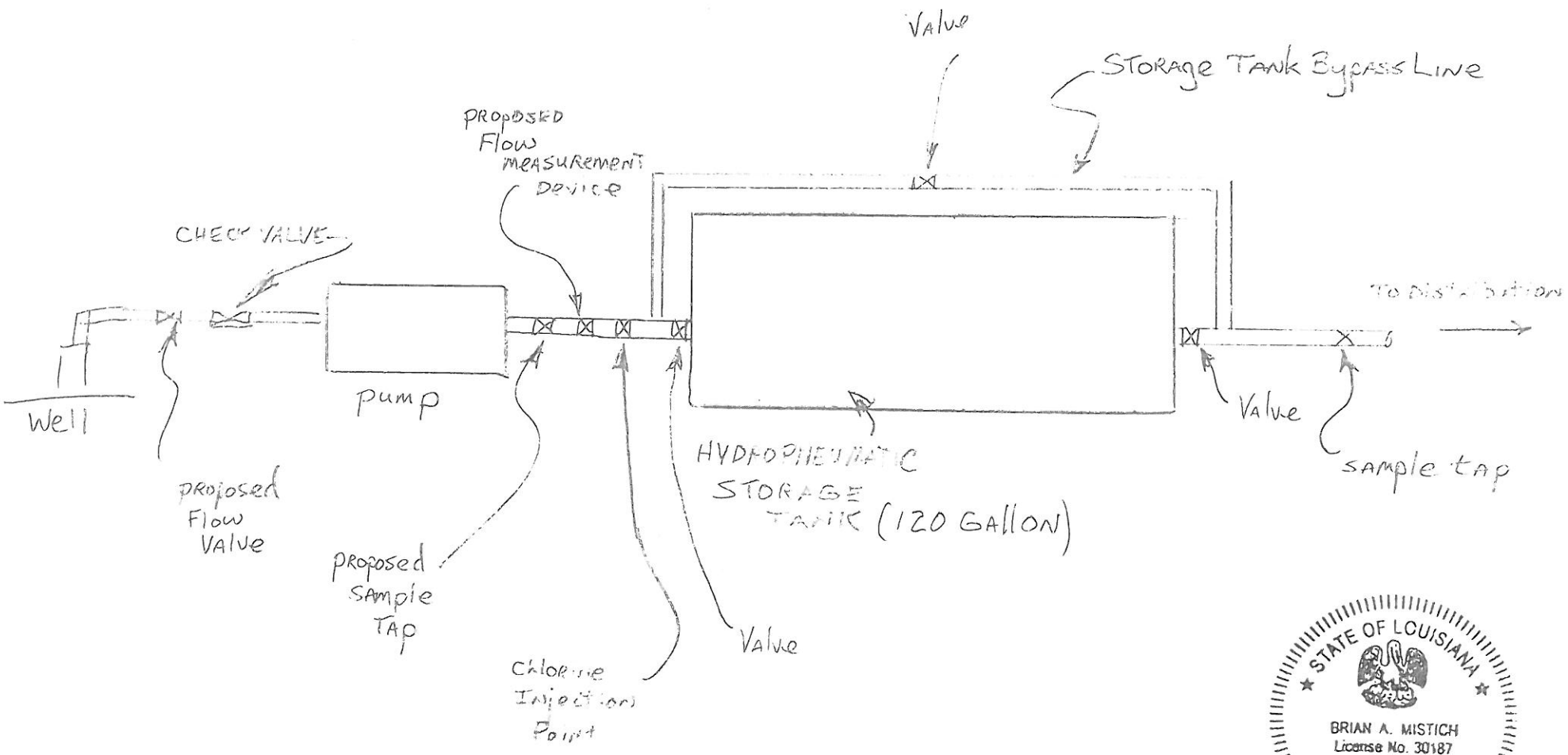
SYSTEM DIAGRAM



STATE OF LOUISIANA
BRIAN A. MISTICH
License No. 30187
PROFESSIONAL ENGINEER

10/26/2015

SYSTEM DIAGRAM



STATE OF LOUISIANA

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PROFESSIONAL ENGINEER

10/26/2015

OFFICE COPY

DAMMON
ENGINEERING, INC.
554 Old Spanish Trail
Slidell, LA 70458
Phone: 985-649-5832
Fax: 985-641-5950
dammonengineering.com
info@dammonengineering.com

December 11, 2015

Mr. Marcus N. Redford, P.E.
Office of Public Health
71128 HWY 59, Suite 102-B
Abita Springs, LA 70402

RE: Reply to Comments Letter of December 7, 2015
Southern Comfort Lounge Water Supply
2209 Gause Blvd. East
Slidell, LA 70461
St. Tammany Parish
Water Supply Update/Modernization
Water supply disinfection facility, Stenner Model 45 MHP-10 Chemical injection Unit
12 Gallon Chemical Storage Tank (12 ½ % Sodium Hypochlorite Solution)
120 Gallon Hydropneumatic Storage Tank
½ HP Everbilt Well Jet Pump with associated SDR 26 PVC Piping
1 Existing well w/distribution Piping & Appurtenances

Mr. Redford,

In reference to the above captioned, the following information is presented for your review. To specifically address your enumerated comments:

1. The proposed sample tap (for raw water testing) shall be located downstream of the pump. A check valve shall be installed immediately downstream of the tap. (See attached upgraded system diagram)

2. A FloTec representative was contacted on Tuesday December 8, 2015 concerning the installation of a sight glass as a means of monitoring the liquid level in the hydropneumatic storage tank. Systems of this size do not generally have these types of water level indicators. At this time, the Flotec Company does not manufacture a sight glass for the 120 gallon Hydropneumatic tank (Flotec Model **FP7250**). However, to meet the spirit of requirements, and to assure a smooth running system, the certified operator who takes daily chlorine residuals shall be instructed to monitor the system daily for any excessive cycling of the pump and to physically feel for temperature changes on the tank shell which would indicate the water level. This shall be done daily. Any deviation from the proper water/air ratio shall be addressed by manually injecting air into the tank or releasing it.

3. The FloTec representative contacted on Tuesday December 8, 2015 indicated that the maximum working pressure recommended is 100 PSI. All Model **FP7250** tanks are tested to 150 PSI for leaks and/or defects. In the Southern Comfort Lounge application, the tank shall be operating between 40 PSI and 60 PSI, a typical operational range for water systems of this size and function.

4. A short length (+/- 20 L.F.) of PVC pipe has been identified as requiring Schedule 40 designation and shall be replaced with such. The location of the questionable pipe is indicated in red on the attached "New Upgrade of Water Supply" diagram. This particular segment of pipe is above ground (suspended under structure) and is part of the plumbing piping for 1 room in the Tattoo Parlor. This schedule 40 replacement should satisfy code.

5. A dual check valve backflow preventer (a 1" Watts Series 7 or equivalent) shall be installed on the service line entering the Southern Comfort Lounge. Additional backflow preventers for the Used Tire Store and Tattoo Parlor are to the understanding of this Office optional but will be installed. The locations of installation are indicated on the "New Upgrade of Water Supply" diagram.

Once a permit is obtained for this water supply, sample taps shall be installed in appropriate locations with the coordination of a St. Tammany Parish Health Unit Sanitarian and any Drinking Water Personnel that may wish to assist. Proposed locations are:

1 tap at each of the 3 three businesses,
1 tap on the discharge side of the Hydropneumatic tank (POE),
1 at the end longest line (for chlorine residence),
1 located in a random location and,
1 adjacent to the well head for chemical sampling.

Any additional taps required by the Health Department shall also be installed.

GPS coordinates defining the property limits of the water system shall be acquired and transmitted to you shortly. Your patience and assistance is greatly appreciated. We await your timely reply.

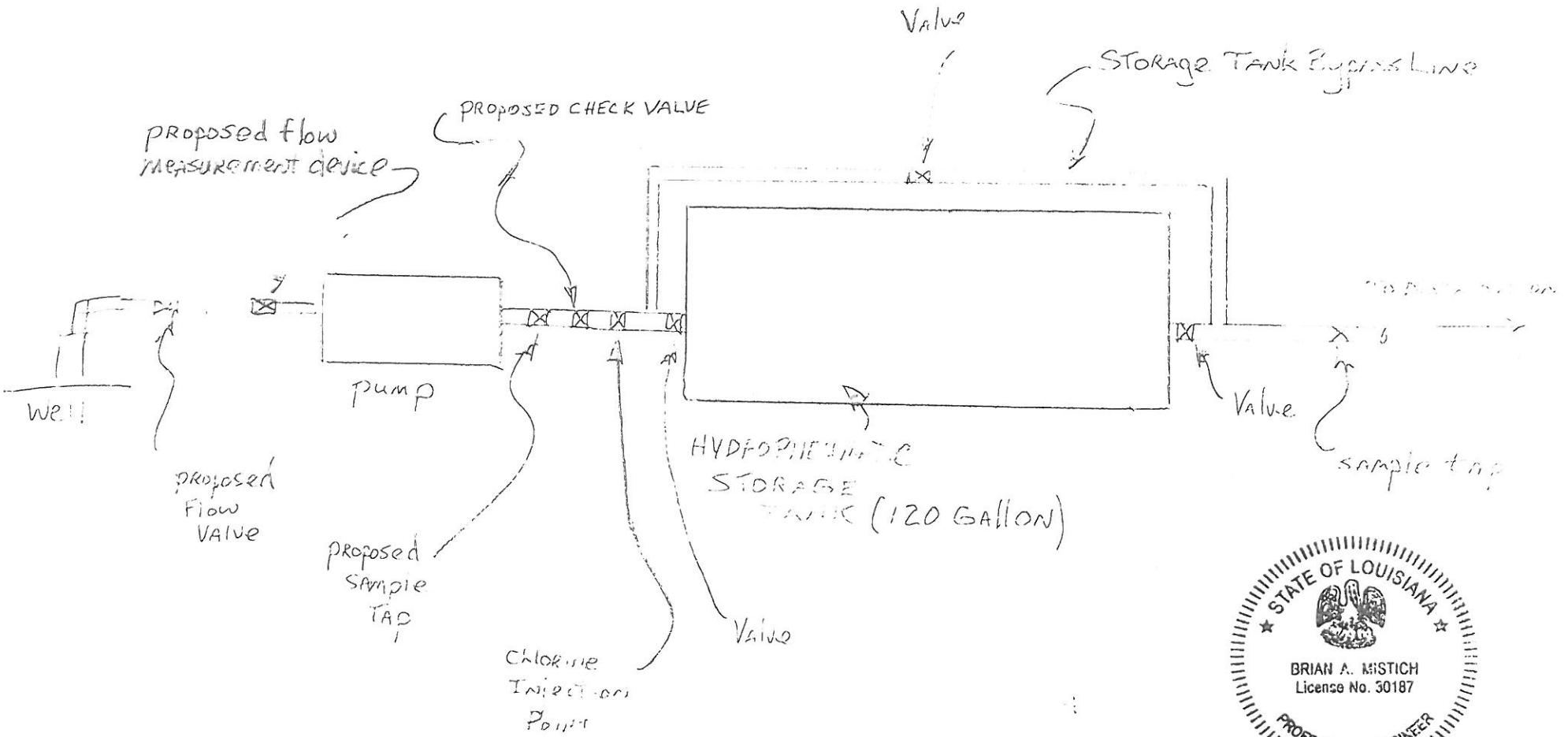
Respectfully,

Brian A. Mistich

Brian A. Mistich, P.E.
Dammon Engineering

Cc: Ms. Judith Culpepper, St. Tammany Parish Sanitarian Manager
Mr. Jay Watson, Dept. of Environmental. Services, St. Tammany Parish Government
Mr. R. B. Williams

SYSTEM DIAGRAM



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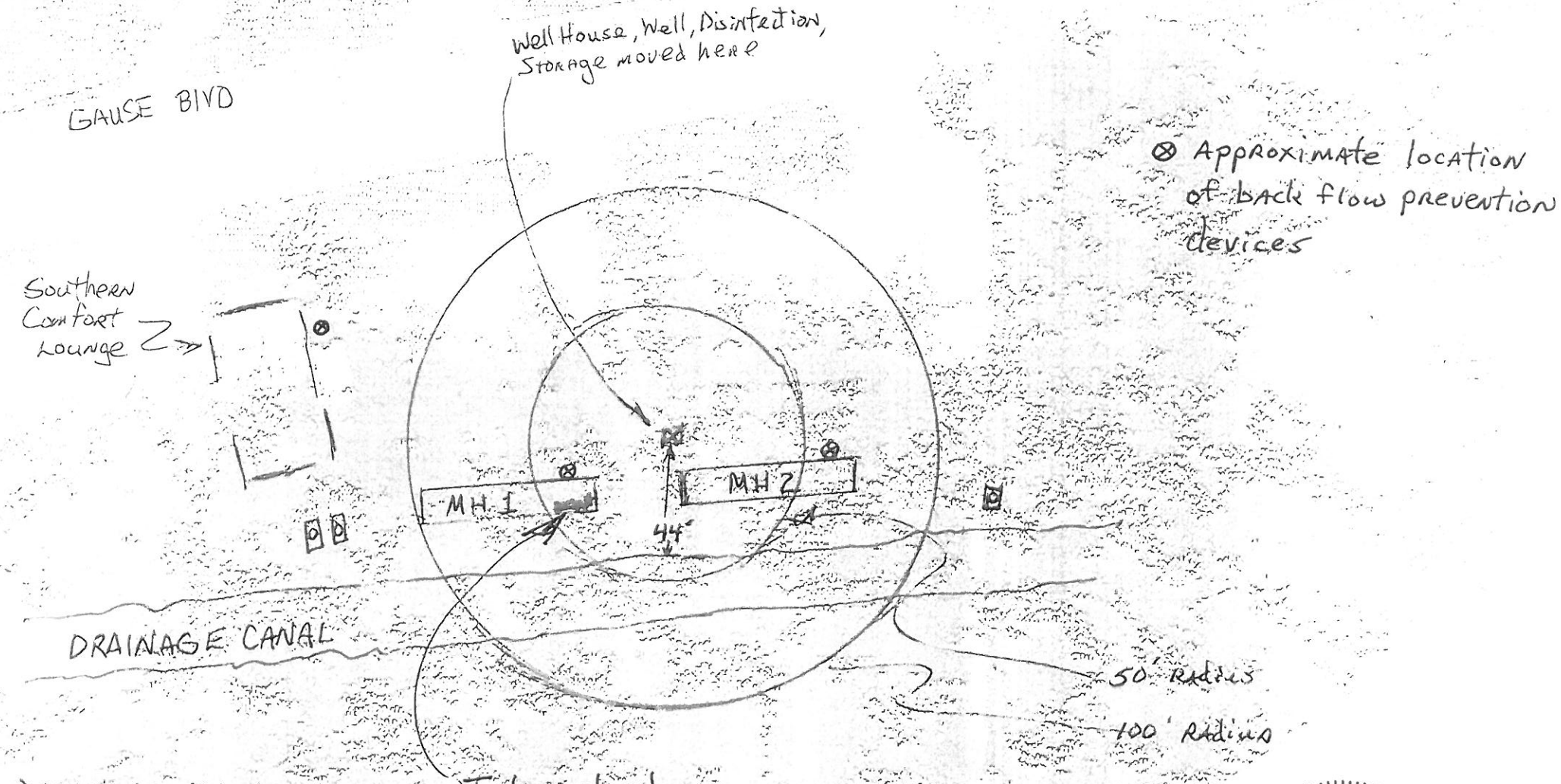
PROFESSIONAL ENGINEER

