

CITY RESOLUTION NO. CR-006-2026

A RESOLUTION OF THE LAFAYETTE CITY COUNCIL INFORMING THE STATE OF LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY THAT THE LAFAYETTE UTILITIES SYSTEM HAS TAKEN THE APPROPRIATE ACTION CONCERNING PERMIT REQUIREMENTS CONTAINED IN LPDES PERMITS NUMBERED LA0036382, LA0036374, LA0036391, AND LA0042561

BE IT RESOLVED by the Lafayette City Council, that:

WHEREAS, the Lafayette Mayor-President of the Lafayette City-Parish Consolidated Government through the Utilities Director has reviewed the Municipal Water Pollution Prevention Environmental Audit Reports which are attached to this resolution; and

WHEREAS, the Lafayette Mayor-President of the Lafayette City-Parish Consolidated Government through the Utilities Director has urged its Lafayette Utilities System to make every effort to maximize the useful lives of its Publicly Owned Treatment Works (POTWs) through effective operation and maintenance utilizing qualified and well-trained personnel, through appropriate financial management, and through reduced wastewater flows and loadings when possible; and

WHEREAS, the Lafayette Mayor-President of the Lafayette City-Parish Consolidated Government through the Utilities Director will strive to provide timely planning and financing for future needs and growth of its POTWs prior to the occurrence of wastewater permit violations; and

WHEREAS, the Lafayette Mayor-President of the Lafayette City-Parish Consolidated Government through the Utilities Director is aware of the inflow/infiltration problem identified in the Municipal Water Pollution Prevention Environmental Audit Reports.

NOW, THEREFORE, BE IT FURTHER RESOLVED by the Lafayette City Council, that:

SECTION 1: All of the aforescribed “Whereas” clauses are adopted as part of this resolution.

SECTION 2: The Lafayette City Council has urged its Lafayette Utilities System to take all actions the Lafayette Utilities System deems necessary to maintain the permit requirements in its LPDES permits numbered LA0036382, LA0036374, LA0036391, and LA0042561.

SECTION 3: The Lafayette City Council has urged its Lafayette Utilities System to take all action the Lafayette Utilities System deems necessary to comply with compliance schedules and other matters contained in Administrative Order Docket Number CWA-06-2018-1783 issued by the United States Environmental Protection Agency.

SECTION 4: The Lafayette City Council informs the State of Louisiana Department of Environmental Quality that said Lafayette Mayor-President of the Lafayette City-Parish Consolidated Government through the Utilities Director has taken the foregoing actions concerning the permit requirements contained in LPDES Permits numbered LA0036382, LA0036374, LA0036391, and LA0042561.

SECTION 5: All resolutions, or parts thereof, in conflict herewith are hereby repealed.

This resolution having been submitted to a vote, the vote on behalf of the Lafayette City Council thereon was as follows:

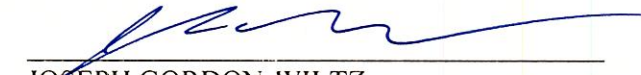
YEAS: Broussard, Naquin, Hebert, Hooks, Boudreaux

NAYS: None

ABSENT: None

ABSTAIN: None

AND the resolution was declared adopted on this, the 10th day of March, 2026.



JOSEPH GORDON-WILTZ
LAFAYETTE CLERK OF THE COUNCIL

MUNICIPAL WATER POLLUTION PREVENTION

**MWPP
ENVIRONMENTAL AUDIT
REPORT**



**REPORTING PERIOD:
January 2025 - December 2025**

AS REQUIRED BY:

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY
OFFICE OF ENVIRONMENTAL SERVICES

2025

**AMBASSADOR CAFFERY
WASTEWATER
TREATMENT PLANT**

PERMIT #: LA0042561

LOUISIANA
*MUNICIPAL WATER
 POLLUTION PREVENTION*
MWPP



Facility Name:	Lafayette Consolidated Gvt Ambassador Caffery WWTF
LPDES Permit Number:	LA0042561
Agency Interest (AI) Number:	19464
Address:	PO BOX 4017-C
	Lafayette, LA 70502
Parish:	Lafayette
(Person Completing Form) Name:	J. Shane Delcambre
Title:	Environmental Compliance Supervisor
(Person Completing Form) Name:	February 3, 2026

LA0042561

Permit #

PART 1: INFLUENT FLOW/LOADING (ALL PLANTS)

A. List the average monthly volumetric flows and BOD loadings received at your facility during the last reporting year.

	Column 1 Average Monthly Flow (million gallons per day, MGD)	x	Column 2 Average Monthly BOD5 Concentration (mg/L)	x 8.34 =	Column 3 Average Monthly BOD5 Loading (pounds per day, lb/day)
Jan-25	6.42	x	271.4	x 8.34 =	14,531.5
Feb-25	5.91	x	242.8	x 8.34 =	11,967.5
Mar-25	5.80	x	283.8	x 8.34 =	13,728.0
Apr-25	5.65	x	321.7	x 8.34 =	15,158.8
May-25	7.43	x	245.3	x 8.34 =	15,200.3
Jun-25	6.77	x	219.7	x 8.34 =	12,404.7
Jul-25	6.40	x	199.2	x 8.34 =	10,632.5
Aug-25	4.23	x	237.4	x 8.34 =	8,375.0
Sep-25	4.38	x	252.7	x 8.34 =	9,230.9
Oct-25	4.95	x	270.6	x 8.34 =	11,171.2
Nov-25	4.49	x	346.2	x 8.34 =	12,964.0
Dec-25	5.19	x	283.2	x 8.34 =	12,258.2
Avg	5.64		264.5		12,302

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in MGD) x 8.34

B. List the design flow and design BOD loading for your facility in the blanks below. If you are not aware of these design quantities, refer to your Operation and Maintenance (O&M) Manual or contact your consulting engineer.

