

<b>Permit</b>		<b>Permit #:</b> LAG481115		<b>Permittee:</b> DEPT OF PUBLIC SAFETY		<b>Facility:</b> DEPT OF PUBLIC SAFETY - STATE POLICE TROOP L	
<b>Major:</b> No		<b>Permittee Address:</b> 2600 N CAUSEWAY BLVD MANDEVILLE, LA 70471		<b>Facility Location:</b> 2600 N CAUSEWAY BLVD MANDEVILLE, LA 70471			
<b>Permitted Feature:</b> 001 External Outfall		<b>Discharge:</b> 001-S Outfall 001					

<b>Report Dates &amp; Status</b>		<b>Monitoring Period:</b> From 07/01/21 to 12/31/21		<b>DMR Due Date:</b> 01/28/22		<b>Status:</b> NetDMR Validated	
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**Considerations for Form Completion**  
 TSS limit for oxidation ponds shall be 90 mg/L Monthly Average and 135 mg/L Daily Maximum Fecal Coliform limit for oyster propagation area shall be 14 #/100ml Monthly Average and 43 #/100ml Daily Maximum

<b>Principal Executive Officer</b>		<b>First Name:</b> Louis		<b>Title:</b> Executive Officer		<b>Telephone:</b> 198-589-3625	
		<b>Last Name:</b> Calato					

**No Data Indicator (NODI)**  
 Form NODI: --

Code	Parameter Name	Monitoring Location	Season #	Param. NODI	Quantity or Loading					Quality or Concentration					# of Ex.	Frequency of Analysis	Sample Ty			
					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3				Value 3	Units	
00400	pH	1 - Effluent Gross	0	--	Sample						=	7.8			=	7.8	12 - SU	0	01/6M - Once Every 6 Months	GR - GRAE
					Permit Req.						>=	6.0 INST MIN			<=	9.0 INST MAX	12 - SU	0	01/6M - Once Every 6 Months	GR - GRAE
					Value NODI															
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample						=	15.0			=	15.0	19 - mg/L	0	01/6M - Once Every 6 Months	GR - GRAE
					Permit Req.						<=	30.0 MO AVG			<=	45.0 DAILY MX	19 - mg/L	0	01/6M - Once Every 6 Months	GR - GRAE
					Value NODI															
00600	Nitrogen, total [as N]	1 - Effluent Gross	0	--	Sample						=	118.0			=	118.0	19 - mg/L	0	01/6M - Once Every 6 Months	GR - GRAE
					Permit Req.							Req Mon DAILY MX				19 - mg/L		0	01/6M - Once Every 6 Months	GR - GRAE
					Value NODI															
X 00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	0	--	Sample						=	122.0			=	122.0	19 - mg/L	1	01/6M - Once Every 6 Months	GR - GRAE
					Permit Req.						<=	5.0 MO AVG			<=	10.0 DAILY MX	19 - mg/L	1	01/6M - Once Every 6 Months	GR - GRAE
					Value NODI															
00665	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample						=	11.7			=	11.7	19 - mg/L	0	01/6M - Once Every 6 Months	GR - GRAE
					Permit Req.							Req Mon DAILY MX				19 - mg/L		0	01/6M - Once Every 6 Months	GR - GRAE
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	139.0	=	139.0	07 - gal/d								0	01/6M - Once Every 6 Months	ES - ESTII
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	07 - gal/d								0	01/6M - Once Every 6 Months	ES - ESTII
					Value NODI															
X 74055	Coliform, fecal general	1 - Effluent Gross	0	--	Sample						>	2419.6	>	2419.6		13 - #/100mL	1	01/6M - Once Every 6 Months	GR - GRAE	
					Permit Req.						<=	200.0 MOAV GEO	<=	400.0 DAILY MX		13 - #/100mL	1	01/6M - Once Every 6 Months	GR - GRAE	
					Value NODI															
X 80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	--	Sample						=	54.0	=	54.0		19 - mg/L	1	01/6M - Once Every 6 Months	GR - GRAE	
					Permit Req.						<=	10.0 MO AVG	<=	15.0 DAILY MX		19 - mg/L	1	01/6M - Once Every 6 Months	GR - GRAE	
					Value NODI															

**Submission Note**  
 If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**

Code	Parameter Name	Monitoring Location	Field	Type	Description	Acknowledge
74055	Coliform, fecal general	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
74055	Coliform, fecal general	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes

**Comments**  
 see attached for non-compliance form

Name	Type	Size
LaStateTroopLSanitaryNonCompliance2nd2021.pdf	pdf	162436.0

**Report Last Saved By**  
 DEPT OF PUBLIC SAFETY

User: LSP\_TROOPL  
Name: Louis Calato  
E-Mail: louis.calato@la.gov  
Date/Time: 2022-01-27 15:03 (Time Zone: -06:00)

**Report Last Signed By**

User: LSP\_TROOPL  
Name: Louis Calato  
E-Mail: louis.calato@la.gov  
Date/Time: 2022-01-27 15:03 (Time Zone: -06:00)

# Submission Receipt

Submission Date: 01-27-2022

Submitter Name: Louis Calato

Submitter Telephone: (985) 893-6250

# Attachment 1



## Non-Compliance Report Form

**Facility Name:** Department of Public Safety State Police Troop L

**Facility Address:** (Semi-Annual) 2600 N. Causeway Blvd., Mandeville, LA 70471

**Person Reporting:** Lt. Louis Calato      **Title:** Lieutenant

**Phone Number:** 985-893-6239      **Parish:** St. Tammany

**LPDES Number:** LAG481115      **AI#:** 22734

**Receiving Waters:** From Bayou Tete L' Ours via local Drainage in (subsegment 040808) of the Lake Pontchartrain Basin.

(Refer to Subject Line on Permit Cover Letter)

<b>Date of Non-Compliance</b>	<b>Parameter/Description (e.g. TSS, Overflow)</b>	<b>Outfall No./Location (e.g. 001, 123 Main St.)</b>	<b>Permit Limit</b>	<b>Reported Value</b>
11-23-21	CBOD <sub>5</sub>	Outfall 001	10	54
11-23-21	Fecal Coliform	Outfall 001	200	>2,419.6
11-23-22	Ammonia Nitrogen	Outfall 001	5	122

**Cause of Violation(s):** The airline to the bubbling system that sends air to the containment system was broken. The system was also pumped out in March. Therefore, all of the beneficial organisms were destroyed.

**Corrective Action/Preventative Measures/Remediation:** The airline has been repaired. Adequate time to re-culture organism should give better results.

**Please submit as a PDF attachment in NetDMR or mail non-compliance reports to the following address:**

**Office of Environmental Compliance**  
**Attn: Permit Compliance Unit**  
**P.O. Box 4312**  
**Baton Rouge, LA 70821-4312**