12/11/2015

NEW UPGRADE of Water Supply



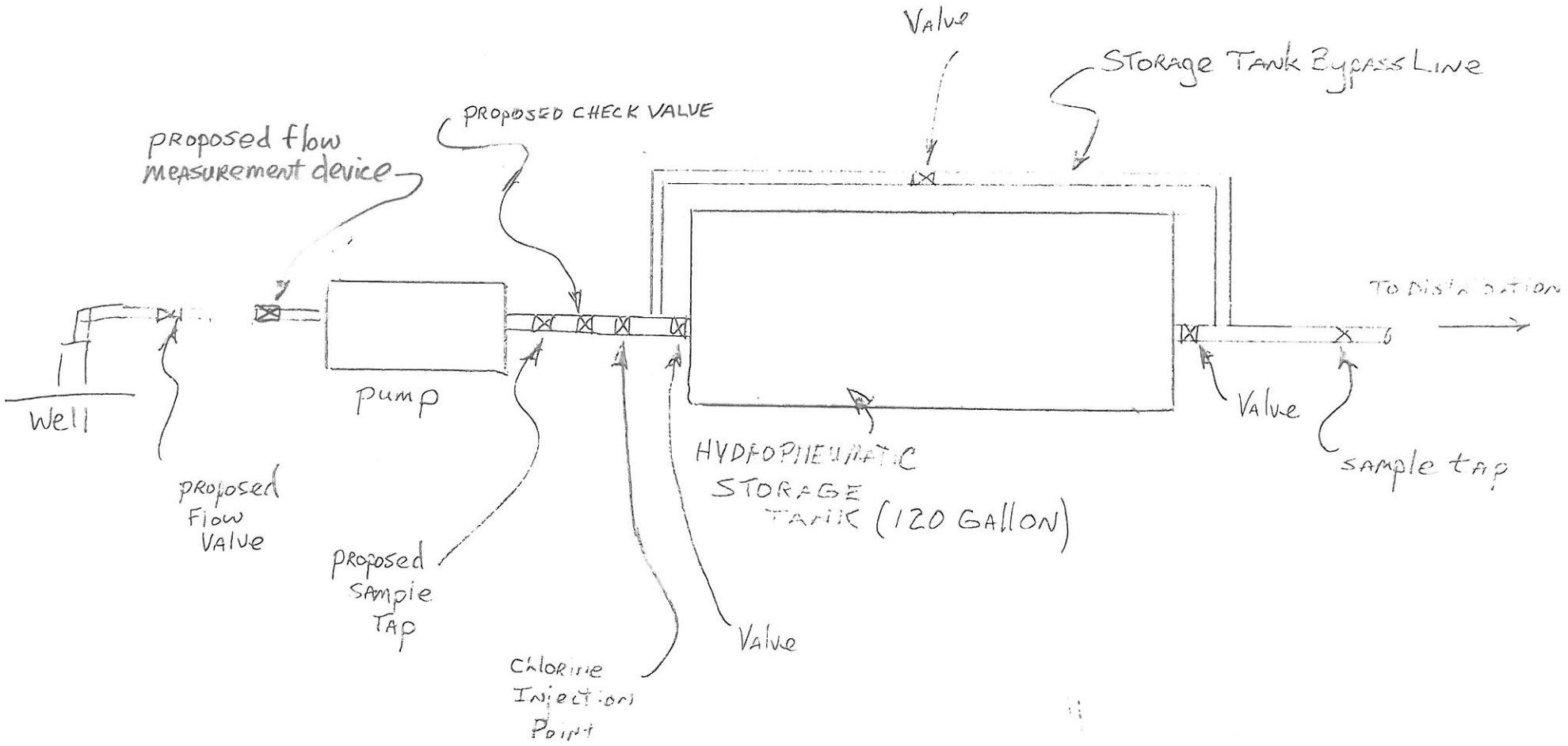
1) All treatment plants are greater than 100' from water well

To be replaced w/SCH 40 pvc

STATE OF LOUISIANA
BRIAN A. MISTICH
License No. 30187
PROFESSIONAL ENGINEER

12/11/2015

SYSTEM DIAGRAM



Bobby Jindal
GOVERNOR

Kathy H. Kliebert
SECRETARY

State of Louisiana

Department of Health and Hospitals
Office of Public Health

December 7, 2015

Brian A. Mistich, P.E.
Dammon Engineering, Inc.
894 Robert Boulevard
Slidell, LA 70458

Re: Southern Comfort Lounge Water Supply
New Water System for Addition to Inventory
- Water Well
- Proposed Chlorine Disinfection System
- Hydropneumatic Tank
- Distribution System

Slidell, Louisiana
St. Tammany Parish
DES Number 15-021

Mr. Mistich:

Plans and specifications of the above named project have been reviewed. The plans are **DISAPPROVED** pending resolution of the following items which appear to be in conflict with applicable provisions of the Louisiana Administrative Code (LAC), or upon which further information is needed.

1. The submitted drawing for this water system is incomplete and additional changes need to be addressed. The drawing does not include a sample tap for obtaining a raw water sample. It should be located on the piping from the well head of the free flow well prior to check vale and chlorine injection but may be after a valve utilized for isolating the system from the free flow of the well. Please make appropriate changes to the drawing for submittal and review.

2. The hydropneumatic tank will require either a sight glass or an automated means of maintaining the appropriate air level over the water level. If a sight glass and air compressor are to be utilized or another type of regulator indicate them on the drawing with manufacturing information for each. Please provide all applicable information when responding to comment 1. above.

Flotec 1 800 365 6832 Model FPT250-00

3. Please provide the maximum working pressure and bursting pressure for the hydropeumatic tank for review. Please submit the completed drawing for review. Additional comments may arise.

4. Your submittal states that sanitary sewer line around the well will be relocated and replaced with schedule 40 PVC within the 50 foot radius but not closer than a 30 foot radius. Please revise plans to show any sewer lines affected and resubmit plans accordingly.

Jose' 75 psi pressure relief valve
150 psi test pressure

100/ 1) max working pressure
2) bursting pressure
3) site glass
4) is this a bladder TANK
75 operating pressure

DHH ▪ OFFICE OF PUBLIC HEALTH ▪ REGION IX
71128 HWY 59, SUITE 102-B ABITA SPRINGS, LOUISIANA 70420
Phone #: 985/871-1283 ▪ Fax #: 985/871-1335

DAMMON
ENGINEERING, INC.

554 Old Spanish Trail
Slidell, LA 70458
Phone: 985-649-5832
Fax: 985-641-5950
dammonengineering.com
dammoneng@bellsouth.net

August 27, 2015

Mr. Marcus N. Redford, P.E.
Office of Public Health
71128 HWY 59, Suite 102-B
Abita Springs, LA 70402

RE: Southern Comfort Lounge Water Supply
2209 Gause Blvd. East
Slidell, LA 70461
St. Tammany Parish

Water supply disinfection facility, Stenner Model 45 MHP-10 Chemical injection Unit
12 Gallon Chemical Storage Tank (12 ½ % Sodium Hypochlorite Solution)
2 - 42 Gallon Hydropneumatic Storage Tank (one existing, one proposed)
½ HP Everbilt Well Jet Pump with associated SDR 26 PVC Piping
1 Existing well w/distribution Piping & Appurtenances

Mr. Redford,

In reference to the above captioned, the following information is presented for your review.

The Southern Comfort Lounge Water Supply is a system that was installed 20 to 30 years ago. The system has been in operation since that time up until recently. Much of the information detailing the design of the system has been culled from well drillers, the current owner, and persons associated with this project. Details may not truly reflect the exact parameters on the installation of the system and some conflicting and inaccurate information was provided. Items in the Design Summary Package for this current submittal have been addressed to the best of my knowledge, although not all questions have been answered as information may not be readily available.

A survey of the system was conducted on August 24, 2015 by me in an attempt to depict a more accurate representation of the water system features. This submittal lists the parameters of the water system in an as-built water supply condition.

In reply to your specific comments:

1) A complete application package is submitted for your review.
2) Page 1 of the water well information ESPA has been provided.
3) Sources of contamination have been identified on the accompanying diagram.
4) A product sheet for the Flowtec Model FP7230 Hydropneumatic Tank is provided. The specifications sheet does not specifically designate ASME code requirement construction; however, this type of tank is designed for potable water systems and used in many systems.

5) Bypass piping for the Hydropneumatic Tank shall be installed. (see system diagram)
6) As this is an extremely small water supply, the Hydropneumatic Tank will not have automatic controls to maintain water-to-air ratio. The air shall be manually injected using an access valve to be installed on the air tank.
7) A second storage tank, identical to the 42 gallon Flowtec tank shall be added to increase storage capacity. See attached calculation sheet for chlorine contact time.
8) The MSDA sheets for AquaChlor 12.5% are provided in the submittal.
9) Sodium Hypochlorite shall be stored in the pump house. The ESPA page has been corrected.
10) The certified operator shall take the chlorine residuals.
11) The water system shall be disinfected in accord with LAC 51, Part XII, 351 and tested in accord with LAC 51, Part XII, 353.

1) Water supply disinfection facility, Stenner Model 45 MHP-10 Chemical injection Unit
2) 12 Gallon Chemical Storage Tank (12 ½ % Sodium Hypochlorite Solution)
3) 2 - 42 Gallon Hydropneumatic Storage Tank (one existing, one proposed)
4) ½ HP Everbilt Well Jet Pump with associated SDR 26 PVC Piping

The Chlorine injection point shall be after the check valve but before the storage tank.

Respectfully,

Brian A. Mistich, P.E.
Dammon Engineering
554 Old Spanish Trail
Slidell, LA 70458
985-649-5832

Amico 2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input

Description Item # SPM9818198625 Model # PRO3286783878

2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input - Flowmeter measuring the oil or water easy to read for its clear scale.Straight tube style connect the liquid tube by two end thread.Stainless steel material inner and glasses tube design.Read float at largest diameter you will kow the flow of water.
Amico - 2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input

- Flowmeter measuring the oil or water easy to read for its clear scale.
- Straight tube style connect the liquid tube by two end thread.
- Stainless steel material inner and glasses tube design.
- Read float at largest diameter you will kow the flow of water.

Material Safety Data Sheet

AQUACHLOR™ 10%, 12.5%
Sodium Hypochlorite Solution 10% & 12.5%

ALTIVIA

Revised 5.25.2004

ALTIVIA Corporation
1100 Louisiana, Suite 3160
Houston, Texas 77002-5217

Emergency(Chemtrec): (800) 424-9300
Product Information: (713) 658-9000

HAZARDOUS INGREDIENTS/IDENTIFY INFORMATION

Hazardous Components	OSHA PEL	ACGIH TLV	CAS#	Other limits
Sodium Hypochlorite	N/E	N/E	7681-52-9	None listed
Sodium Hydroxide	2 mg/m^3	2 mg/m^3	1310-73-2	None listed

PHYSICAL / CHEMICAL CHARACTERISTICS

Specific Gravity @ 70°F	1.13 - 1.25	NaOCl (wt %):	9.5 – 13.5
Boiling Point:	Decomposes above 40°C (104°F)	Vapor Pressure (mmHg):	N/A
Freezing Point:	< -10°F (-12°C)	Vapor Density (Air = 1):	N/A
Solubility in Water:	Complete	pH (As is):	11.5 - 13.5
Appearance/Color:	Clear, colorless to pale yellow		

FIRE AND EXPLOSION HAZARDS

Flash Point:	Non-Flammable	LEL:	N/A
Flammable Limits:	N/A	UEL:	N/A

Special Fire Fighting Procedure/Precaution: Use extinguishing media that is appropriate for the surrounding fire. Use water spray to cool fire exposed containers. Wear NIOSH/MSHA approved positive-pressure self-contained breathing apparatus and full protective clothing if involved in a fire.

Unusual Fire/Explosion Hazards: **May release toxic gases (hydrogen chloride and chlorine) upon decomposition.** Sodium hypochlorite is an oxidizing agent. Keep away from oxidizable materials in a fire situation. If possible to do so without risk, move containers from fire area to prevent over pressurization and rupture.

REACTIVITY DATA

Reactivity:	Reacts with acids, ammonia compounds, oxidizable materials, metals and reducing agents.
Stability:	Stable under proper storage conditions. May decompose upon heating and exposure to sunlight.
Incompatibility:	Acids, ammonia compounds, oxidizable materials, peroxides, metals (nickel, copper, tin, aluminum, and iron) and reducing agents.
Hazardous Decomposition/Byproducts:	**Combustion:** Hydrogen chloride and chlorine gas. **Thermal Decomposition:** Chlorine gas. Rate of decomposition increases with the concentration and with temperatures above 29°C (85°F).
Hazardous Polymerization:	Will not occur.
Condition to Avoid:	Avoid heat, flames, sparks and other sources of ignition. Avoid direct sunlight. Do not store above 29°C (85°F).

HEALTH HAZARDS & MEDICAL PROCEDURES

DANGER! CORROSIVE. MAY CAUSE SKIN AND EYE IRRITATION OR CHEMICAL BURNS TO BROKEN SKIN. CAUSES EYE DAMAGE. HARMFUL IF SWALLOWED.

ROUTES OF ENTRY

Inhalation:	Irritation of the respiratory system. Mist or fumes may cause bronchial irritation, coughing, difficult breathing, nausea and pulmonary edema.
Ingestion:	Oral or gastrointestinal irritation. Corrosion of mucous membranes, perforation of esophagus and stomach may follow.
Eyes:	Liquid or mist contact can produce severe eye irritation and burns. Prolonged exposures may cause eye damage and blindness.
Skin Contact:	Liquid contact can cause blistering and eczema. Prolonged exposure may cause dermatitis.

MEDICAL PROCEDURES

Inhalation:	Remove person from exposure to fresh air. If person is not breathing, call 911 or an ambulance, and then give artificial respiration (CPR). If individual is breathing, but with difficulty, GET IMMEDIATE MEDICAL ATTENTION.
Ingestion:	Drink large quantities of water. **Do not induce vomiting**. Do not give anything by mouth to an unconscious person. Avoid alcohol. GET IMMEDIATE MEDICAL ATTENTION. Do not use acidic antidotes or sodium bicarbonate.
Eyes:	Hold eye open and rinse slowly and gently for 15-20 minutes. Remove contact lenses, if present, after the first 5 minutes, then continue rinsing eye. GET IMMEDIATE MEDICAL ATTENTION.
Skin Contracts:	Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. Thoroughly clean and dry contaminated clothing and shoes before reuse. Discard footwear that cannot be decontaminated. GET IMMEDIATE MEDICAL ATTENTION.
Note to Physician:	The absence of visible signs or symptoms of burns does NOT reliably exclude the presence of actual tissue damage.

TOXICITY

The toxicity and corrosivity of sodium hypochlorite is a function of concentration and pH. This material is irritating and may be corrosive to all tissue.

Carcinogenicy: Sodium Hypochlorite is not listed as a carcinogen by NTP, IARC, ACGIH, or OSHA.

Toxicity: The acute oral LD50 (rat) is 12 g/kg.

CONTROL MEASURES

PERSONAL SAFETY EQUIPMENT

Ventilation: Use closed systems when possible. Provide local exhaust ventilation where vapor or mist may be generated. Ensure compliance with applicable exposure limits.

Respiratory: Cartridges must be NIOSH/MSHA approved against chlorine. In case of fire, use SCBA for rescue. A respiratory protection program that meets 29 CFR 1910.134 must be followed whenever workplace conditions warrant use of a respirator.

Hands-Body: Wear chemical resistant clothing, rubber gloves (natural rubber, neoprene, nitrile, or PVC), aprons, or slicker suit and rubber boots when potential for contact with the material exists. Contaminated clothing should be removed, then discarded or laundered.

Face-Eyes: Wear splash resistant safety goggles with a face shield. Provide an emergency eye wash fountain and quick drench shower in the immediate work area.

HANDLING AND STORAGE

Storage: Sodium Hypochlorite can be stored in approved rubber lined stainless steel tanks, fiberglass tanks (with a UV stabilizer package) or high density cross linked polyethylene (HDXLPE) tanks. As materials of construction vary, consult the tank manufacturer for compatibility with sodium hypochlorite before use. Store in a cool dry place away from heat sources and direct sunlight. Avoid heat, flames, sparks and other sources of ignition. Keep separated from incompatible substances. Do not reuse storage containers unless properly reconditioned.

Handling: Wear appropriate protective clothing. Avoid prolonged contact with eyes, skin and clothing. Avoid breathing vapors and mists. After handling, always wash hands thoroughly with soap and water. Use only with adequate ventilation.

Spill or Leak: Wear protective clothing and equipment. For large spills isolate hazard area and deny entry to unnecessary or unprotected personnel. Dike far ahead of liquid spill for later disposal. Prevent liquid from entering sewers or waterways. Sodium hypochlorite can be neutralized with weak reducing agents. Adequate ventilation is required when containing spills/leaks.

Disposal: Any disposal practice must be in compliance with local, state and federal laws and regulations. May be subject to disposal regulations: U.S. EPA 40 CFR 262. Hazardous waste Number: D002. This product is toxic to fish and aquatic organisms. Do not discharge effluent containing this product into lakes, streams, ponds, estuaries, oceans or other waters unless in accordance with the requirements of a National Pollutant Discharge Elimination System (NPDES) Permit and the permitting authority has been notified in writing prior to the discharge. Do not discharge effluent containing this product to sewer systems without previously notifying the sewage treatment plant authority. For guidance contact your State Water Board or Regional Office of the EPA.

CONTAINER DISPOSAL: Triple rinse container. Then offer for recycling or reconditioning, or puncture and dispose of it in a sanitary landfill, or incineration, or if allowed by state and local authorities by burning.

OTHER INFORMATION

TRANSPORTATION INFORMATION

DOT Shipping Name: Hypochlorite Solution, Corrosive

Class: 8	UN#: 1791	Packing Group: PG III	RQ: 100 lbs. (Sodium Hypochlorite)

REGULATORY INFORMATION

TSCA (TOXIC SUBSTANCE CONTROL ACT):
All components of this mixture are listed on the TSCA Chemical Inventory.

SARA TITLE III, SECTION 302:
Not listed as an Extremely Hazardous Substance.

CERCLA (COMPREHENSIVE RESPONSE COMPENSATION, AND LIABILITY ACT):
Subject to reporting requirements under CERCLA (40 CFR 302).