Design Flow, MGD	6.00	x 0.90 =	5.40
Design BOD, lb/day	9,007 lb/day @ 180 mg/l	x 0.90 =	8,106 lb/day @ 180 mg/l

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C. How many months did the monthly flow (Column 1) to the wastewater treatment facility (WWTF) exceed 90% of design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	0	0	0	5	5	5	5	5	5	5	5

Write 0 or 5 in the C point total box C Point Total

D. How many months did the monthly flow (Column 1) to the WWTF exceed the design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	15	15	15	15	15	15	15	15

Write 0, 5, 10 or 15 in the D point total box D Point Total

E. How many months did the monthly BOD loading (Column 3) to the WWTF exceed 90% of design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	5	5	5	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the E point total box E Point Total

F. How many months did the monthly BOD loading (Column 3) to the WWTF exceed the design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	10	20	30	40	50	50	50	50	50	50	50	50

Write 0, 10, 20, 30 40 or 50 in the F point total box F Point Total

G. Add together each point total for C through F and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 1: (max = 80)

Also enter this value or 80, whichever is less on the point calculation table on page 16.

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PART 2: EFFLUENT QUALITY / PLANT PERFORMANCE

A. List the monthly average effluent BOD and TSS concentrations produced by your facility during the last reporting year.

Month	Column 1 Average Monthly BOD (mg/l)	Column 2 Average Monthly TSS (mg/l)
January-25	2.8	7.2
February-25	2.8	6.0
March-25	2.7	6.0
April-25	2.9	5.6
May-25	2.8	7.4
June-25	2.0	4.8
July-25	2.0	4.0
August-25	2.0	4.0
September-25	2.0	3.9
October-25	2.0	3.9
November-25	2.2	4.0
December-25	2.1	4.0
Average	2.4	5.1

B. List the monthly average limits for your facility in the blanks below.

	Permit Limit		90% of Permit Limit
<i>BOD , mg/l</i>	1) 20 mg/L 2) 10 mg/L	x 0.90 =	1) 18.0 mg/L 2) 9.0 mg/L
<i>TSS , mg/l</i>	1) 20 mg/L 2) 15 mg/L	x 0.90 =	1) 18.0 mg/L 2) 13.5 mg/L
Season 1 = January - April Season 2 = May - December			

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C. Continuous Discharge to Surface Water.

- i. How many months did the effluent BOD (Column 1) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the i point total box i Point Total

- ii. How many months did the effluent BOD (Column 1) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the ii point total box ii Point Total

- iii. How many months did the effluent TSS (Column 2) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the iii point total box iii Point Total

- iv. How many months did the effluent TSS (Column 2) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the iv point total box iv Point Total

- v. Add together each point total for I through iv and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 2: (max = 100)

Also enter this value or 100, whichever is less on the point calculation table on page 16.

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D. Other Monitoring and Limitations

i. At any time in the past year was there any exceedance of a permit limit for other pollutant such as: ammonia-nitrogen, phosphorus, pH, total residual chlorine, or fecal coliform?
√ Check one box Yes No *If Yes, Please describe:*

ii. At any time in the past year was there a "failure" of a Biomonitoring (Whole Effluent Toxicity) test of the effluent?
√ Check one box Yes No *If Yes, Please describe:*

iii. At any time in the past year was there any exceedance of a permit limit for toxic substances?
√ Check one box Yes No *If Yes, Please describe:*

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PART 3: AGE OF THE WASTEWATER TREATMENT FACILITY

A. What year was the wastewater treatment facility constructed or last major expansion improvement completed? 2008

<i>Current Year</i>	-	<i>Answer to A</i>	=	<i>Age in Years</i>
<u>2025</u>		<u>2008</u>		<u>17</u>

Enter age in Part C below

B. Check the type of treatment facility that is employed.

	FACTOR
<input checked="" type="checkbox"/> Mechanical Treatment Plant (trickling filter, activated sludge, etc.) Specify Type: <u>Activated Sludge</u>	2.5
<input type="checkbox"/> Aerated Lagoon	2.0
<input type="checkbox"/> Stabilization Pond	1.5
<input type="checkbox"/> Other Specify Type: _____	1.0

C. Multiply the factor listed next to the type of facility your community employs by the age of your facility to determine the total points value for Part 3.

TOTAL POINT VALUE FOR PART 3 =

<u>2.5</u> <i>Factor</i>	x	<u>17</u> <i>Age</i>	=	42.5
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Also enter this value or 50, whichever is less, on the point calculation table on page 16.