CERCLA REPORTABLE QUANTITY:
Releases of Sodium Hypochlorite in quantities equal to or greater than the reportable quantity (RQ) of 100 pounds are subject to reporting to the National Response Center under CERCLA, Section 304 SARA Title III.

SARA TITLE III - HAZARD CLASSES:
Acute Health Hazard: Yes
Chronic Health Hazard: No
Fire Hazard: Yes (May release toxic gases on decomposition)
Sudden Release of Pressure Hazard: No
Reactivity Hazard: No

SARA TITLE III - SECTION 313 SUPPLIER NOTIFICATION:
This product contains the following toxic chemicals subject to the reporting requirements of Section 313 of the Emergency Planning and Community Right-To Know Act (EPCRA) of 1986 and of 40 CFR 372:

CAS NUMBER	INGREDIENT NAME	PERCENT BY VOLUME
No	No	No

This information must be included on all MSDS's that are copied and distributed for this material.

OTHER INFORMATION
HAZARD CODES

NFPA		HMIS	
Health:	3	Health:	3
Flammability:	0	Flammability:	0
Reactivity:	1	Reactivity:	1
OXIDIZER			

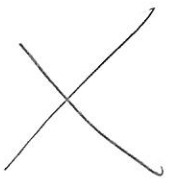
Rating System
0= No Hazard
1= Slight Hazard
2= Moderate Hazard
3= Serious Hazard
4= Severe Hazard

Disclaimer of Warranty:
The information provided in this Material Safety Data Sheet has been obtained from sources believed to be reliable. ALTIVIA provides no warranties, either expressed or implied and assumes no responsibility for the accuracy or completeness of the data contained herein. This information is offered for your information, consideration, and investigation. You should satisfy yourself that you have all current data relevant to your particular use. ALTIVIA knows of no medical condition, other than those noted on this material safety data sheet, which are generally recognized as being aggravated by exposure to this product.

Chlorine Contact Time

2employee @ 20 gpd

120 90



Tank Volume: 42 gallons..... 30 gallons useful liquid storage

40 seats * 25 gallons per seat = 1000 gallons/day SC Lounge

2employees * 20 gal/employee 40 Tire place

12 hour open time for lounge == 1.38 gallons usage per minute

1.5

1.38 gallons/minute * 30 minutes = 41.66 gallons of storage for 30 minute contact time (required)

45

A second storage tank shall be installed to increase contact time to exceed the 30 minutes requires.

Tank Volume: 2 X 42 gallons = 84 gallons..... 60 gallons useful liquid storage

This will exceed the 30 minute contact time required. (43 minutes contact time)

Permit Application

(Complete All Applicable Pages)

Project:	**Southern Comfort Lounge Water Suppl**		
Project Type:	**WATER SYSTEM**		
Estimated Project Cost:	**$5000.00**		
Engineer:	**Brian A. Mistich**		
Telephone:	**985-285-4564**		
Parish:	**St. Tammany**	Nearest Town:	**Slidell**
Population Served:	**40**		
New System? ☐		Existing System? ☒	
Project to be Owned and Operated By: (include name and address)	**Mr. Raymond B. Williams** **64491 Hwy 434** **Lacombe, LA 70445**		
Proposed Project Will Connect to: (name of water and/or sewer system)	**Stand Alone**		

WATER WELL

1 of 2

Project:	**Southern Comfort Lounge Water Supply**			
Engineer:	**Brian A Mistich**			
Date:	**8/24/2015**			Site Fenced? ☒Yes ☐No
General Scope of Project:	**Water Supply for a Lounge**			
Site Location: (also complete the last section of this table)	**2209 Gause Blvd East, Slidell, La**			50' Radius of Ownership? ☒Yes ☐No
Maximum # of Lots (or population):	**40**			
INTERNAL STRUCTURE (sketch on separate sheet)	Outer Casing	Linear Feet:	**340**	
		Thickness:	**.154**	
		Pounds/Foot:	**72**	
		Joint:	**unk**	
		Type of Seal to Outer Casing:	**n/a**	
	Inner Casing	Linear Feet:	**n/a**	
		Thickness:	**n/a**	
		Pounds/Foot:	**n/a**	
		Joint:	**n/a**	
	Grouting	Depth of grout:	**50**	
		Thickness:	**1 - 1/2"**	
		Method With a Setting Time of?	**unk**	
	Screen	Linear Feet:	**10**	
		Type:	**slotted pvc**	
EXTERNAL STRUCTURE (sketch on separate sheet)	Casing Head Seal? ☐Yes ☒No		Slab & Motor Foundation? ☒Yes ☐No	
	Well Vent	Diameter: (½"inch minimum) **n/a** inches		
		Down-Turned? ☐Yes ☐No		
		Terminates 24" above 10-year Flood Level or floor whichever is greater? ☐Yes ☐No		
		Twenty Four Mesh Screen? ☐Yes ☐No		
		Watertight Seal at Casing? ☐Yes ☐No		
	Drawdown Gauge:	Type (seal): **n/a**		
	Pump	Type: **centrifugal**	Power: **120 v**	
		Capacity (GPM): **10**	@ **+/- 20**	TDH (FT)
	Prime Mover:	**electric**		

WATER WELL

2 of 2

DISCHARGE PIPING	Discharge Piping Material: **pvc**	
	Down-Turned Smooth-Nozzle Sample Tap?	☒Yes ☐No
	Check Valve?	☒Yes ☐No
	Shutoff Valve?	☒Yes ☐No
	Discharge Bypass?	☐Yes ☒No
	Pressure Gauge?	☒Yes ☐No
	Means of Measuring Flow?	☒Yes ☐No
COMPLETION SPECIFICATIONS	Disinfection Method: (include chlorine dosage and retention time)	**NSF Sodium Hypochlorite Solution , 43 minutes contact time**
	Drinking Water Analysis for New Water Sources	Chemical testing to be performed prior to being placed into service? ☐Yes ☒No
		Bacteriological testing to be performed prior to being placed into service? ☒Yes ☐No
	Abandoned Holes? ☐Yes ☒No	
NAME OF CERTIFIED OPERATOR:	**Kerry Craig, #44512**	
LOCATIONAL INFORMATION	Coordinates: Latitude **30°17' 15. 6"N** Longitude **89°43' 51. 2"W** OR Latitude . °N Longitude . °W	
	Geographic Datum: NAD83 ☐ WGS84 ☐ NAD27 ☐	
	Collection Method: GPS ☐ — DGPS/WAAS enabled? Yes ☐ No ☐ — Horizontal Accuracy? _____ meters Map ☐ Specify: _____ Scale: _____	

WATER SUPPLY FINISHED WATER STORAGE

1 of 2

Project:	**Southern Comfort Lounge Water Supply**		
Engineer:	**Brian A. Mistich**	Site Fenced? ☒Yes ☐No	
Date:	**8/24/2015**		
Site Location:	**2209 Gause Blvd East, Slidell, La**		

Type of Storage Facility:

☐Treatment Plant Storage (i.e. clearwell) ☒Hydropneumatic Pressure Tank
☐Elevated Storage Tank ☐Ground Storage Tank

SIZE	Diameter/Depth:	**16"**
	Height and/or Length:	**53.5"**
	Elevation:	**2' above ground level**
	Shape:	**cylindrical**
	Capacity (gal):	**42**
	Material (type):	**steel**
	Wall Thickness:	**unk**
	Cover Thickness:	**n/a**
	Floor Thickness:	**n/a**
Base Construction:	**steel**	
Corrosion Control:	**paint**	

COATING	Interior: **epoxy** NSF Approved Yes ☒ No ☐	Cathodic Protection? ☐Yes ☒No
MANHOLE	Size: **n/a**	
	Overlap 2"? ☐Yes ☐No	Water Tight? ☐Yes ☐No
	Accessible? ☐Yes ☐No	Secure? ☐Yes ☐No

OVERFLOW PIPING (n/a for pressure tanks)	Turned Down 12"-24" Above Grade? ☐Yes ☐No Screened? If Flapper, Screened Inside? ☐Yes ☐No Splash Pad or Inlet Drainage Structure? ☐Yes ☐No Diameter **n/a** inches	
VENTS (n/a for pressure tanks)	Turned Down 24" Above Roof or Sod? ☐Yes ☐No Twenty Four Mesh Non-Corrodible Screen? ☐Yes ☐No Diameter **n/a** inches	
GENERAL	Bypass to Bring Out of Service? ☒Yes ☐No Pressure Gauge? ☒Yes ☐No Water Level Control Equipment? ☒Yes ☐No Water Level Indicating Device? ☐Yes ☒No Steel Structures Meet AWWA Standard? ☒Yes ☐No Down-Turned Smooth-Nozzle Sample Tap? ☒Yes ☐No	

WATER SUPPLY FINISHED WATER STORAGE

2 of 2

PRESSURE TANKS	Water Sight Glass? Automatic or Manual Air Blow Off? Pressure Switch For Pumps? Means for Adding Air? If Air Compressor, Give Capacity: ____CFM @____PSI	☐Yes ☒No ☐Yes ☒No ☒Yes ☐No ☒Yes ☐No
TREATMENT PLANT STORAGE (clearwells only)	Minimum Two Clearwell Compartments Provided?	☐Yes ☐No
Disinfection Method: (include chlorine dosage and retention time, including calculations)	**NSF Sodium Hypochlorite Solution , 43 minutes contact time -- 40 persons, 25 gpp, 12 hour operating time**	Testing ☒Yes ☐No
PIPING	Influent: **1"** (diameter-inches)	**pvc** (type of pipe)
	Effluent: **1"** (diameter-inches)	**pvc** (type of pipe)
LOCATIONAL INFORMATION	Coordinates: Latitude **30°17' 16. 0"N** Longitude **89°43' 53. 5"W** OR Latitude . °N Longitude . °W	
	Geographic Datum: NAD83 ☐ WGS84 ☐ NAD27 ☐	
	Collection Method: GPS ☐ — DGPS/WAAS enabled? Yes ☐ No ☐ — Horizontal Accuracy? ____ meters Map ☐ Specify: ____ Scale: ____	

WATER DISTRIBUTION SYSTEM

Project:	**Southern Comfort Lounge Water Supply**		
Engineer:	**Brian A. Mistich**		
Date:	**8/24/2015**		
General Scope of Project:	**SDR 26 PVC**		
PIPES	Material: (specify ASTM standard, dimension ratio-DR, AWWA Standard, and pressure class)		NSF 61 & NSF 372 Listed? ☒Yes ☐No
	Size: (Min 3" water main. Min 6" water main for fire protection. Water mains proposed with less than 3" diameter require justification with hydraulic analysis and future water use considerations provided and will only be allowed in special circumstances)	**2" Water well, 2" delivery line**	
JOINTS & MATERIALS:	**Glue Joints**		
	PVC		
LAYOUT	Valve Spacing:	**n/a**	
	Means of Flushing Dead Ends? ☒Yes ☐No		
	Number of Surface Water Crossings/Encounters?	**0**	
	Location with Respect to Sewers:	Maintain 18" Minimum Vertical Clearance @ Crossings? ☒Yes ☐No	
		Maintain 6' Minimum Horizontal Clearance? ☒Yes ☐No	
Normal Operating Pressure:	**38 psi**		
Minimum System Pressure:	**25 psi**		
DISINFECTION METHOD (include chlorine dosage and Retention time):	**NSF Sodium Hypochlorite Solution , 43 minutes contact time**		
Owned and Operated By: (include name and address)	**Mr. Raymond B. Williams** **64491 Hwy 434** **Lacombe, LA 70445**		
NAME OF CERTIFIED OPERATOR:	**Kerry Craig, #44512**		
ADDITIONAL COMMENTS:	**This is an existing system that has served the lounge for over 20 years**		

DISINFECTION

Project:	**Southern Comfort Lounge**
Engineer:	**Brian A. Mistich**
Date:	**8/24/2015**
General Scope of Project:	**Water Supply for a Lounge**
Site Location:	**2209 Gause Blvd East, Slidell, La**
TYPE OF DISINFECTION:	Chlorine: ☐ Gas ☒ Solution Ammonia: ☐ Anhydrous (gas) ☐ Ammonium Sulfate (solution) ☐ Ammonium Hydroxide (Aqua Ammonia) ☐ Other (please explain):
FEEDERS/PUMPS:	# of Feeders/Pumps (2 minimum): **1 active, 1 stanby** Type: **positive displacement**
GENERAL:	Standby Equipment? ☒Yes ☐No Stored in Areas Not in Direct Sunlight? ☒Yes ☐No Vented to Outside? ☒Yes ☐No Enough Space for 30 Days Storage? ☒Yes ☐No
STORAGE OF CHLORINE GAS:	Chlorine Storage & Feed System Building Separated? ☐Yes ☐No Doors Open Outward? ☐Yes ☐No Shatter-Resistant Inspection Windows? ☐Yes ☐No Fan/Light Switches Located Outside? ☐Yes ☐No Air Inlet Near Ceiling? ☐Yes ☐No Vent Fan Near Floor? ☐Yes ☐No Cylinders Restrained in Position? ☐Yes ☐No Weighing Scales? ☐Yes ☐No
STORAGE OF AMMONIA GAS or AQUA AMMONIA:	Ammonia Storage & Feed System Building Separated? ☐Yes ☐No Fan/Light Switches Located Outside? ☐Yes ☐No Forced ventilation? ☐Yes ☐No Shatter-Resistant Inspection Windows? ☐Yes ☐No Leak Detection Systems in all Areas Through Which Ammonia is Piped? ☐Yes ☐No

To: DNR

From: Richard Chabreck

Reference: Unregistered water well (Southern Comfort Lounge)

Owner: Mr. and Mrs. Raymond B. Williams, Slidell, LA

The well for the Southern Comfort Lounge in Slidell, LA at 2209 Gause Blvd. E. was apparently never registered with the DOTD. The establishment requires the well registration because it has new owners.

The well was drilled by Merlin Anthon (deceased). Mr. Anthon was respected in the water well business, and I knew him well. I can attest that he followed the rules and standards of constructing a non-community public supply well. The well would be grouted 50' below the ground surface.

The driller's log information is taken from a nearby well. Please accept this registration on behalf of the owners.

Sincerely,

Richard Chabreck

ST. TAMMANY PARISH
DEPARTMENT OF ENVIRONMENTAL SERVICES
SEWERAGE INSPECTION PERMIT

SIP #: 12-0042

Expiration Date: 8/17/2012

Address: 2213 East Gause

City State Zip: Slidell LA 70433-

Meter #:

At the time of our limited inspection, the sewerage system at the above reference location appears not to pose an apparent public health or environmental problem. Therefore, an electrical connection is hereby authorized.

Please be advised that the issuance of this permit in no way relieves the homeowner of responsibility for the proper operation and maintenance of the referenced sewerage system. Also be advised that St. Tammany Parish, Department of Environmental Services does hereby reserve the right to require maintenance and/or repairs to the existing system, or if deemed necessary, the installation of a new sewerage treatment system.

Signature: _____

Latitude: + 30° 17' 16" North
Longitude: - 89° 43' 51" West

OUTFALL INFORMATION

Outfall 001:

Discharge Description:	treated sanitary wastewater totaling less than 2,500 gallons per day (GPD) maximum quantity
Parish:	St. Tammany Parish
Outfall Flow:	60 GPD
Outfall Location:	at the point of discharge from the sewage treatment plant
Discharge Route:	unnamed drainage ditch, thence into French Branch, thence into Doubloon Bayou
LDEQ Subsegment Number:	090202
Effluent Limits Basis:	Water Quality Regulations, LAC 33:IX.2515 and 2701 and the St. Tammany Parish Areawide Policy and all associated TMDLs.
Wastewater Treatment:	500 GPD sewage treatment plant

V RECEIVING WATERS

Basin: Pearl River Basin
Subsegment number: 090202

The Designated Uses of this subsegment are as follows:

Primary Contact Recreation
Secondary Contact Recreation
Propagation of Fish and Wildlife
Outstanding Natural Resource Waters

303(d) Status:

Section 303 (d) of the Clean Water Act, as amended by the Water Quality Act of 1987 and EPA's regulations at 40 CFR 130, require that each state identify those waters within its boundaries that are impaired and as a result do not meet water quality standards. The Clean Water Act further requires states to implement plans to address impairments. LDEQ is developing Total Maximum Daily Loadings Studies (TMDLs) to address impaired waterbodies.

Subsegment 090202, West Pearl River-from confluence with Holmes Bayou to the Rigolets, is not listed on LDEQ's Final 2010 303(d) list as impaired. However, subsegment 090202 was previously listed as impaired for mercury and turbidity, for which the below TMDLs have been developed. The Department of Environmental Quality reserves the right to impose more stringent discharge limitations and/or additional restrictions in the future to maintain the water quality integrity and the designated uses of the receiving water bodies based upon additional TMDLs and/or water quality studies. The DEQ also reserves the right to modify or revoke and reissue

BOBBY JINDAL
GOVERNOR

PEGGY M. HATCH
SECRETARY

State of Louisiana

DEPARTMENT OF ENVIRONMENTAL QUALITY
ENVIRONMENTAL SERVICES

FEB 02 2012

CERTIFIED MAIL 7004 2510 0006 3849 4326
RETURN RECEIPT REQUESTED

AI No: 179544
Activity No: GEN20110001

Ms. Marcia Williams
64491 Hwy 434
Lacombe, LA 70445

RE: Louisiana Pollutant Discharge Elimination System (LPDES) General Sanitary Class I Permit LAG533956

Dear Ms. Williams:

The Office of Environmental Services (Office) has received and reviewed your application for a water discharge permit for your office located at 2213 Gause Blvd East in Slidell, St. Tammany Parish. This facility has been determined eligible for coverage under our general permitting system. Therefore, pursuant to the Louisiana Environmental Quality Act (LA R.S. 30:2001, et seq.), the attached Louisiana Pollutant Discharge Elimination System general permit number LAG533956, has been issued and is effective on the date of this letter authorizing

Ray Williams
Williams Rental Property Lots 13 & 14
2213 Gause Blvd East
Slidell, LA 70461

Telephone Number: (985) 882-2280

to discharge treated sanitary wastewater from your facility into an unnamed drainage ditch, thence into French Branch, thence into Doubloon Bayou in subsegment 090202 of the Pearl River Basin. If at anytime changes occur at this facility resulting in an increased discharge volume, you are required to notify the Department immediately.

To ensure that all correspondence regarding this facility is properly filed into the Department's Electronic Document Management System, you must reference your Agency Interest number AI 179544 and LPDES general permit authorization number LAG533956 on all future correspondence to this Department.

Your facility will be assessed an Annual Maintenance and Surveillance Fee to be invoiced separately by the agency. Annual fee amounts are subject to adjustment at a later date by promulgation of changes in the Louisiana Administrative Code. Pursuant to LAC 33:IX.1309.I, LAC 33:IX.6509.A.1 and LAC 33:I.1701, you must pay any outstanding fees to the Department. Therefore, you are encouraged to verify your facility's fee status by contacting LDEQ's Office of Management and Finance, Financial Services Division at (225) 219-3863 or on the LDEQ website at www.deq.louisiana.gov/fiscalreports. Any outstanding fees must be remitted via a check to the Louisiana Department of Environmental Quality within thirty (30) days after the effective date of your permit. Failure to pay the full amount due in the manner and time prescribed could result in applicable enforcement actions as prescribed in the Environmental Quality Act, including, but not limited to revocation or suspension of the applicable permit, and/or a civil penalty against you.

DEQ reserves the right to impose more stringent discharge limitations and/or additional restrictions in the future. Additional nitations and/or restrictions are based upon water quality studies and can indicate the need for advanced wastewater eatment. Water quality studies of similar dischargers and receiving water bodies have resulted in monthly average effluent nitations of 5mg/L $CBOD_5$ and 2 mg/L NH_3-N. Prior to upgrading or expanding this facility, the permittee should contact DEQ to determine the status of the work being done to establish future effluent limitations and additional permit conditions.

copy of the permit can be accessed and printed from LDEQ's Internet website at tp://www.deq.louisiana.gov/portal/ using the following path: **DIVISIONS – Water Permits – LPDES Permits – PDES General Permits – LAG530000 or by entering the Document ID 6021014 in LDEQ's Electronic Document lanagement System (EDMS) search window found at http://edms.deq.louisiana.gov/app/doc/querydef.aspx. In the vent you are unable to access and/or print a copy of this permit for your records from one of the above listed sources, lease contact the Water Permits Division at (225) 219-9371 to request a hard copy be sent by mail. In compliance with AC 33:IX.2701.H, the permittee may be required to provide their own copy of the permit. Please read the entire ermit very carefully to ensure that you thoroughly understand the conditions of the permit.**

he permittee shall follow the final effluent limitations and monitoring requirements in **Part I, Section B, Schedule A, Page 3 f 16**. The remainder of the schedules listed in Part I shall not apply to this facility. Please see Appendix A for more nformation.

Monitoring results shall be reported to the Enforcement Division on a Discharge Monitoring Report (DMR) form per the chedule specified. A copy of the form is attached for your use. Pursuant to Part II, Section N of the general permit, one set of riginal DMRs and one set of copies are to be sent to the Enforcement Division, Office of Environmental Compliance, ouisiana Department of Environmental Quality, P.O. Box 4312, Baton Rouge, Louisiana 70821-4312.

or all sanitary treatment plants, the plans and specifications must be approved by the Department of Health and Hospitals, Office of Public Health, P.O. Box 4489, Baton Rouge, Louisiana 70821-4489, (225) 342-7395.

Please be advised that according to LA R.S. 48:385, any direct discharge to a state highway ditch, cross ditch, or right-of-way hall require approval from the Louisiana Department of Transportation and Development, P.O. Box 94245, Baton Rouge, ouisiana 70804, (225) 379-1927, and from the Department of Health and Hospitals, Office of Public Health, P.O. Box 4489, Baton Rouge, Louisiana 70821-4489, (225) 342-7395.

f you have any questions about the issuance of a general permit for this facility, please contact Ms. Rachel Davis at the address on the first page of this letter or telephone (225) 219-3515.

Sincerely,

Tom Killeen, Environmental Scientist Manager
Municipal and General Water Permits Section

rod
Attachments (DMR, Appendix A, and Statement of Basis)

c: IO-W
ec: Permit Compliance Unit
Office of Environmental Compliance

Southeast Regional Office
Office of Environmental Compliance

Ms. Ashley Broom
Office of Management and Finance

Public Health Chief Engineer
Department of Health and Hospitals
Office of Public Health

Rachel Davis
Todd Franklin
Water Permits Division

Contract

This Contract is made on March 23,2015 , 20 15 ,
between William Remmenga dba: Bill's Southern Comfort Lounge ,
address: 2209 Gause Blvd. East
Slidell, LA 70461

and Kerry Craig ,
address: 73 Concord Loop
Pearl River, LA 70452

For valuable consideration, the parties agree as follows:

I, Kerry Craig, will check and maintain the Chlorine and PH levels of the chemical pump and holding tank once a month adding chemicals as necessary.

Professional Certified Operator
ID: 44512
Certifications: WP1, WT1, WD1

No modification of this Contract will be effective unless it is in writing and is signed by both parties. This Contract binds and benefits both parties and any successors. Time is of the essence of this contract. This document, including any attachments, is the entire agreement between the parties. This Contract is governed by the laws of the State of Louisiana .

The parties have signed this Contract on the date specified at the beginning of this Contract.

Signature

Signature

William Remmenga dba: Bill's Sc
Printed Name

Kerry Craig
Printed Name

LOUISIANA

Operator Certification Program

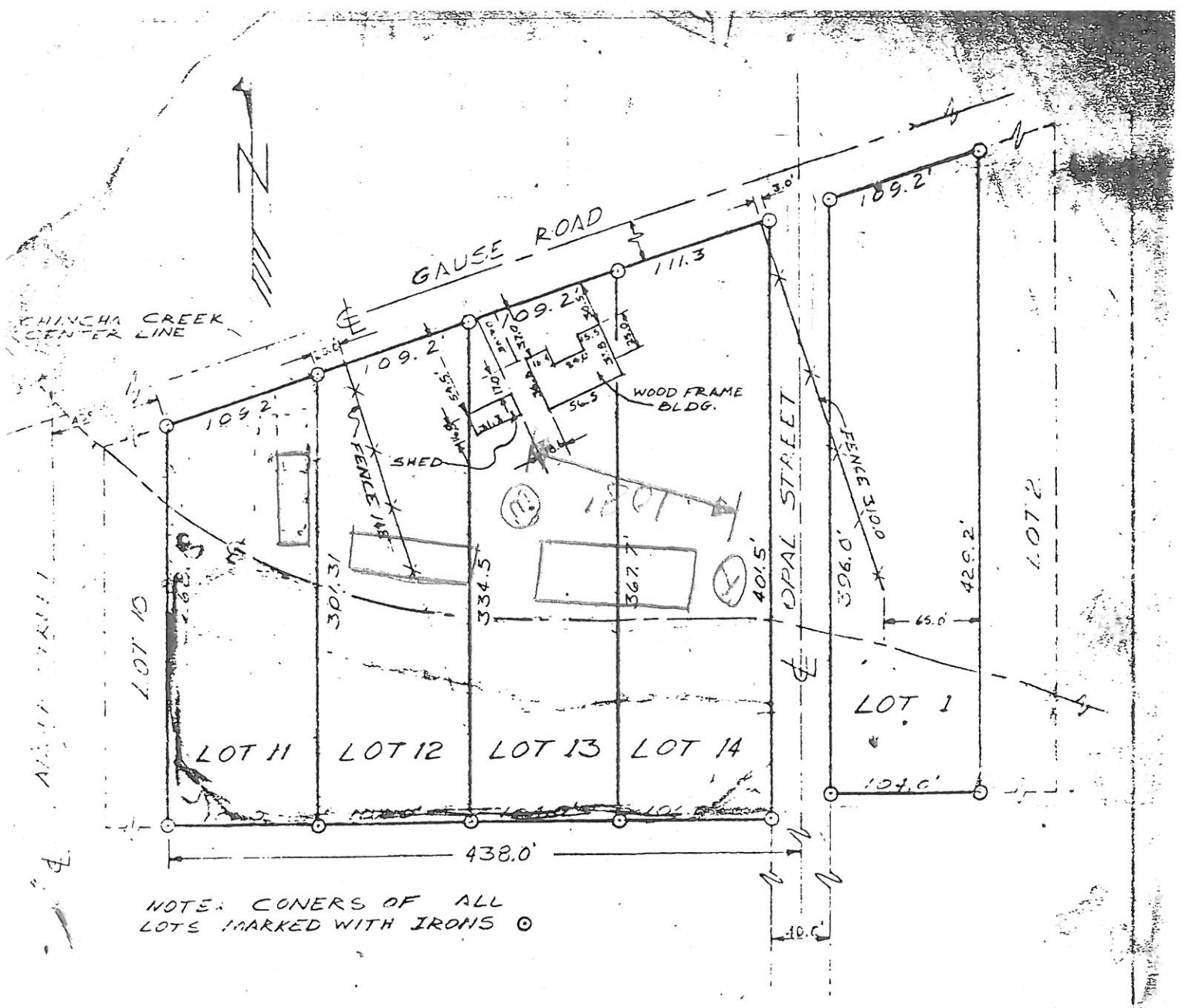
Department of HEALTH and HOSPITALS

CRAIG, KERRY J

ID: 44512 Expires: 12/31/2015

PROFESSIONAL CERTIFIED OPERATOR

Certifications: WP1, WT1, WD1



SURVEY MAP

OF

LOTS NOS. 11, 12, 13, AND 14 OF SQUARE NO. 26 AND LOT NO. 1 OF SQUARE NO 27 OF PEARL RIVER SUBDIVISON, ST. TAMMANY PARISH, LOUISIANA

FOR

RAYMOND WILLIAMS

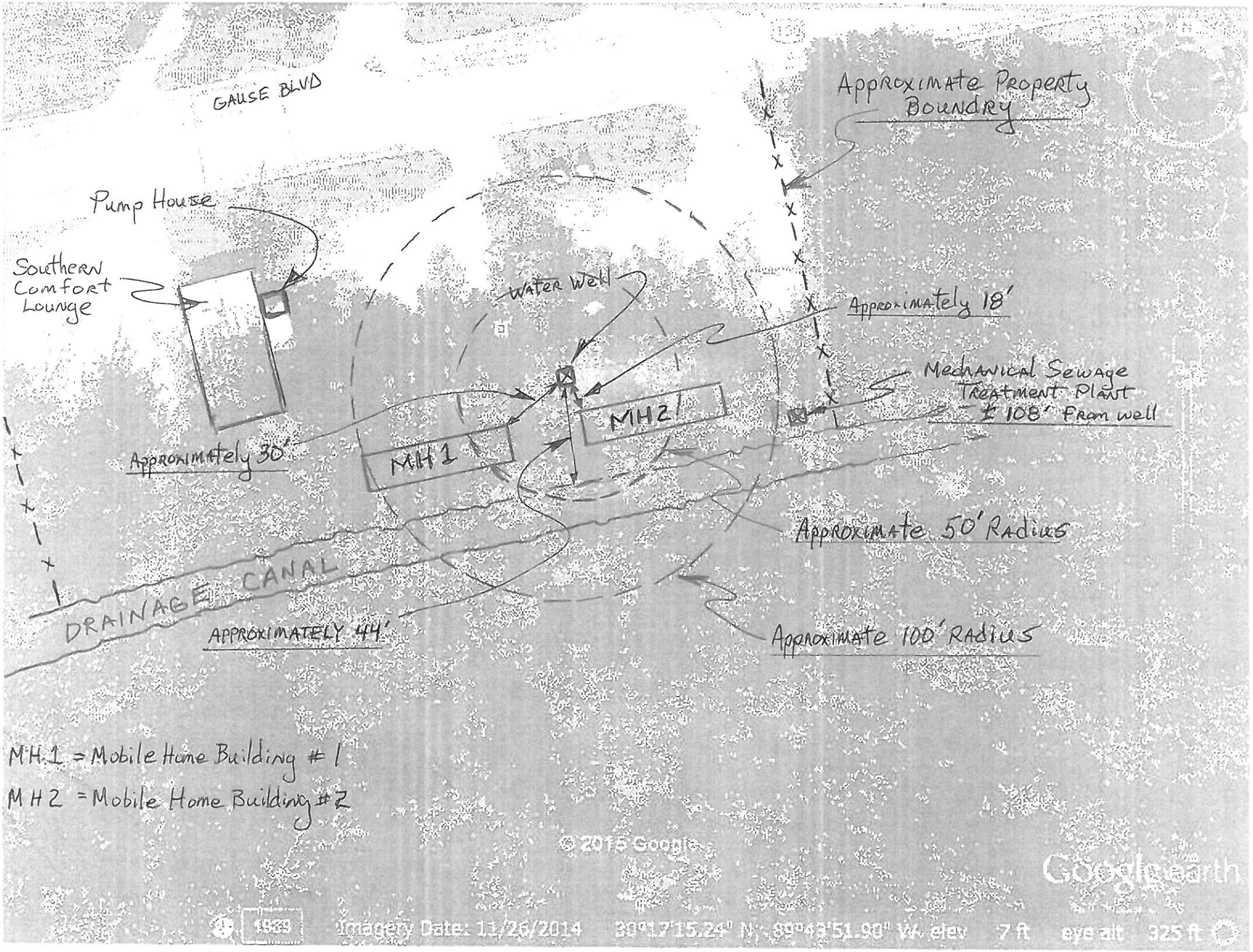
IVAN M. BORGEN
REG. No. 686
REGISTERED
SURVEYOR

THIS SURVEY IS CERTIFIED TRUE AND CORRECT BY

IVAN M. BORGEN
NO. 686

DATE: APRIL 24, 1972
REV:
SCALE 1" = 100'-0"

SURVEY NO. 300


GAUSE BLVD
Approximate Property Boundry
Pump House
Southern Comfort Lounge
Water Well
Approximately 18'
Mechanical Sewage Treatment Plant
± 108' From well
MH2
MH1
Approximately 30'
Approximate 50' Radius
DRAINAGE CANAL
APPROXIMATELY 44'
Approximate 100' Radius
MH1 = Mobile Home Building #1
MH2 = Mobile Home Building #2
© 2015 Google
Google earth
1989
Imagery Date: 11/26/2014 30°17'15.24" N 89°43'51.90" W elev 7 ft eye alt 325 ft

FP7230-08

NSF/ANSI 61
Drinking Water

Model FP7230

Air-Over-Water Pressure Tank (Tall, Vertical) - 42 Gallons

Epoxy-lined standard water tanks are excellent corrosion resistant tanks for home water systems applications such as retention tank, holding tank and pressure tank.

KEY FEATURES

- Replaces any standard galvanized, glass-lined or epoxy-lined tank
- Precision press fit design minimizes gaps between components, reducing the possibility of corrosion and seam leaks
- Tough polyester exterior paint
- Air volume control tap standard on all sizes

WARRANTY

1 year limited warranty

SPECIFICATIONS RESOURCES

BODY CONSTRUCTION: Heavy Gauge Steel
BODY FINISH: Electrostatically Applied Baked On Polyester
STYLE: Vertical Upright
TANK CAPACITY: 42 gal
TANK DIAMETER: 16"
TANK HEIGHT: 53-1/2"
PIPE TAP SIZE: 1-1/4" NPT

Performance

1

Interactive Guide

VIRTUAL HOUSE

Use our interactive water solutions guide to find products for all your home waterflow needs. Take the tour to see how our products work throughout your home.