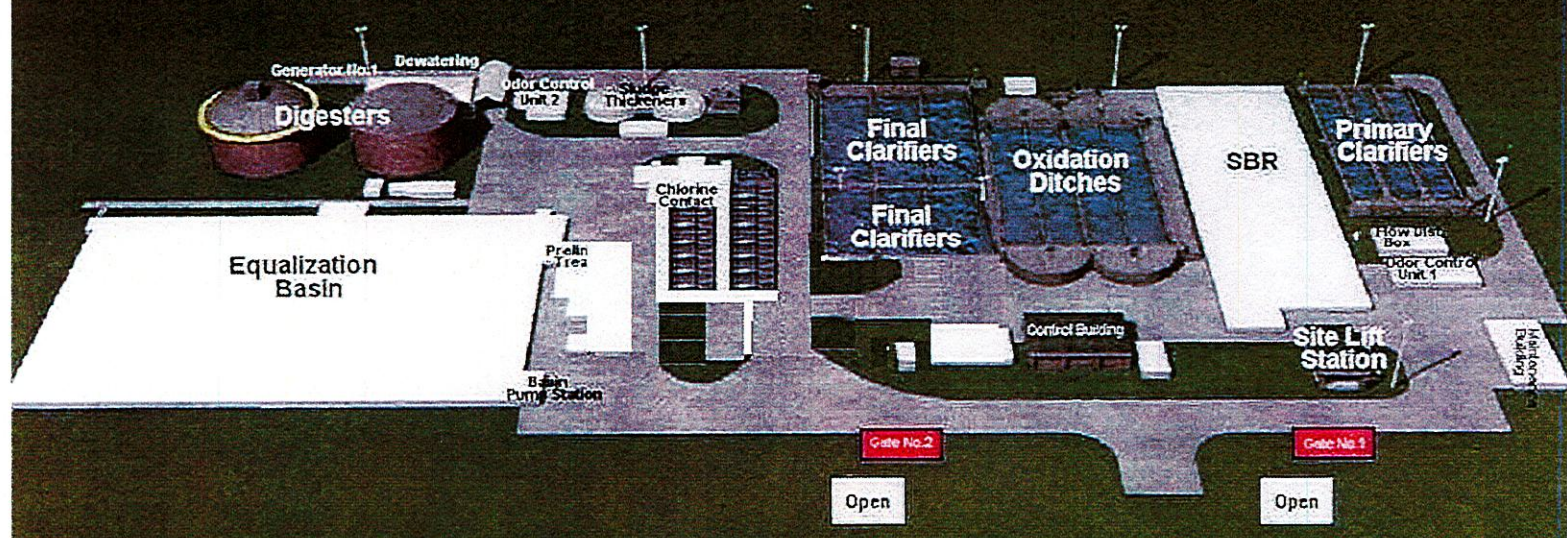
D. Attach a schematic of the treatment plant

See Attachment A.

ATTACHMENT

A

AMBASSADOR CAFFERY TREATMENT PLANT



Site Pump Station
Preliminary Treatment Unit
Equalization Basin
Basin Pump Station
Flow Distribution Box
Primary Clarifiers
Oxidation Ditches

Final Clarifiers
Chlorine Contact
Sludge Thickeners
Digesters
Sludge Dewatering
Odor Control

Legend
Flow Totals
Equipment Runtimes
Power - Generator 1
Power - Generator 2

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PART 4: OVERFLOWS AND BYPASSES

A.
i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due to heavy rain:

54 ✓ Check one box 0 = 0 points 3 = 15 points
 1 = 5 points 4 = 30 points
 2 = 10 points 5 or more = 50 points

ii. List the number of bypass, overflow, or unpermitted discharges shown in A(i) that were within the collection system and the number at the treatment plant.

Collection System 54 Treatment Plant 0

B.
i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due equipment failure, either at the treatment plant or due to pumping problems in the collection system:

3 ✓ Check one box 0 = 0 points 3 = 15 points
 1 = 5 points 4 = 30 points
 2 = 10 points 5 or more = 50 points

ii. List the number of bypass, overflow, or unpermitted discharges shown in B(i) that were within the collection system and the number at the treatment plant.

Collection System 3 Treatment Plant 0

C. Specify whether the bypasses came from the city/village/town sewer system or from contract or tributary communities/sanitary districts, etc....

All overflows or bypasses came from city sewer collection system.

D. Add together the point value checked in A and B and place in the box below.

TOTAL POINT VALUE FOR PART 4:

65

(max =100)

Also enter this value or 100, whichever is less, on the point calculation table on page 16.

E. List the person responsible (name and title) for reporting overflows, bypasses or unpermitted discharges to State and Federal authorities:

Brad Eldridge Manager Wastewater Operations	(337) 291-5921
Ray Fusilier Superintendent/ WW Collection	(337) 291-5751

Describe the procedure for gathering, compiling and reporting:

Lift station telemetry, plant meters and visual inspections utilized to track flows. Collection division personnel gather and submit pertinent information regarding collection system overflows to Treatment Section. Plant operators notify supervisors of treatment plant bypasses. Environmental compliance notifies agencies when necessary. Overflow reports are included with monthly DMRs.

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PART 5: SLUDGE STORAGE AND DISPOSAL SITES

A. Sludge Storage

How many months of sludge storage capacity does your facility have available, either on-site or off-site

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	2	3	4-5	>6
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the A point total box

10

A Point Total

B. For how many months does your facility have access to (and approval for) sufficient land disposal sites to provide proper land disposal?

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	6-12	12-23	24-35	>36
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the B point total box

0

B Point Total

C. Add together the A and B points values and place the sum in the box below at the right:

TOTAL POINT VALUE FOR PART 5:

10

(MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit # LA0042561

PART 6 NEW DEVELOPMENT

A. Please provide the following information for the total of all sewer lines extensions which were installed during the last year.

Design Population	5,553	
Design Flow	0.357	MGD
Design BOD	190	mg/l

B. Has an industry (or other development) moved into the community or expanded production in the past year, such that either flow or pollutant loadings to the sewerage system were significantly increased (5% or greater)?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants:

None

C. Is there any development (industrial, commercial or residential) anticipated in the next 2-3 years, such that either flow or pollutant loadings to the sewerage system could significantly increase?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants you anticipate:

None

D. Add together the point value checked in B and C and place in the box below.

TOTAL POINT VALUE FOR PART 6: 0 (max = 30)

Also enter this value or 30, whichever is less, on the point calculation table on page 16.

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PART 7: OPERATOR CERTIFICATION AND EDUCATION

- A. What is the name of the operator-in-charge for the reporting year?
Name: Josh Baudoin
- B. What is his/her certification number
Certification #: 07-259
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant?
Level Required: Class IV
- D. What is the level of certification of the operator-in-charge?
Level Certified: Class IV

E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant?

√ Check one box Yes = 0 points No = 5 0 points

Write 50 or 0 in the E. point total box 0 E Point Total

F. Has the operator-in-charge maintained recertification requirements during the reporting year?

√ Check one box Yes No

G. How many hours of continuing education has the operator-in-charge completed over the last two calendar years?

√ Check one box >12 hours = 0 points <12 hours = 5 0 points

Write 50 or 0 in the G point total box 0 G Point Total

H. Is there a written policy regarding continuing education and training for wastewater treatment plant employees?

√ Check one box Yes No

Explain

New operators are required to obtain state certification within 6 years of employment. All operators are required to maintain their licenses by attending training seminars, regional meetings, etc. LCG pays for all approved training.

I. What percentage of the continuing education expenses of the operator-in-charge were paid for:
By the permittee? 100% *By the operator?* _____

J. Add together E and G point values and place this sum in the box below at the right

TOTAL POINT VALUE FOR PART 7: 0 (MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit # LA0042561

PART 8: FINANCIAL STATUS

A. Are user charge Revenue sufficient to cover operations and maintenance expenses?

√ Check one box Yes No *If No, how are O&M cost being financed?*

B. What financial resources do you have available to pay for your wastewater improvements and reconstruction needs?

Wastewater improvements are funded by a combination of revenue from rates , current retained earnings, and bond proceeds.

Permit # LA0042561

PART 9: SUBJECTIVE EVALUATION

A. Collection System Maintenance

i. Describe what sewer system maintenance work has been done in the last year.

See Attachment B

ii. Describe what lift station work has been done in the last year.

See Attachment C

iii. What collection system improvements does the community have under consideration for the next 5 years

See Attachment D

B. If you have ponds, please answer the following questions:

- | | | |
|--|------------------------------|-----------------------------|
| i. Do you have duckweed buildup in your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ii. Do you mow your dikes regularly (at least monthly), to the water edge? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iii. Do you have bushes or trees growing on the dikes or in the ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iv. Do you have excess sludge buildup (> 1 foot) on the bottom of any ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| v. Do you exercise all of your valves? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| vi. Are your control manholes in good structural shape? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| vii. Do you maintain at least three feet of freeboard in all your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| viii. Do you visit your pond system, at least weekly? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

ATTACHMENT

B

ATTACHMENT B

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER COLLECTION DIVISION January 21, 2026

AMBASSADOR CAFFERY SEWER TREATMENT PLANT AREA

The following describes sewer system maintenance work performed during the MWPP reporting period of January 01, 2025 to December 31, 2025.

1. The wastewater collection employees, who are involved in our I/I reduction program, repaired 229 manholes, 63 service lines, 53 main lines, and installed 11 manhole inserts.
2. Vacuum-flusher truck crews cleaned 77 lift stations and performed scheduled maintenance on 299 gravity mains and service lines.
3. CCTV inspection crews inspected 102,922 feet of gravity main line segments consisting of both new and existing gravity mains, and 74 service laterals.
4. Wastewater Collection employees repaired 6 leaking force mains, performed 87 dye testing events, and 4 smoke testing events.
5. Crews flushed and vacuumed 131,623 feet of main line segments.
6. Performed visual inspections of 532 manholes.

ATTACHMENT

C

ATTACHMENT C

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER TREATMENT DIVISION

January 21, 2026

AMBASSADOR CAFFERY TREATMENT PLANT AREA

The following is a list of sewer maintenance work performed during the MWPP reporting period of January 1, 2025– December 31, 2025:

AMBASSADOR CAFFERY TREATMENT PLANT MAINTENANCE AND UPGRADES

- Installed a new 4" plant water line for dewatering machine.
- Replaced two 12" valves and piping final clarifier scum trough piping.
- Removal and replacement of weirs on primary splitter box.
- Installed a sludge holding tank and 4" sludge return line to primaries
- Replaced 2 gate valves in plant for water line. Repoured concrete and set rebar.
- Repaired decanter in SBR tank #3. Replaced actuator and pedestal.
- Primary Clarifier Tank #3 repair of chains and alignment
- Replaced chlorine Contact Chamber 10" valve replacement for skimmer line
- Replaced pista Grit System Vacuum Plug Valve replacement