LAUNCH

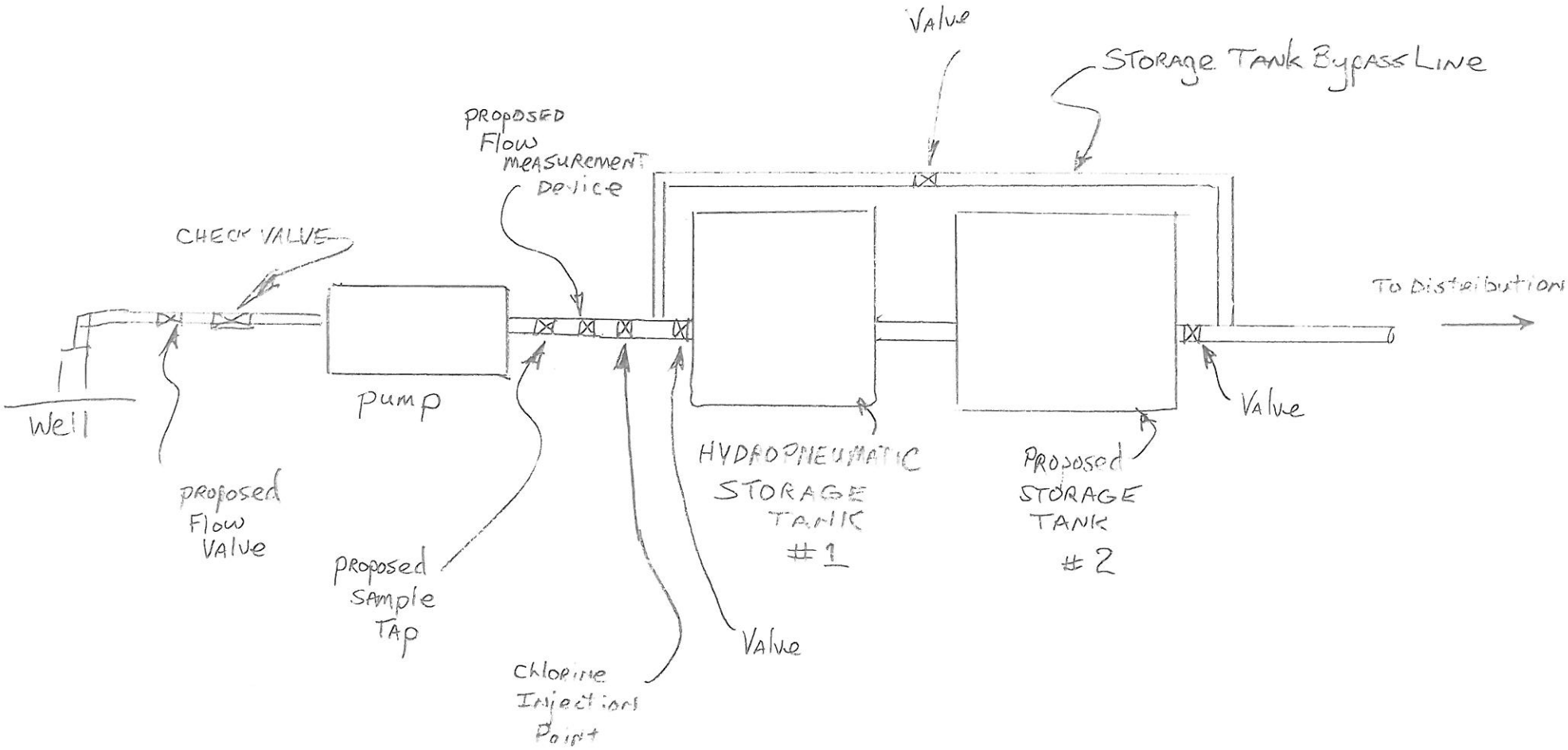
Winterizing Your Pump

Learn helpful tips to keep your pump performing properly throughout the winter months.

GET TIPS

Contact Us

SYSTEM DIAGRAM



Sponsored by the ATC Endowment Fund • Applied Technology Council • 201 Redwood Shores Parkway, Suite 240 • Redwood City, California 94065 • (650) 595-1542

Chlorine Contact Time

Tank Volume: 120 gallons		90 gallons useful liquid storage	
Southern Comfort Lounge :		40 seats * 25 gallons per seat =	1000 gallons/day
Tatoo Parlor	:	2 Employees * 20 gal/day/emp =	40 gallons/day
Used Tire Store	:	2 Employees * 20 gal/day/emp =	40 gallons/day
Total	:		1080 gallons/day
12 hour operation	=	1.5 gallons usage per minute	

1.5 gal/minute * 30 minutes = 45 gallons of storage for 30 minute contact time (required)

90 Gallons of storage will exceed the 30 minute contact time required.

Bob 30" = ,625 —o—
36" .375 —o—

As a group

All three businesses together ~~have the potential~~ Require of requiring registration on the drinking water inventory. The proposal in this submittal is to modernize the water system for the 3 customers. This shall be done by:

1) Removing the water pump, controls, disinfection facility, and storage tank from the Southern Comfort Pump House.
2) Removing the demand pumps, controls, and storage facilities from the Used Tire Store and Tatoo Parlor.
3) Constructing a well house at the well head site.
4) Installing a water pump, disinfection facility, a 120 Gallon hydropneumatic storage tank (to meet the 30 minute contact time requirement) controls and associated water system appurtenances at the well site.
5) Replacing all 4" sewer piping within a 50' radius of the well with schedule 40 PVC in accord with LSSC XII 327 – A - 2 – Footnote 1 .
6) Install backflow ~~A~~preventors at each business

In essence, the water system shall be centralized at the well head and the distribution shall supply water to the three businesses. Each business shall be outfitted with approved sampling taps.

The attached submittal contains:

FP 7250

1) A complete application package is submitted for your review.
2) A diagram indicating the current layout including possible sources of contamination.
3) A diagram indicating the proposed recinfigueration and modernization plan
4) A product sheet for the Flowtec Model ~~FP7230~~ Hydropneumatic Tank is provided. The specifications sheet does not specifically designate ASME code requirement construction; however, this type of tank is designed for potable water systems and used in many systems.
5) Bypass piping for the Hydropneumatic Tank shall be installed. (see system diagram)
6) As this is an extremely small water supply, the Hydropneumatic Tank will not have automatic controls to maintain water-to-air ratio. The air shall be manually injected using an access valve to be installed on the air tank.
7) See attached calculation sheet for chlorine contact time.
8) The MSDA sheets for AquaChlor 12.5% are provided in the submittal.
9) Sodium Hypochlorite shall be stored in the pump house.
10) Secondary containment for the chlorine supply tank shall be provided.
11) The certified operator shall take the chlorine residuals.
12) The water system shall be disinfected in accord with LAC 51, Part XII, 351 and tested in accord with LAC 51, Part XII, 353.

The Chlorine injection point shall be after the check valve but before the storage tank. Respectfully,

Brian A. Mistich, P.E.

Dammon Engineering

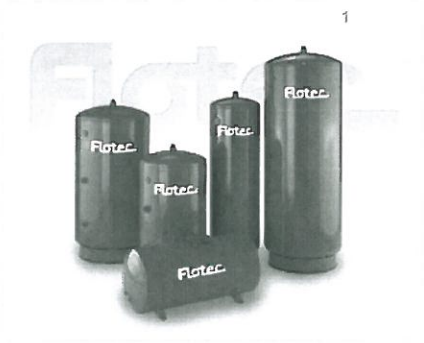
554 Old Spanish Trail

Slidell, LA 70458

985-649-5832

FP7230-08

Bob Pierson 601 209 4677
Monica 504 461 3795



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NSF/ANSI 61
Drinking Water

Model FP7230

Air-Over-Water Pressure Tank (Tall, Vertical) - 42 Gallons

Epoxy-lined standard water tanks are excellent corrosion resistant tanks for home water systems applications such as retention tank, holding tank and pressure tank.

KEY FEATURES

- Replaces any standard galvanized, glass-lined or epoxy-lined tank
- Precision press fit design minimizes gaps between components, reducing the possibility of corrosion and seam leaks.
- Tough polyester exterior paint.
- Air volume control tap standard on all sizes

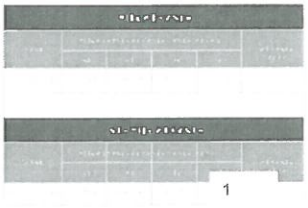
WARRANTY

1 year limited warranty

SPECIFICATIONS RESOURCES

BODY CONSTRUCTION: Heavy Gauge Steel
BODY FINISH: Electrostatically Applied Baked On Polyester
STYLE: Vertical Upright
TANK CAPACITY: 42 gal
TANK DIAMETER: 16"
TANK HEIGHT: 53-1/2"
PIPE TAP SIZE: 1-1/4" NPT

Performance



1

Interactive Guide

VIRTUAL HOUSE

Use our interactive water solutions guide to find products for all your home waterflow needs. Take the tour to see how our products work throughout your home.

LAUNCH

Winterizing Your Pump

Learn helpful tips to keep your pump performing properly throughout the winter months

GET TIPS

Contact Us

DAMMON
ENGINEERING, INC.
Architects & Engineers

554 Old Spanish Trail
Slidell, LA 70458
Phone: 985-649-5832
Fax: 985-641-5950
dammonengineering.com
dammoneng@bellsouth.net

July 15, 2015

Plans Reviewer
c/o DHH OPH Region IX
71128 Hwy 59, Suite 102-B
Abita Springs, Louisiana 70420

Re : Southern Comfort Lounge
2209 Gause Blvd. East
Slidell, LA 70461
St. Tammany Parish

Attention Reviewer:

Submitted for your approval and permitting is an existing transient non-community water supply. This water supply has been in operation for over 20 years. Attached for your review is:

1) DHH Design Summary Package
2) Contract with a registered Certified Operator
3) Clerk of Court Property Ownership Documents
4) Copy of Land Survey
5) Copy DEQ LPDES Permit LAG533956
6) Pump House Photo of Pump, Chlorinator, & Storage Tank

The Chlorine injection point shall be after the check valve but before the storage tank. Chlorine residuals shall be monitored using a Hach Free Chlorine Test Kit, Model CN 66F Test Kit. Flow meter shall be installed.

Respectfully,

Brian A. Mistich

Brian A. Mistich, P.E.
985-285-4564

STATE OF LOUISIANA
BRIAN A. MISTICH
License No. 30187
PROFESSIONAL ENGINEER

7/16/2015

WATER WELL

2 of 2

DISCHARGE PIPING	Discharge Piping Material: **pvc**	
	Down-Turned Smooth-Nozzle Sample Tap?	☒Yes ☐No
	Check Valve?	☒Yes ☐No
	Shutoff Valve?	☒Yes ☐No
	Discharge Bypass?	☐Yes ☒No
	Pressure Gauge?	☒Yes ☐No
	Means of Measuring Flow?	☒Yes ☐No
COMPLETION SPECIFICATIONS	Disinfection Method: (include chlorine dosage and retention time)	**NSF Sodium Hypochlorite Solution , 3 ppm, 48 minutes contact time**
	Testing to be Performed: **residual chlorine**	
	Abandoned Holes? ☐Yes ☒No	
NAME OF CERTIFIED OPERATOR: **Kerry Craig, #44512**		
LOCATIONAL INFORMATION	Coordinates: Latitude **30°17'16.0"N** Longitude **89°43'53.0"W** OR Latitude **00. 00000°N** Longitude **00. 00000°W**	
	Geographic Datum: NAD83 ☐ WGS84 ☐ NAD27 ☐	
	Collection Method: GPS ☐ — DGPS/WAAS enabled? Yes ☐ No ☐ — Horizontal Accuracy? _____ meters Map ☐ Specify: _____ Scale: _____	

WATER SUPPLY

WATER STORAGE

1 of 2

Project:	**Southern Comfort Lounge Water Supply**	
Engineer:	**Brian A. Mistich**	Site Fenced? ☒Yes ☐No
Date:	**7/15/2015**	
Site Location:	**2209 Gause Blvd East, Slidell, La**	

Type of Storage Facility:

☐Treatment Plant Storage (i.e. clearwell) ☒Hydropneumatic Pressure Tank
☐Elevated Storage Tank ☐Ground Storage Tank

SIZE	Diameter/Depth:	**18"**
	Height and/or Length:	**66"**
	Elevation:	**2' above ground level**
	Shape:	**cylindrical**
	Capacity (gal):	**70**
	Material (type):	**steel**
	Wall Thickness:	**unk**
	Cover Thickness:	**n/a**
	Floor Thickness:	**n/a**
Base Construction:	**steel**	
Corrosion Control:	**paint**	

COATING	Interior: **unk** NSF Approved Yes ☒ No ☐	Cathodic Protection? ☐Yes ☒No
MANHOLE	Size: **n/a**	
	Overlap 2"? ☐Yes ☐No Water Tight? ☐Yes ☐No Accessible? ☐Yes ☐No Secure? ☐Yes ☐No	

OVERFLOW PIPING (n/a for pressure tanks)	Turned Down 12"-24" Above Grade? ☐Yes ☐No Screened? If Flapper, Screened Inside? ☐Yes ☐No Splash Pad or Inlet Drainage Structure? ☐Yes ☐No Diameter **n/a** inches
VENTS (n/a for pressure tanks)	Turned Down 24" Above Roof or Sod? ☐Yes ☐No Twenty Four Mesh Non-Corrodible Screen? ☐Yes ☐No Diameter **n/a** inches
GENERAL	Bypass to Bring Out of Service? ☐Yes ☒No Pressure Gauge? ☒Yes ☐No Water Level Control Equipment? ☒Yes ☐No Water Level Indicating Device? ☐Yes ☒No Steel Structures Meet AWWA Standard? ☒Yes ☐No Down-Turned Smooth-Nozzle Sample Tap? ☒Yes ☐No

WATER SUPPLY FINISHED

WATER STORAGE

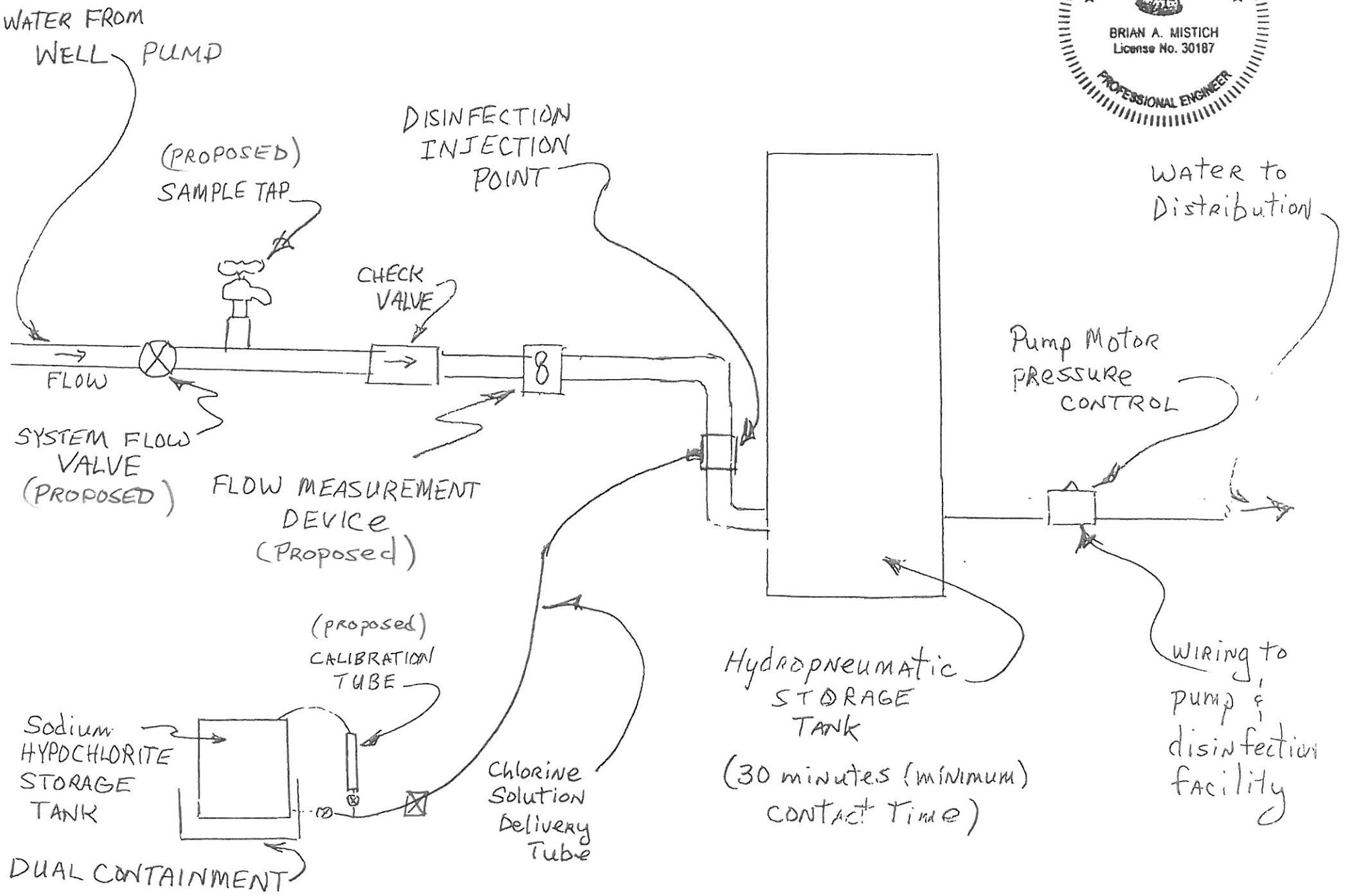
2 of 2

PRESSURE TANKS	Water Sight Glass? Automatic or Manual Air Blow Off? Pressure Switch For Pumps? Means for Adding Air? If Air Compressor, Give Capacity: ____CFM @____PSI	☐Yes ☒No ☐Yes ☒No ☒Yes ☐No ☒Yes ☐No	
TREATMENT PLANT STORAGE (clearwells only)	Minimum Two Clearwell Compartments Provided?	☐Yes ☐No	
Disinfection Method: (include chlorine dosage and retention time, including calculations)	**NSF Sodium Hypochlorite Solution , 3 ppm, 48 minutes contact time -- 30 persons, 25 gpp, 12 hour operating time**	Testing ☒Yes ☐No	
PIPING	Influent: **1"** (diameter-inches)	**pvc** (type of pipe)	
	Effluent: **1"** (diameter-inches)	**pvc** (type of pipe)	
LOCATIONAL INFORMATION	Coordinates: Latitude **30°17'16.0"N** Longitude **89°43'53.0"W** OR Latitude **00. 00000°N** Longitude **00. 00000°W**		
	Geographic Datum: NAD83 ☐ WGS84 ☐ NAD27 ☐		
	Collection Method: GPS ☐ — DGPS/WAAS enabled? Yes ☐ No ☐ — Horizontal Accuracy? ____ meters Map ☐ Specify: ____ Scale: ____		