LIFT STATION MAINTENANCE AND UPGRADES

- Ramblewood Lift Station- Replaced gravity line leading to lift station. Installed into casing. Installed a bulkhead to prevent soil erosion back to lift station.
- Eraste Landry Lift Station- Replaced suction piping and discharge. Gate and Check Valves. Installed 2 new suction lift pumps and panels. Replaced roof on building.
- Jimmie Lift Station- Replaced a 4" pump and piping in the lift station. Installed beams for pump removal.
- Duhon Lift Station- Replaced suction and discharge piping in wet well.
- Harwell Lift Station- Installed a 3-way crossover valve to increase pump efficiency.
- Wilfred Lift Station- Removed lift station building that was falling down. Installed parameter fence. Upgraded conduit and wiring.
- Autumn Oaks Lift Station- Installed new check and gate valves on discharge piping.
- West Congress Lift Station- Upgraded pump 1 and pump 2.
- Martial Lift Station- Replace discharge line on pump 1 and pump 2 due to corrosion.
- Republic Lift Station- Replaced empellers on submersible pump 1 and pump 2.

ATTACHMENT

D

ATTACHMENT D

LAFAYETTE CONSOLIDATED GOVERNMENT

January 1, 2026

PROJECTED SEWER SYSTEM IMPROVEMENTS FOR FISCAL YEARS 2026-2031

AMBASSADOR CAFFERY SEWER TREATMENT PLANT AREA

The following is a list of improvements that are expected to take place over the next five years.

- Install new SCADA systems at additional lift stations.
- Continue with I/I reduction program.
- Install new sewer systems in newly incorporated areas.
- Televising all sewer services involved with complaint calls and construction work.
Pipe burst or slip line all defective pipe.
- Perform SSES on lift station areas on a scheduled basis.
- Install new pumps and motors as needed to improve reliability.
- Implement the EPA CMOM Program.
- Increase capacity of 18" gravity line from the discharge of W. Congress Lift Station #47 to prevent sewer overflows.
- Upgrade Omega Lift Station #25 - bid March 2026
- Install permanent generator at Verot School Road Lift Station #189 - completed July 2025

Permit # LA0042561

C. Treatment Plants

i. Have the influent and effluent flow meters been calibrated in the last year?

Yes

No

✓ Check one box

Influent flow meter calibration date(s)

1/31/25, 2/28/25, 3/31/25, 4/29/25,
5/29/25, 6/30/25, 7/30/25, 8/28/25
9/30/25, 10/31/25, 11/26/25, 12/31/25,

Effluent flow meter calibration date(s)

ii. What problems, if any, have been experienced over the last year that have threatened treatment?

none

iii. Is your community presently involved in formal planning for treatment facility upgrade?

Yes

No

✓ Check one box

Permit # **LA0042561**

D. Preventive Maintenance

i. Does your plant have a written plan for preventive maintenance on major equipment items?

√ Check one box Yes No *If Yes, Please describe:*

We have a preventive maintenance program to track cost and frequency of equipment repair. We use vibration analysis to predict breakdown. We have an Operations and Maintenance Manual.

ii. Does this preventive maintenance program depict frequency of intervals, types of lubrication and other preventive maintenance tasks necessary for each piece of equipment?

√ Check one box Yes No

iii. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assured properly?

√ Check one box Yes No

E. Sewer Use Ordinance

i. Does your Community have a sewer use ordinance that limits or prohibits the discharge of excessive conventional pollutants (BOD, TSS or pH) or toxic substances to the sewer system from industries, commercial users and residences?

√ Check one box Yes No *If Yes, Please describe:*

There are prohibitions and limitations on use of the public sewer in Division 5 of the Sewers and Sewage Disposal Ordinance O-037-2004. There are also Pretreatment requirements which authorize the City to limit or prohibit discharges of excessive conventionals and/or toxic substances in Division 7 of the same Ordinance.

ii. Has it been necessary to enforce?

√ Check one box Yes No *If Yes, Please describe:*

Division 10 of Ordinance O-037-2004 Remedies of the Sewers and Sewage Disposal allows for enforcement of unauthorized discharges which have occurred from industrial users, commercial users and residences
Industrial dischargers to ACTP that had enforcement action issued in 2025:
A. NUMEROUS FOOD ESTABLISHMENTS THAT COULD NOT PRODUCE MANIFESTS INDICATING PROPER CLEANING OF THEIR GREASE TRAPS
B. ONE SIGNIFICANT INDUSTRIAL USER WAS CITED FOR INCORRECT REPORTING.

iii. Any additional comments about your treatment plant or collection system? (Attach additional sheets if necessary.)