WATER DISTRIBUTION SYSTEM

Project:	**Southern Comfort Lounge Water Supply**		
Engineer:	**Brian A. Mistich**		
Date:	**7/15/2015**		
General Scope of Project:	**Water Supply for a Lounge**		
PIPES	Material: (specify ASTM standard, dimension ratio-DR, AWWA Standard, and pressure class)	**SDR 26 PVC**	AWWA/NSF Approved? ☒Yes ☐No
	Size: (Min 3" water main. Min 6" water main for fire protection. Water mains proposed with less than 3" diameter require justification with hydraulic analysis and future water use considerations provided and will only be allowed in special circumstances)	**2" Water well, 2" delivery line**	
JOINTS & MATERIALS:	**Glue Joints**		
	PVC		
LAYOUT	Valve Spacing:	**n/a**	
	Means of Flushing Dead Ends?	☒Yes ☐No	
	Number of Surface Water Crossings/Encounters?	**0**	
	Location with Respect to Sewers:	Maintain 18" Minimum Vertical Clearance @ Crossings? ☒Yes ☐No	
		Maintain 6' Minimum Horizontal Clearance? ☒Yes ☐No	
Normal Operating Pressure:	**38 psi**		
Minimum System Pressure:	**25 psi**		
DISINFECTION METHOD (include chlorine dosage and Retention time):	**NSF Sodium Hypochlorite Solution , 3 ppm, 48 minutes contact time**		
Owned and Operated By: (include name and address)	**Mr. Raymond B. Williams 64491 Hwy 434 Lacombe, LA 70445**		
NAME OF CERTIFIED OPERATOR:	**Kerry Craig, #44512**		
ADDITIONAL COMMENTS:	**This is an existing system that has served the lounge for over 20 years**		

Small Water System Configuration



STATE OF LOUISIANA
BRIAN A. MISTICH
License No. 30187
PROFESSIONAL ENGINEER

Bobby Jindal
GOVERNOR

Kathy H. Kliebert
SECRETARY

State of Louisiana

Department of Health and Hospitals
Office of Public Health

August 20, 2015

Brian A. Mistich, P.E.
Dammon Engineering, Inc.
894 Robert Boulevard
Slidell, LA 70458

Re: Southern Comfort Lounge Water Supply
New Water System for Addition to Inventory
- Water Well
- Proposed Chlorine Disinfection System
- Hydropneumatic Tank
- Distribution System

Slidell, Louisiana
St. Tammany Parish
DES Number 15-021

Mr. Mistich:

Plans and specifications of the above named project have been reviewed. The plans are **DISAPPROVED** pending resolution of the following items which appear to be in conflict with applicable provisions of the Louisiana Administrative Code (LAC), or upon which further information is needed.

1. This water system is not a permitted system and has never been a water system in the State Drinking Water Inventory System (SDWIS). Prior to entry into SDWIS complete engineering plans for the well, treatment, and distribution systems will have to be provided with specifications and equipment submittals for review and permitting. The submitted drawing for this water system is incomplete and disagrees with the existing system as presented in the photo provided in the package. The drawing is stamped but not signed and dated as required. Please prepare a complete application project package for submittal and review. The additional comments below reflect issues with the current submittal that should be addressed in the new submittal.

2. The DHH/OPH Engineering Services Permit Application (ESPA) for water well did not include page 1. Please provide all applicable pages of the ESPA when responding to comment 1. above.

3. On the drawings please verify that no source of contamination such as septic tanks, storm or sanitary sewers, oxidation ponds, cesspools, subsurface absorption fields, pits, mechanical sewage treatment plants, landfills, drainage canals, ditches, or streams currently exist within the minimum distances given in LAC 51:XII.327.A.2. The drawings should include the 50' and 100' radius around the well head and identify all the sources found on the property from the list above. Please submit the completed drawing for review. Additional comments may arise.

Tank Info

4. Please specify if the hydropneumatic tank meets ASME code requirements per Recommended Standards for Water Works (RS), 2003 Edition Section 7.2. Please revise and resubmit plans accordingly.

5. Per Section 7.2.3 of RS, the hydropneumatic tank shall have bypass piping to permit operation of the system while the tank is being repaired or painted. Please revise and resubmit plans accordingly.

6. The ESPA Water Storage page 2/2 states that he hydropneumatic tank will have no sight glass. Please specify if an automated control to maintain the proper water-to-air ratio in the hydroneumatic tank is provided. Please revise and resubmit plans accordingly.

7. Please provide the calculation of chlorine contact time to ensure at least 30 minutes contact time prior to the first customer. Show all reduction factors utilized specific to the tank construction used in the calculations. Please submit the calculation showing that the 30 minute contact time is provided for review.

8. Please provide documentation that the sodium hypochlorite solution to be utilized is NSF approved per Section 5.2.2 of RS.

9. Per Section of 5.4.4.a.2 storage containers or tanks of sodium hypochlorite shall be sited out of the sunlight in a cool area; however, ESPA page for Disinfection is marked to indicate that it will not be stored out of direct sunlight. Please ensure that the ESPA when resubmitted is properly marked and that the current version of the ESPA is used, Rev 3.1.5.

10. Your transmittal letter in the document package submitted indicates that chlorine residuals are to be taken with a Hach Free Chlorine Test Kit, Model CN66F Test Kit. That kit is a color wheel type kit and is not acceptable for taking chlorine residuals for the Safe Drinking Water Program. With the issuance of the Emergency Rule dated November 6, 2013 following the deaths due to the Naegleria fowleri parasite LAC was updated to reflect the the change in acceptable test methods along with chlorine residual levels, monitoring and record keeping. Your certified operator will already be aware of the new rule and its requirements.

11. When completing the ESPA Rev 3.1.5 please note that not all references to disinfection refer to the treatment of the water. Please take care to refer to the treatment cited in LAC 51, Part XII, § 351, Disinfection of Potable Water Supply Systems and §353, Disinfection of New Water Supplies, A. and C.

Once we receive the information needed to comply with the above comments, our review will continue. If you have any questions or require additional information, please call me at (985) 871-1332.

Respectfully,

Marcus N. Redford, P.E.
Region 9 Engineer

ec: St. Tammany Parish Sanitarian Manager
Jay Watson, Dept. of Envir. Services, St. Tammany Parish Gov.

DHH ▪ OFFICE OF PUBLIC HEALTH ▪ REGION IX
71128 HWY 59, SUITE 102-B ABITA SPRINGS, LOUISIANA 70420
Phone #: 985/871-1283 ▪ Fax #: 985/871-1335
"AN EQUAL OPPORTUNITY EMPLOYER"

RB 985-774 1133

07/19/2015

WATER WELL REGISTRATION LONG FORM (DNR-GW-1)

1. USE OF WELL (Check appropriate box):
☐ Irrigation/Agriculture ☐ Community Public Supply* ☐ Industrial** ☐ Power Generation
☐ Dewatering ☑ Non-Community Public Supply* ☐ Observation ☐ Test Hole
☐ Other (please specify): _____
*If well is for **Public Supply** purpose, check appropriate box to indicate primary use:
☐ Municipal ☐ Rural ☑ Commercial ☐ Therapeutic ☐ Institutional/Government ☐ Other _____
If well is for **Industrial purpose, check appropriate box to indicate primary use:
☐ Food & Kindred Products ☐ Textile Mill Products ☐ Lumber & Wood Products (Except Furniture) ☐ Primary Metal Industries
☐ Paper & Allied Products ☐ Chemicals & Allied Products ☐ Petroleum Refining & Related Industries ☐ Frac Supply
☐ Other _____

2. WELL OWNER: _____ Phone: _____
Well Owner's Address: _____
Well Owner's Number or Name (if any): _____

3. WELL INFORMATION:
Date Completed: _____ Depth of Hole: _____ ft. Depth of Completed Well: _____ ft.
Static water level: _____ ft. ☐ below ☑ above ground surface Date completed: _____
Name of person who drilled the well: _____

4. CASING AND SCREEN INFORMATION:
Casing Type: _____ Screen Type: _____
_____ in. from _____ ft. to _____ ft. _____ in. from _____ ft. to _____ ft.
_____ in. from _____ ft. to _____ ft. _____ in. from _____ ft. to _____ ft.
_____ in. from _____ ft. to _____ ft. _____ in. from _____ ft. to _____ ft.
Cemented from: _____ ft. to ground surface Slot Size: _____ in. Screen Length: _____ ft.

5. LOCATION OF WELL: GPS Coordinates: Latitude: _____ ° _____ ' _____ " Longitude: _____ ° _____ ' _____ "
Parish: _____; Physical Address: _____
Well is Near: _____ Approximately _____ miles from (Crossroads, Railroad, any Landmark, etc.): _____
_____
(Provide a map or sketch on back of original or attach to registration)

6. DRILLER'S LOG (Description and color of cuttings, such as shale, sand, etc. in feet below ground surface):

FROM	TO	DESCRIPTION	FROM	TO	DESCRIPTION

7. ABANDONMENT INFORMATION (Check appropriate boxes):
If well is new, does it replace an existing well? ☐ Yes ☑ No
If yes, has owner been informed of state regulations requiring plugging of abandoned wells? ☐ Yes ☐ No

8. WATER LEVEL AND YIELD INFORMATION:
Ground Elevation (GPS) _____ ft. Diameter of Hole: _____ in. Is well gravel-packed? ☐ Yes ☑ No
Extension Pipe: _____ in. from: _____ ft. to: _____ ft. Pumpdown cementing method used: ☐ Inside Casing ☑ Outside Casing. How was static water level determined? _____. The pumping water level was _____ ft. below ground surface. The well yielded _____ gpm with a drawdown of _____ ft. after _____ hours of continuous pumping on (date) _____. Describe how yield was measured _____. It is planned to pump the well at a rate of _____ gpm for _____ hours per day for _____ days per year. Proposed average daily pump rate: _____ gallons. Motor HP _____
Pump Setting _____ ft. (below ground surface).

9. AVAILABLE INFORMATION (Check appropriate boxes):

Is an electric log or other borehole/geophysical log available?	☐ Yes ☑ No	(If yes, please attach a copy of log)
Is a mechanical analysis of drill cuttings available?	☐ Yes ☑ No	(If yes, please attach a copy)
Is a chemical analysis of water available?	☐ Yes ☑ No	(If yes, please attach a copy)
Is a bacteriological analysis available?	☑ Yes ☐ No	(If yes, please attach a copy)
Are aquifer test results available?	☐ Yes ☑ No	(If yes, please attach a copy)
Pump Test available?	☐ Yes ☑ No	(If yes, please attach a copy)

10. REMARKS (e.g., engineer, pump information, acreage irrigated, subcontractor name & license no., etc.): _____
_____

I certify that this work was done and completed in accordance with Rules and Regulations of the State of Louisiana, including Chapter XII of Title 51, Public Health - Sanitary Code, if applicable, on: _____ *(Date) by:* _____ *(Name of Water Well Contractor), License No. WWC-* _____

Authorized Signature: _____ Date: _____

MAIL ORIGINAL TO:
Louisiana Dept. of Natural Resources
Attn: Ground Water Resources
P.O. Box 94275
Baton Rouge, LA 70804-9275
(225) 342-8244 Ph
(225) 242-3505 Fax

FOR OFFICE USE ONLY
PARISH | WELL NO | GEOLOGIC UNIT
LATITUDE | LONGITUDE | SECTION
TOWNSHIP | RANGE | ELEVATION | QUAD NO
REGISTERED BY: _____ DATE: _____
INSPECTED BY: _____ DATE _____
REMARKS: _____

DNR-GW-1 (Rev. 03/12)

OWNER'S COPY

Water Well Registration Long Form (DNR-GW-1)

The purpose of the [illegible] and procedures for registering water wells and holes [illegible] is to ensure [illegible] properly constructed [illegible] water well construction [illegible] drilling [illegible] ground water resources of the state.

[illegible] requires the contractor [illegible] November 1, 1985 to register that well or hole by [illegible] Department a completed Water Well Registration Form within 30 calendar days after completing the well or hole. For registration [illegible] completed [illegible] the owner or water well contractor has moved his [illegible] Water Well Registration Long Form [illegible] and shall be used to register the following types of wells: [illegible] public supply, industrial, irrigation, [illegible], power generation, [illegible] the [illegible] of the form by the water well contractor [illegible] by the water well contractor for [illegible] will consider and encourage [illegible] the registration Long Form may result in [illegible] Forms that are illegible, have incomplete [illegible] latitudinal and longitudinal coordinates or have not been signed and dated will be [illegible] to civil penalties.

The following explanation [illegible]

1. USE OF WELL: The principal purpose [illegible] appropriate one on the form. If water is used for more than one purpose [illegible] is unknown or does not fit one of the specific [illegible] "other."
    A. [illegible] fish and catfish farming, [illegible] parks, golf courses, and cemeteries.
    B. [illegible] employees, teams [illegible] products, lumber and wood products, [illegible] industries, and [illegible]
    C. Public Supply: [illegible] public or non-[illegible] community water well [illegible] service connections [illegible] residents [illegible] public supply use includes many [illegible] commercial, domestic, [illegible]
    D. Power Generation: [illegible]
    E. Dewatering: [illegible] in order to allow construction or mining activities.
    F. Observation: [illegible] engineering or research [illegible]
    G. [illegible] and water quality data.
    H. Other: [illegible] the short form (DNR-GW-2b).
2. WELL OWNER: [illegible]
3. [illegible] INFORMATION: [illegible]
4. CASING AND SCREEN INFORMATION: [illegible] available from the water well contractor's and/or engineer's report.
5. LOCATION OF WELL: [illegible] The location of the well [illegible] drawing [illegible] Use an X to indicate location of the well. [illegible] distance between wells.
6. DRILLER'S LOG: [illegible] driller's log [illegible] the Department.
7. ABANDONMENT INFORMATION: [illegible] The water well contractor is responsible for [illegible] plugging of abandoned wells.
8. WATER LEVEL AND YIELD INFORMATION: [illegible] obtained from the water well contractor's and/or engineer's report. [illegible] should be recorded. [illegible] should be recorded, respectively. The owner should be able to provide [illegible]
9. AVAILABLE INFORMATION: Please check the appropriate boxes on the form to indicate whether the specified logs or data were collected [illegible] to the Department.
10. REMARKS: This space can be used for presenting any other pertinent information, such as name of consulting engineer, screen openings, pump information, name of subcontractor, etc.

Certification Statement:
The water well contractor must certify the truthfulness and accuracy of the information completed on the form by providing the water well contractor [illegible] the contractor's printed name, water well license number, signature, and date.

(Detailed Sketch)

To: DNR

From: Richard Chabreck

Reference: Unregistered water well (Southern Comfort Lounge)

Owner: Mr. and Mrs. Raymond B. Williams, Slidell, LA

The well for the Southern Comfort Lounge in Slidell, LA at 2209 Gause Blvd. E. was apparently never registered with the DOTD. The establishment requires the well registration because it has new owners.

The well was drilled by Merlin Anthon (deceased). Mr. Anthon was respected in the water well business, and I knew him well. I can attest that he followed the rules and standards of constructing a non-community public supply well. The well would be grouted 50' below the ground surface.

The driller's log information is taken from a nearby well. Please accept this registration on behalf of the owners.