√ Check one box Yes No *If Yes, Please describe:*

Permit #

LA0042561

POINT CALCULATION TABLE

	Actual Values	Maximum
Part 1: <i>Influent Flow/Loading</i>	<u>75</u>	80 points
Part 2: <i>Effluent Quantity / Plant Performance</i>	<u>0</u>	100 points
Part 3: <i>Age of WWFT</i>	<u>42.5</u>	50 points
5 <i>Overflows and Bypasses</i>	<u>65</u>	100 points
Part 5: <i>Ultimate Disposition of Sludge</i>	<u>10</u>	100 points
Part 6: <i>New Development</i>	<u>0</u>	30 points
Part 7: <i>Operator Certification Training</i>	<u>0</u>	100 points

TOTAL POINTS**192.5**

EAST WASTEWATER TREATMENT PLANT

PERMIT #: LA0036382

LOUISIANA

MUNICIPAL WATER POLLUTION PREVENTION

MWPP



Facility Name:	Lafayette Consolidated Gvt East WWTF
LPDES Permit Number:	LA0036382
Agency Interest (AI) Number:	4856
Address:	PO BOX 4017-C
	Lafayette, LA 70502
Parish:	Lafayette
(Person Completing Form) Name:	J. Shane Delcambre
Title:	Environmental Compliance Supervisor
Date Completed:	February 3, 2026

Permit #

LA0036382

PART 1: INFLUENT FLOW/LOADING (ALL PLANTS)

- A. List the average monthly volumetric flows and BOD loadings received at your facility during the last reporting year.

	Column 1 Average Monthly Flow (million gallons per day, MGD)		Column 2 Average Monthly BOD5 Concentration (mg/L)		Column 3 Average Monthly BOD5 Loading (pounds per day, lb/day)
Jan-25	3.40	x	219.0	x 8.34 =	6,210
Feb-25	3.85	x	151.9	x 8.34 =	4,877
Mar-25	3.02	x	240.0	x 8.34 =	6,045
Apr-25	3.41	x	108.3	x 8.34 =	3,080
May-25	5.09	x	142.8	x 8.34 =	6,062
Jun-25	3.96	x	173.5	x 8.34 =	5,730
Jul-25	3.33	x	176.9	x 8.34 =	4,913
Aug-25	2.45	x	169.0	x 8.34 =	3,453
Sep-25	2.36	x	153.8	x 8.34 =	3,027
Oct-25	2.08	x	209.7	x 8.34 =	3,638
Nov-25	1.91	x	302.8	x 8.34 =	4,823
Dec-25	2.72	x	225.8	x 8.34 =	5,122
Avg	3.13		189.5		4,748

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in MGD) x 8.34

- B. List the design flow and design BOD loading for your facility in the blanks below. If you are not aware of these design quantities, refer to your Operation and Maintenance (O&M) Manual or contact your consulting engineer.

Design Flow, MGD	4.00	x 0.90 =	3.60
Design BOD, lb/day	6,005 lb/day @ 180 mg/l	x 0.90 =	5,405 lb/day @ 180 mg/l

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C. How many months did the monthly flow (Column 1) to the wastewater treatment facility (WWTF) exceed 90% of design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	0	0	0	5	5	5	5	5	5	5	5

Write 0 or 5 in the C point total box 0 C Point Total

D. How many months did the monthly flow (Column 1) to the WWTF exceed the design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	15	15	15	15	15	15	15	15

Write 0, 5, 10 or 15 in the D point total box 10 D Point Total

E. How many months did the monthly BOD loading (Column 3) to the WWTF exceed 90% of design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	5	5	5	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the E point total box 5 E Point Total

F. How many months did the monthly BOD loading (Column 3) to the WWTF exceed the design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	10	20	30	40	50	50	50	50	50	50	50	50

Write 0, 10, 20, 30 40 or 50 in the F point total box 20 F Point Total

G. Add together each point total for C through F and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 1: 35 (max = 80)

Also enter this value or 80, whichever is less on the point calculation table on page 16.

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PART 2: EFFLUENT QUALITY / PLANT PERFORMANCE

A. List the monthly average effluent BOD and TSS concentrations produced by your facility during the last reporting year.

Month	Column 1 Average Monthly BOD (mg/l)	Column 2 Average Monthly TSS (mg/l)
January-25	2.0	3.8
February-25	2.0	3.7
March-25	2.0	4.0
April-25	2.7	5.0
May-25	3.8	5.8
June-25	2.4	4.0
July-25	2.0	3.8
August-25	2.1	3.6
September-25	2.6	4.7
October-25	2.0	4.0
November-25	2.0	3.8
December-25	3.3	4.9
Average	2.4	4.3

B. List the monthly average limits for your facility in the blanks below.

	Permit Limit		90% of Permit Limit
BOD, mg/l	1) 20 mg/L 2) 10 mg/L	x 0.90 =	1) 18.0 mg/L 2) 9.0 mg/L
TSS, mg/l	1) 20 mg/L 2) 15 mg/L	x 0.90 =	1) 18.0 mg/L 2) 13.5 mg/L

Season 1 = January - April
Season 2 = May - December

Permit #

LA0036382

C. Continuous Discharge to Surface Water.

i. How many months did the effluent BOD (Column 1) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the i point total box 0 i Point Total

ii. How many months did the effluent BOD (Column 1) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the ii point total box 0 ii Point Total

iii. How many months did the effluent TSS (Column 2) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the iii point total box 0 iii Point Total

iv. How many months did the effluent TSS (Column 2) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the iv point total box 0 iv Point Total

v. Add together each point total for I through iv and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 2: 0 (max = 100)

Also enter this value or 100, whichever is less on the point calculation table on page 16.

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D. Other Monitoring and Limitations

i. At any time in the past year was there any exceedance of a permit limit for other pollutant such as: ammonia-nitrogen, phosphorus, pH, total residual chlorine, or fecal coliform?

√ Check one box Yes No *If Yes, Please describe:*

ii. At any time in the past year was there a "failure" of a Biomonitoring (Whole Effluent Toxicity) test of the effluent?