Sincerely,

Richard Chabreck

ST. TAMMANY PARISH
DEPARTMENT OF ENVIRONMENTAL SERVICES
SEWERAGE INSPECTION PERMIT

SIP #: 12-0042

Expiration Date: 8/17/2012 sd.

Address: 2213 East Gause

City State Zip: Slidell LA 70433-

Meter #:

At the time of our limited inspection, the sewerage system at the above reference location appears not to pose an apparent public health or environmental problem. Therefore, an electrical connection is hereby authorized.

Please be advised that the issuance of this permit in no way relieves the homeowner of responsibility for the proper operation and maintenance of the referenced sewerage system. Also be advised that St. Tammany Parish, Department of Environmental Services does hereby reserve the right to require maintenance and/or repairs to the existing system, or if deemed necessary, the installation of a new sewerage treatment system.

Signature: _____

Latitude: + 30° 17' 16" North
Longitude: - 89° 43' 51" West

OUTFALL INFORMATION

Outfall 001:

Discharge Description: treated sanitary wastewater totaling less than 2,500 gallons per day (GPD) maximum quantity
Parish: St. Tammany Parish
Outfall Flow: 60 GPD
Outfall Location: at the point of discharge from the sewage treatment plant
Discharge Route: unnamed drainage ditch, thence into French Branch, thence into Doubloon Bayou

LDEQ Subsegment Number: 090202
Effluent Limits Basis: Water Quality Regulations, LAC 33:IX.2515 and 2701 and the St. Tammany Parish Areawide Policy and all associated TMDLs.

Wastewater Treatment: 500 GPD sewage treatment plant

RECEIVING WATERS

Basin: Pearl River Basin
Subsegment number: 090202

The Designated Uses of this subsegment are as follows:

Primary Contact Recreation
Secondary Contact Recreation
Propagation of Fish and Wildlife
Outstanding Natural Resource Waters

303(d) Status:

Section 303 (d) of the Clean Water Act, as amended by the Water Quality Act of 1987 and EPA's regulations at 40 CFR 130, require that each state identify those waters within its boundaries that are impaired and as a result do not meet water quality standards. The Clean Water Act further requires states to implement plans to address impairments. LDEQ is developing Total Maximum Daily Loadings Studies (TMDLs) to address impaired waterbodies.

Subsegment 090202, West Pearl River-from confluence with Holmes Bayou to the Rigolets, is not listed on LDEQ's Final 2010 303(d) list as impaired. However, subsegment 090202 was previously listed as impaired for mercury and turbidity, for which the below TMDLs have been developed. The Department of Environmental Quality reserves the right to impose more stringent discharge limitations and/or additional restrictions in the future to maintain the water quality integrity and the designated uses of the receiving water bodies based upon additional TMDLs and/or water quality studies. The DEQ also reserves the right to modify or revoke and reissue

BOBBY JINDAL
GOVERNOR

PEGGY M. HATCH
SECRETARY

State of Louisiana

DEPARTMENT OF ENVIRONMENTAL QUALITY
ENVIRONMENTAL SERVICES

FEB 02 2012

CERTIFIED MAIL 7004 2510 0006 3849 4326
RETURN RECEIPT REQUESTED

AI No: 179544
Activity No: GEN20110001

Ms. Marcia Williams
64491 Hwy 434
Lacombe, LA 70445

RE: Louisiana Pollutant Discharge Elimination System (LPDES) General Sanitary Class I Permit LAG533956

Dear Ms. Williams:

The Office of Environmental Services (Office) has received and reviewed your application for a water discharge permit for your office located at 2213 Gause Blvd East in Slidell, St. Tammany Parish. This facility has been determined eligible for coverage under our general permitting system. Therefore, pursuant to the Louisiana Environmental Quality Act (LA R.S. 30:2001, et seq.), the attached Louisiana Pollutant Discharge Elimination System general permit number LAG533956, has been issued and is effective on the date of this letter authorizing

Ray Williams
Williams Rental Property Lots 13 & 14
2213 Gause Blvd East
Slidell, LA 70461

Telephone Number: (985) 882-2280

to discharge treated sanitary wastewater from your facility into an unnamed drainage ditch, thence into French Branch, thence into Doubloon Bayou in subsegment 090202 of the Pearl River Basin. If at anytime changes occur at this facility resulting in an increased discharge volume, you are required to notify the Department immediately.

To ensure that all correspondence regarding this facility is properly filed into the Department's Electronic Document Management System, you must reference your Agency Interest number AI 179544 and LPDES general permit authorization number LAG533956 on all future correspondence to this Department.

Your facility will be assessed an Annual Maintenance and Surveillance Fee to be invoiced separately by the agency. Annual fee amounts are subject to adjustment at a later date by promulgation of changes in the Louisiana Administrative Code. Pursuant to LAC 33:IX.1309.I, LAC 33:IX.6509.A.1 and LAC 33:I.1701, you must pay any outstanding fees to the Department. Therefore, you are encouraged to verify your facility's fee status by contacting LDEQ's Office of Management and Finance, Financial Services Division at (225) 219-3863 or on the LDEQ website at www.deq.louisiana.gov/fiscalreports. Any outstanding fees must be remitted via a check to the Louisiana Department of Environmental Quality within thirty (30) days after the effective date of your permit. Failure to pay the full amount due in the manner and time prescribed could result in applicable enforcement actions as prescribed in the Environmental Quality Act, including, but not limited to revocation or suspension of the applicable permit, and/or a civil penalty against you.

DEQ reserves the right to impose more stringent discharge limitations and/or additional restrictions in the future. Additional nitations and/or restrictions are based upon water quality studies and can indicate the need for advanced wastewater eatment. Water quality studies of similar dischargers and receiving water bodies have resulted in monthly average effluent nitations of 5mg/L $CBOD_5$ and 2 mg/L NH_3-N. Prior to upgrading or expanding this facility, the permittee should contact DEQ to determine the status of the work being done to establish future effluent limitations and additional permit conditions.

copy of the permit can be accessed and printed from LDEQ's Internet website at ttp://www.deq.louisiana.gov/portal/ using the following path: DIVISIONS – Water Permits – LPDES Permits – PDES General Permits – LAG530000 or by entering the Document ID 6021014 in LDEQ's Electronic Document Management System (EDMS) search window found at http://edms.deq.louisiana.gov/app/doc/querydef.aspx. In the vent you are unable to access and/or print a copy of this permit for your records from one of the above listed sources, lease contact the Water Permits Division at (225) 219-9371 to request a hard copy be sent by mail. In compliance with AC 33:IX.2701.H, the permittee may be required to provide their own copy of the permit. Please read the entire ermit very carefully to ensure that you thoroughly understand the conditions of the permit.

The permittee shall follow the final effluent limitations and monitoring requirements in **Part I, Section B, Schedule A, Page 3 of 16**. The remainder of the schedules listed in Part I shall not apply to this facility. Please see Appendix A for more nformation.

Monitoring results shall be reported to the Enforcement Division on a Discharge Monitoring Report (DMR) form per the schedule specified. A copy of the form is attached for your use. Pursuant to Part II, Section N of the general permit, one set of original DMRs and one set of copies are to be sent to the Enforcement Division, Office of Environmental Compliance, Louisiana Department of Environmental Quality, P.O. Box 4312, Baton Rouge, Louisiana 70821-4312.

For all sanitary treatment plants, the plans and specifications must be approved by the Department of Health and Hospitals, Office of Public Health, P.O. Box 4489, Baton Rouge, Louisiana 70821-4489, (225) 342-7395.

Please be advised that according to LA R.S. 48:385, any direct discharge to a state highway ditch, cross ditch, or right-of-way shall require approval from the Louisiana Department of Transportation and Development, P.O. Box 94245, Baton Rouge, Louisiana 70804, (225) 379-1927, and from the Department of Health and Hospitals, Office of Public Health, P.O. Box 4489, Baton Rouge, Louisiana 70821-4489, (225) 342-7395.

If you have any questions about the issuance of a general permit for this facility, please contact Ms. Rachel Davis at the address on the first page of this letter or telephone (225) 219-3515.

Sincerely,

Tom Killeen, Environmental Scientist Manager
Municipal and General Water Permits Section

rod
Attachments (DMR, Appendix A, and Statement of Basis)

c: IO-W
ec: Permit Compliance Unit
Office of Environmental Compliance

Southeast Regional Office
Office of Environmental Compliance

Ms. Ashley Broom
Office of Management and Finance

Public Health Chief Engineer
Department of Health and Hospitals
Office of Public Health

Rachel Davis
Todd Franklin
Water Permits Division

Contract

This Contract is made on March 23,2015 , 20 15 ,
between William Remmenga dba: Bill's Southern Comfort Lounge ,
address: 2209 Gause Blvd. East
Slidell, LA 70461

and Kerry Craig ,
address: 73 Concord Loop
Pearl River, LA 70452

For valuable consideration, the parties agree as follows:

I, Kerry Craig, will check and maintain the Chlorine and PH levels of the chemical pump and holding tank once a month adding chemicals as necessary.

Professional Certified Operator
ID: 44512
Certifications: WP1, WT1, WD1

No modification of this Contract will be effective unless it is in writing and is signed by both parties. This Contract binds and benefits both parties and any successors. Time is of the essence of this contract. This document, including any attachments, is the entire agreement between the parties. This Contract is governed by the laws of the State of Louisiana .

The parties have signed this Contract on the date specified at the beginning of this Contract.

Signature

Signature

William Remmenga dba: Bill's Sc
Printed Name

Kerry Craig
Printed Name

LOUISIANA

Operator Certification Program

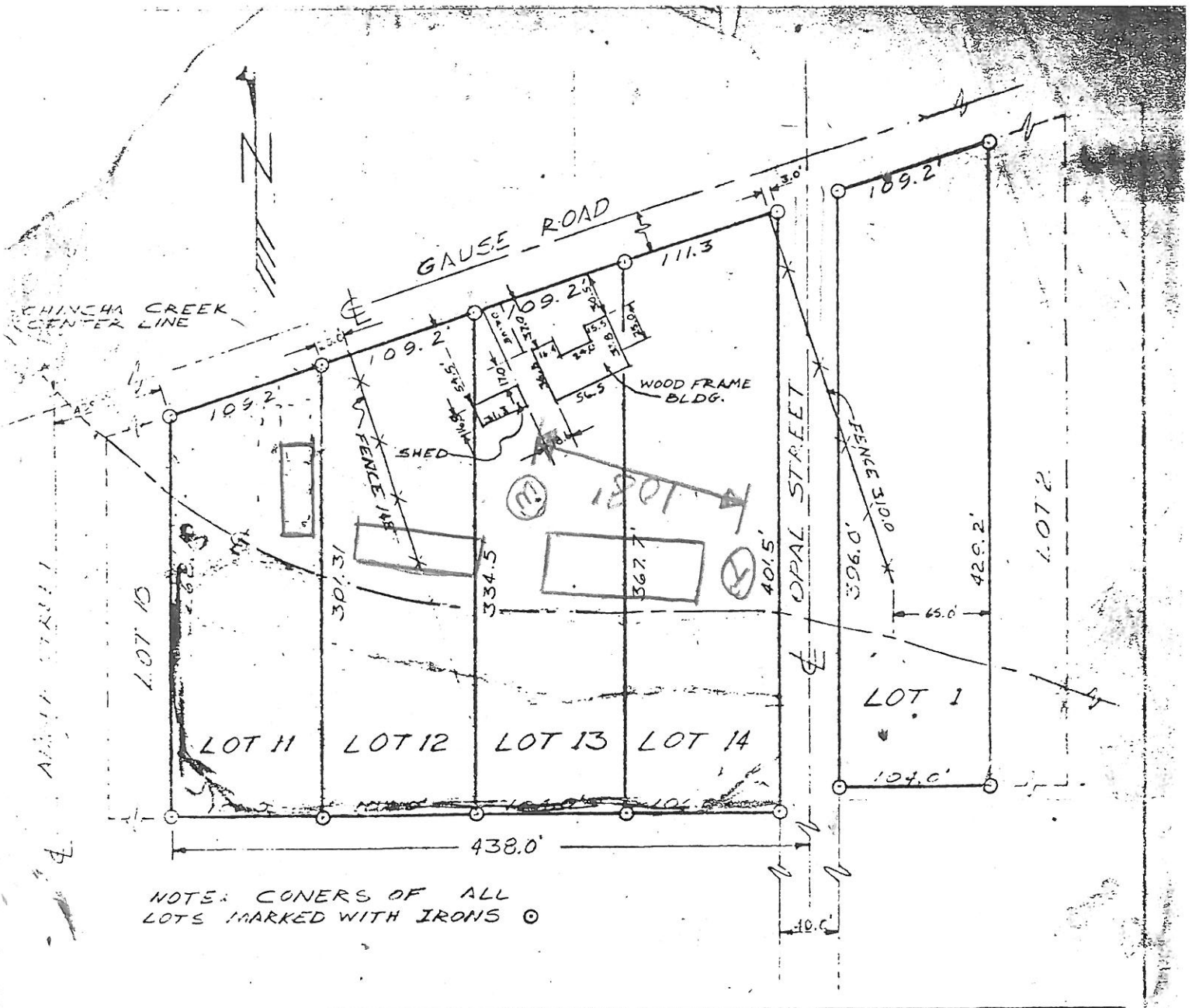
LOUISIANA Department of HEALTH and HOSPITALS

CRAIG, KERRY J

ID: 44512 Expires: 12/31/2015

PROFESSIONAL CERTIFIED OPERATOR

Certifications: WP1, WT1, WD1



SURVEY MAP

OF

LOTS NOS. 11, 12, 13, AND 14 OF SQUARE NO. 26 AND LOT NO. 1 OF SQUARE NO 27 OF PEARL RIVER SUBDIVISON, ST. TAMMANY PARISH, LOUISIANA

FOR

RAYMOND WILLIAMS

IVAN M. BORGEN
REG. No. 686
REGISTERED
SURVEYOR

THIS SURVEY IS CERTIFIED TRUE AND CORRECT BY

IVAN M. BORGEN
NO. 686

DATE: APRIL 24, 1972
REV
SCALE 1" = 100'-0"

SURVEY NO. 300

DESIGN SUMMARY PACKAGE

(Fill Out Applicable Sheets)

Project:	**Southern Comfort Lounge Water Supply**		
Project Type:	**WATER SYSTEM**		
Estimated Project Cost:	**$5000.00**		
Engineer:	**Brian A. Mistich**		
Telephone:	**985-285-4564**		
Parish:	**St. Tammany**	Nearest Town:	**Slidell**
Population Served:	**30**		

New System?	Existing System?
☐	☒

Project to be Owned and Operated By: (include name and address)	**Mr. Raymond B. Williams** **64491 Hwy 434** **Lacombe, LA 70445**
Proposed Project Will Connect to: (name of water and/or sewer system)	**Stand Alone**

7/16/2015

SEWER COLLECTION SYSTEM

Project:	n/a			
Engineer:				
General Scope of Project:				
GRAVITY PIPING	Material (specify ASTM standard and standard dimension ratio-SDR)			
	Size (8 inch minimum diameter)			
	Joints and Materials of Fitting:			
FORCE MAINS	Material (specify ASTM standard and standard dimension ration-SDR)			
	Size (3 inch minimum diameter without grinder pumps; 1 ¼ minimum diameter with grinder pumps)			
	Joints and Materials of Fitting:			
LAYOUT	Slope of Gravity Mains	____%Min.	____%Max.	____%Majority
	Location with Respect to Water Lines:	Maintain 18" Minimum Vertical Clearance @ Crossings? ☐Yes ☐No		
		Maintain 6' Minimum Horizontal Clearance? ☐Yes ☐No		
	Maximum Distance Between Manholes:			
	Number of Surface Water Crossings/Encounters:			
	Other Comments: (Manhole Construction, Highway Crossing, etc.)			
Deflection Testing? ☐ Yes ☐ No		Hydrostatic Testing? ☐ Yes ☐ No		
NAME OF CERTIFIED OPERATOR:				

DISINFECTION

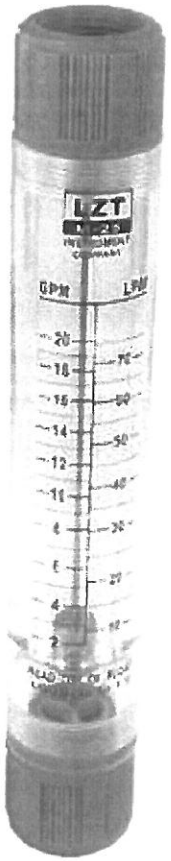
Project:	**Southern Comfort Lounge**
Engineer:	**Brian A. Mistich**
Date:	**7/15/2015**
General Scope of Project:	**Water Supply for a Lounge**
Site Location:	**2209 Gause Blvd East, Slidell, La**
TYPE OF DISINFECTION:	Chlorine: ☐ Gas ☒ Solution Ammonia: ☐ Gas ☐ Ammonium Sulfate (solution) ☐ Ammonium Hydroxide (Aqua Ammonia) ☐ Other (please explain):
FEEDERS/PUMPS:	# of Feeders/Pumps (2 minimum): **1 active, 1 stanby** Type: **positive displacement**
GENERAL:	Standby Equipment? ☒Yes ☐No Stored in Areas Not in Direct Sunlight? ☐Yes ☒No Vented to Outside? ☒Yes ☐No Enough Space for 30 Days Storage? ☒Yes ☐No
STORAGE OF CHLORINE GAS:	Chlorine Storage & Feed System Building Separated? ☐Yes ☐No Doors Open Outward? ☐Yes ☐No Shatter-Resistant Inspection Windows? ☐Yes ☐No Fan/Light Switches Located Outside? ☐Yes ☐No Air Inlet Near Ceiling? ☐Yes ☐No Vent Fan Near Floor? ☐Yes ☐No Cylinders Restrained in Position? ☐Yes ☐No Weighing Scales? ☐Yes ☐No
STORAGE OF AMMONIA GAS:	Ammonia Storage & Feed System Building Separated? ☐Yes ☐No Fan/Light Switches Located Outside? ☐Yes ☐No Air Inlet Near Ceiling? ☐Yes ☐No Vent Fan Near Floor with Elevated Intake? ☐Yes ☐No Leak Detection Systems in all Areas Through Which Ammonia is Piped? ☐Yes ☐No

Amico 2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input

Description Item # SPM9818198625 Model # PRO3286783878

2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input - Flowmeter measuring the oil or water easy to read for its clear scale.Straight tube style connect the liquid tube by two end thread.Stainless steel material inner and glasses tube design.Read float at largest diameter you will kow the flow of water.
Amico - 2-20GPM Water Tube Design Liquid Flowmeter Measure 1"PT Dia Input

- Flowmeter measuring the oil or water easy to read for its clear scale.
- Straight tube style connect the liquid tube by two end thread.
- Stainless steel material inner and glasses tube design.
- Read float at largest diameter you will kow the flow of water.



Calibration Column

DESCRIPTION

Milton Roy test tube Calibration Columns are designed specifically for use in determining flow rates of chemical metering pumps. Pump flow rate verification on periodic basis or after maintenance is important to system accuracy.

The test tube Calibration Columns provide a fast, easy, economical means of checking flow rates of your chemical metering pump. The units are easily installed (see instructions and diagram on reverse side).

Test tube Calibration Columns are available in the six sizes shown below. Flow rates shown below are based on a 30 second sample time.

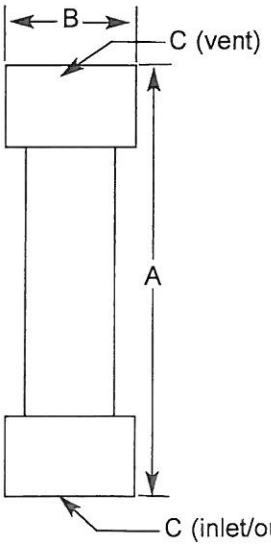
- 60 ml . . . .for pumps up to 2.0 GPH
- 100 ml . . . for pumps up to 3.3 GPH
- 250 ml . . . for pumps up to 8.3 GPH
- 500 ml . . . for pumps up to 16 GPH
- 1000 ml . . for pumps up to 34 GPH
- 2000 ml . . for pumps up to 67 GPH
- 4000 ml . . for pumps up to 120 GPH

FEATURES

- Rugged PVC materials of construction
- Large, easy to read label with operating instructions for ease of use
- Graduated in ml and standard divisions -- no conversion needed
- Easy to Clean
- Available from stock

DIMENSIONS

Model Number	Capacity	A	B	C
TT-0060	60 ml	13-3/4"	1-5/16"	1/4" Female NPT
TT-0100	100 ml	14-3/8"	1-5/8"	1/2" Female NPT
TT-0250	250 ml	15-3/4"	2-1/4"	1/2" Female NPT
TT-0500	500 ml	17-3/16"	2-3/4"	3/4" Female NPT
TT-1000	1000 ml	27-1/16"	2-3/4"	3/4" Female NPT
TT-2000	2000 ml	21-1/4"	5"	2" Female NPT
TT-4000	4000 ml	31"	5"	2" Female NPT



AD 4331
Effective 9/1/99

INSTALLATION INSTRUCTIONS

The recommended installation is shown below.

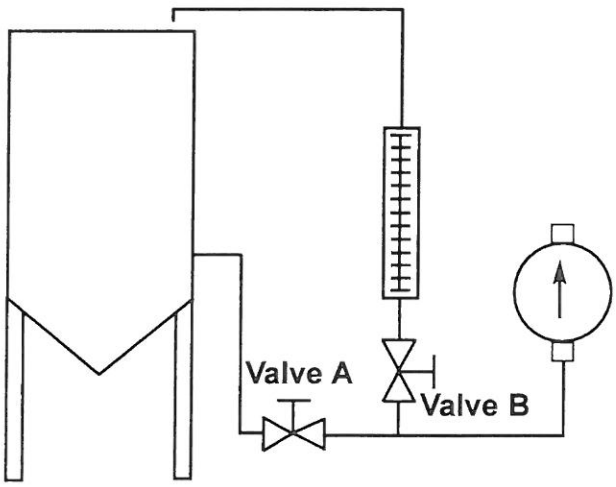
1. Install the test tube in the suction line to the chemical feed pump. The test tube should be installed in a vertical position, adjacent to the chemical storage tank. The test tube is filled by gravity; therefore, the tank must be full, or nearly full, in order to use the test tube.

2. Two (2) ball valves are required and must be installed as shown below. Valves are not included with the test tube, but may be purchased from Milton Roy.

3. A return (overflow) line must be provided, connection the top of the calibration column to supply tanks. Do not install any valve in this overflow line, as the test tube must be vented to atmosphere at all times.

4. A support strap is provided with each test tube for added stability at the top if needed.

RECOMMENDED INSTALLATION



IMPORTANT INSTALLATION NOTES:

A. This unit must be vented to atmosphere when in use.
B. Never use this device on discharge side of pump.
C. This device is intended for verification of metering pump flow rate.
D. Maximum pressure = static head pressure of tank. Maximum temperature = 130° F.
E. Not suitable for all chemicals. Consult factory.

OPERATING INSTRUCTIONS

A stop watch or standard wrist watch with sweep second hand is required.

1. With the pump operating normally, storage tank full or nearly full, and both valve A and valve B in the full open position, the test tube will fill with liquid.
2. When the liquid level reaches the zero division mark, close valve A. (Any division mark may be used as a starting point; however, by filling to the zero mark, you may measure over a longer period of time, enabling you to get a better calibration.)
3. Allow liquid level to drop for a period of at least 309 seconds before reopening valve A. (It is simplest to reopen valve A when liquid level is at one of the division lines.)
4. Finally, divide the number of divisions that the liquid has dropped by the number of minutes used. The answer is the pump flow rate in gallons per hour (GPH). For TT-4000 only, divide the number of divisions that the liquid has dropped by the number of minutes used and multiply the answer by ten. The answer is the pump flow rate in gallons per hour (GPH).
5. Example: Using the TT-1000 unit, the liquid level drops from the zero division to the 10th division in 30 seconds (0.5). The flow rate, then, is 10 / 0.5 = 20.0 GPH.
6. Check the actual measured flow rate against the setting on the pump.
7. When the test tube is not in use, valve B may be closed.
8. Valve A must remain open at all times except while the test tube is in use.

NOTE:

With both valves in the open position, the test tube may be used as a level gauge. This practice should only be followed when process liquid level is below the maximum calibration column height. If liquid level is higher than maximum calibration column height, the calibration column will overfill and force the process liquid to return to the tank.

AVAILABLE ACCESSORIES:

In addition to metering pumps & chemical feed systems, Milton Roy offers the following accessories:

- Back Pressure Valves
- Pulsation Dampeners
- Gauge Glasses
- Valve Actuators
- Safety Valves
- Dissolving Baskets
- Pressure Gauges
- Floats
- Tanks
- Mixers
- Traps

Milton Roy Company • *Flow Control Division*
201 Ivyland Road • Ivyland, PA 18974-0577 • 215-441-0800 • FAX: 215-441-8620 • www.miltonroy.com

AD 4331
Effective 9/1/99

petent witnesses who hereunto sign their names with the said appearers and me, Notary, after reading of the whole.

'NESSES:

Brenda H. Smith
enda H. Smith

John Malpie
John Malpie

( )

Joette T. Norra
ette T. Norra

Adrienne Muller Malpie
Adrienne Muller Malpie

Raymond B. Williams
Raymond B. Williams

Marcia Sabaté Williams
Marcia Sabate Williams

Wendell E. Tanner
Wendell E. Tanner Notary Public

( )

Filed for record August 10th., 1971
Truly recorded August 10th., 1971

Clerk of Court & Ex-Officio Recorder

This sale is made and accepted for and in consideration of the price and sum of EIGHT THOUSAND AND NO/100 DOLLARS ($8,000.00)---------- cash, which the said purchasers have well and truly paid, in ready and current money, to the said vendors who hereby acknowledge the receipt thereof and grant full acquitance and discharge therefor.

All State and Parish Taxes up to and including the taxes due and exigible in 1970 are paid as per tax researches attached hereto,

The certificate of mortgage and conveyance required by Article 3364 of the Revised Civil Code of this State are attached hereto and made a part hereof.

THUS DONE AND PASSED in my office at Slidell, St. Tammany Parish, Louisiana, on the day, month and year herein first above written, in the presence of Brenda H. Smith and Joette T. Norra competent witnesses who hereunto sign their names with the said appearers and me, Notary, after reading of the whole

WITNESSES:

Brenda H. Smith

Brenda H. Smith

Joette T. Norra

Joette T. Norra

John Malpie

John Malpie

Adrienne Muller Malpie

Adrienne Muller Malpie

Raymond B. Williams

Raymond B. Williams

Marcia Sabate' Williams

Marcia Sabate Williams

Wendell E. Tanner

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Louisiana Department of Environmental Quality (LDEQ)
Office of Environmental Services

STATEMENT OF BASIS

Louisiana Pollutant Discharge Elimination System (LPDES)
General Permit LAG533956

AI Number 179544
Activity Number GEN20110001

By: Rachel Davis
January 30, 2012

I APPLICANT:

Company:
Ray Williams
64491 Hwy 434
Lacombe, LA 70445

Facility:
Williams Rental Property Lots 13 & 14
2213 Gause Blvd East
Slidell, LA 70461

Cognizant Official Telephone Number: (985) 882-2280

II PERMIT STATUS:

The Office of Environmental Services (Office) has received an application on November 22, 2011 for initial issuance of an LPDES permit. There are no prior Louisiana Pollutant Discharge Elimination System (LPDES) issued permits.

Issuing LPDES General Permit:
Sanitary Class I, treated sanitary wastewater totaling less than 2,500 gallons per day (GPD) maximum quantity

Final Effluent Limitations and Monitoring Requirements:
Part I, Section B, Schedule A, Page 3 of 16

III FACILITY INFORMATION

Facility Location:	Ray Williams Williams Rental Property Lots 13 & 14 2213 Gause Blvd East Slidell, LA 70461
Facility Type:	office
Average Expected Flow:	3 Employees x 20 GPD = 60 GPD
Number of Outfalls:	1

this permit based upon any changes to established TMDLs for this discharge, or to accommodate for pollutant trading provisions in approved TMDL watersheds as necessary to achieve compliance with water quality standards.

The following TMDL's have been established for subsegment 090202:

TMDLs for Mercury in Selected Subsegments in the Pearl River Basin, Louisiana

Subsegment 090202 was included in the TMDL; however, it only considered the portion from Porters River to the West Pearl River. Therefore, the TMDL does not impact the receiving stream. Based on the size and nature of the facility, the department believes there is little potential for the discharge to cause or contribute to the mercury impairment of this subsegment. Therefore, no limitations for mercury will be required of this facility.

TMDLs for Turbidity for Subsegments 090106, 090201, 090202, and 090501 in the Pearl River Basin, Louisiana

According to the TMDL "Because point sources were considered to have a negligible effect on existing violations of the water quality standard, all of the load reductions were assigned to nonpoint sources". Since sanitary point source discharges were not included in the TMDL, this permit will not require any limitations for turbidity.

Outstanding Natural Resource Water

Outstanding Natural Resources (ONRW) is listed as a designated use of Segment 090202 (West Pearl River from the confluence with Holmes Bayou to the Rigolets). However, this designated use is applicable only if the discharge is directly into the named waterbody and not into a tributary or distributary of the waterbody, per LAC33:IX.1111.A. This discharge is into French Bayou, thence into Doubloon Branch flowing over 5 miles before reaching the West Pearl River, therefore, the designated use of ONRW does not apply. Based on the limitations imposed and the distance from the West Pearl River, the discharge is not expected to cause any degradation to the ONRW.

VI HISTORY / COMMENTS

A. Compliance History:	There are no enforcement actions issued to this facility as of December 20, 2011.
B. DMR Review:	There are no DMRs on file as of December 20, 2011.
C. Inspections:	There are no inspections on file as of December 20, 2011.
D. Fees:	$99.00
E. Comments:	This facility should receive an LPDES General Permit Sanitary Class I, because the treated sanitary wastewater flow is less than 2,500 GPD maximum quantity. The effluent limitations basis for this permit is the Water Quality Regulations, LAC 33:IX.2515 and 2701, the St. Tammany Parish Areawide Policy, and all associated TMDLs.

United States of America

STATE OF LOUISIANA — PARISH OF ST. TAMMANY

BE IT KNOWN, that on this 7th day of August 19 71, BEFORE ME, a Notary Public, duly commissioned and qualified, in and for the above named Parish and State, therein residing, and in the presence of the undersigned competent witnesses, PERSONALLY CAME AND APPEARED:

JOHN MALPIE and wife, ADRIENNE MULLER MALPIE, both of lawful age, who declare that they have each been married but once and then to each other presently living together in lawful wedlock in Orleans Parish, Louisiana,

who declare that they/do by these presents, grant, bargain, sell, convey, transfer, assign, set over and deliver, with all legal warranties and with full substitution and subrogation in and to all rights and action of warranty which they have or may have against all preceding owners and vendors, unto

RAYMOND B. WILLIAMS and wife, MARCIA SABATE WILLIAMS, both of lawful age, who declared that they have each been married but once and then to each other, presently living in lawful wedlock in Orleans Parish, Louisiana,
Mailing Address: 6562 Pontchartrain Drive
New Orleans, Louisiana 70124

here present and accepting, purchasing for themselves, their heirs and assigns, and acknowledging due delivery and possession, thereof, the following described property, to wit;

FIVE (5) CERTAIN LOTS OR PORTIONS OF GROUND, together with all the buildings and improvements thereon, including rights, ways, privileges, prescriptions and servitudes in anywise belonging or appertaining thereto, situated in Pearl Acres, a subdivision of part of Fractional Section No. Six (6), Township 9 South, Range 15 East, 8th Ward, St. Tammany Parish, Louisiana, more fully described as follows:

Lots Nos. 11, 12, 13 and 14 of Square No. 26 and lot No. 1 of Square No. 27 of said Pearl Acres Subdivision, each measuring as follows:

Lot No. 11 measures 109.2 feet fronting on Gause Road, 268.12 feet on west side line adjoining lot no. 10; 301.31 feet on east side line adjoining lot no. 12 by 104 feet across rear line;

Lot No. 12 measures 301.31 feet on west side line 109.2 feet fronting on Gause Road; 334.5 feet on east side line by 104 feet across rear line;

Lot No. 13 measures 109.2 feet fronting on Gause Road, 334.5 feet on west side line 367.7 feet on east side line by 104 feet across the rear line;

Lot No. 14 measures 111.3 feet fronting on Gause Road 367.7 feet on west side line 401.5 feet on east side line by 106 feet across rear line, all said lots adjoin lot no. 15 on south line.

Lot No. One (1) of said Square 27 measures 109.2 feet fronting on Gause Road 396.0 feet on west side line along Opal Street, 429.2 feet on east line by 104 feet across rear line;

Said Square No. 26 is bounded on north by Gause Road, east by Opal Street, south by south line of Pearl Acres Subdivision and on the west by Amber Street.

Said Square No. 27 is bounded on north by Gause Road, on east by southwe

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er, presently living in lawful wedlock in Orleans Parish, Louisiana,
ing Address: 6562 Pontchartrain Drive
New Orleans, Louisiana 70124

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eet.

d Square No. 27 is bounded on north by Gause Road, on east by southwest
e of Section 38 and east boundary line of Pearl Acres Subdivision, on
th by South line of said Subdivision and on the west by Opal Street,
in accordance with plan and survey No. 664 made by H. G. Fritchie,
veyor, dated 12th day of April, 1928, a copy of which is on file in
office of the Clerk of Court.

ng the same property acquired by vendors herein by act before Gus A.
tchie, dated July 14th, 1956 and recorded in COB 244, folio 115 of the
icial records of St. Tammany Parish, Louisiana.