√ Check one box Yes No *If Yes, Please describe:*

iii. At any time in the past year was there any exceedance of a permit limit for toxic substances?

√ Check one box Yes No *If Yes, Please describe:*

Permit #

LA0036382

PART 3: AGE OF THE WASTEWATER TREATMENT FACILITY

A. What year was the wastewater treatment facility constructed or last major expansion improvement completed?

	-	<u>1999</u>	=	
<i>Current Year</i>		<i>Answer to A</i>		<i>Age in Years</i>
<u>2025</u>		<u>2020</u>		<u>5</u>

Enter age in Part C below

B. Check the type of treatment facility that is employed.

	FACTOR
<input checked="" type="checkbox"/> Mechanical Treatment Plant (trickling filter, activated sludge, etc.) Specify Type: <u>Activated Sludge</u>	2.5
<input type="checkbox"/> Aerated Lagoon	2.0
<input type="checkbox"/> Stabilization Pond	1.5
<input type="checkbox"/> Other Specify Type: _____	1.0

C. Multiply the factor listed next to the type of facility your community employs by the age of your facility to determine the total points value for Part 3.

TOTAL POINT VALUE FOR PART 3 =

<u>2.5</u>	X	<u>5</u>	=	12.5
<i>Factor</i>		<i>Age</i>		

Also enter this value or 50, whichever is less, on the point calculation table on page 16.

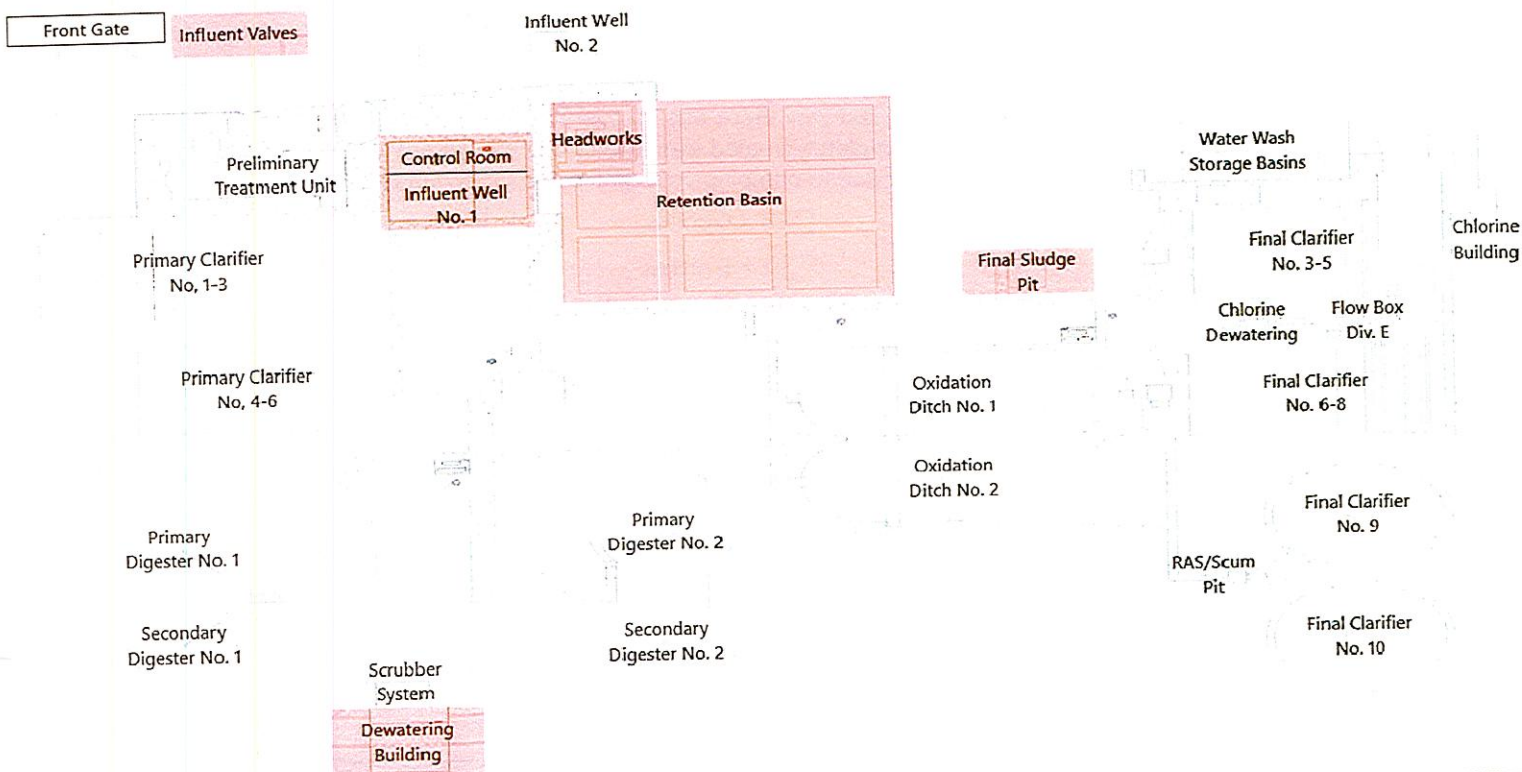
D. Attach a schematic of the treatment plant

See Attachment A.

ATTACHMENT

A

EAST SEWER TREATMENT PLANT



Permit # LA0036382

PART 4: OVERFLOWS AND BYPASSES

A.

- i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due to heavy rain:

5 ✓ Check one box 0 = 0 points 3 = 15 points
 1 = 5 points 4 = 30 points
 2 = 10 points 5 or more = 50 points

- ii. List the number of bypass, overflow, or unpermitted discharges shown in A(i) that were within the collection system and the number at the treatment plant.

Collection System 5 Treatment Plant 0

B.

- i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due equipment failure, either at the treatment plant or due to pumping problems in the collection system:

0 ✓ Check one box 0 = 0 points 3 = 15 points
 1 = 5 points 4 = 30 points
 2 = 10 points 5 or more = 50 points

- ii. List the number of bypass, overflow, or unpermitted discharges shown in B(i) that were within the collection system and the number at the treatment plant.

Collection System 0 Treatment Plant 0

- C. Specify whether the bypasses came from the city/village/town sewer system or from contract or tributary communities/sanitary districts, etc....

All overflows or bypasses came from city sewer collection system.

- D. Add the point value checked for A and B and place in the box below.

TOTAL POINT VALUE FOR PART 4: 50 (max =100)

Also enter this value or 100, whichever is less, on the point calculation table on page 16.

- E. List the person responsible (name and title) for reporting overflows, bypasses or unpermitted discharges to State and Federal authorities:

Brad Eldridge Manager Wastewater Operations	(337) 291-5921
Ray Fusilier Superintendent/ WW Collection	(337) 291-5751

Describe the procedure for gathering, compiling and reporting:

Lift station telemetry, plant meters and visual inspections utilized to track flows. Collection division personnel gather and submit pertinent information regarding collection system overflows to Treatment Section. Plant operators notify supervisors of treatment plant bypasses. Environmental compliance notifies agencies when necessary. Overflow reports are included with monthly DMRs.

Permit # **LA0036382**

PART 5: SLUDGE STORAGE AND DISPOSAL SITES

A. Sludge Storage

How many months of sludge storage capacity does your facility have available, either on-site or off-site

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	2	3	4-5	>6
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the A point total box 10 A Point Total

B. For how many months does your facility have access to (and approval for) sufficient land disposal sites to provide proper land disposal?

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	6-12	12-23	24-35	>36
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the B point total box 0 B Point Total

C. Add together the A and B points values and place the sum in the box below at the right:

TOTAL POINT VALUE FOR PART 5: 10 (MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit # LA0036382

PART 6 NEW DEVELOPMENT

A. Please provide the following information for the total of all sewer lines extensions which were installed during the last year.

Design Population	333	
Design Flow	0.010	MGD
Design BOD	200	mg/l

B. Has an industry (or other development) moved into the community or expanded production in the past year, such that either flow or pollutant loadings to the sewerage system were significantly increased (5% or greater)?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants:

None

C. Is there any development (industrial, commercial or residential) anticipated in the next 2-3 years, such that either flow or pollutant loadings to the sewerage system could significantly increase?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants you anticipate:

None

D. Add together the point value checked in B and C and place in the box below.

TOTAL POINT VALUE FOR PART 6: 0 (max = 30)

Also enter this value or 30, whichever is less, on the point calculation table on page 16.

Permit # **LA0036382**

PART 7: OPERATOR CERTIFICATION AND EDUCATION

- A. What is the name of the operator-in-charge for the reporting year?
Name: Jasper Francis / Casey Lavergne
- B. What is his/her certification number
Certification #: 10-0124 / 12-1242
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant?
Level Required: Class IV
- D. What is the level of certification of the operator-in-charge?
Level Certified: Class IV
- E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant?

√ Check one box Yes = 0 points No = 50 points

Write 0 or 50 in the E. point total box

0 E Point Total

- F. Has the operator-in-charge maintained recertification requirements during the reporting year?

√ Check one box Yes No

- G. How many hours of continuing education has the operator-in-charge completed over the last two calendar years?

√ Check one box >12 hours = 0 points < 12 hours = 50 points

Write 0 or 50 in the G point total box

0 G Point Total

- H. Is there a written policy regarding continuing education and training for wastewater treatment plant employees?

√ Check one box Yes No

Explain

New operators are required to obtain state certification within 6 years of employment. All operators are required to maintain their licenses by attending training seminars, regional meetings, etc. LCG pays for all approved training.

- I. What percentage of the continuing education expenses of the operator-in-charge were paid for:
By the permittee? 100% *By the operator?* _____

- J. Add together E and G point values and place this sum in the box below at the right

TOTAL POINT VALUE FOR PART 7: **0** (MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit #

LA0036382

PART 8: FINANCIAL STATUS

- A. Are user charge Revenue sufficient to cover operations and maintenance expenses?

√ Check one box

Yes

No

If No, how are O&M cost being financed?

- B. What financial resources do you have available to pay for your wastewater improvements and reconstruction needs?

Wastewater improvements are funded by a combination of revenue from rates , current retained earnings, and bond proceeds.

Permit # **LA0036382**

PART 9: SUBJECTIVE EVALUATION

A. Collection System Maintenance

i. Describe what sewer system maintenance work has been done in the last year.

See Attachment B

ii. Describe what lift station work has been done in the last year.

See Attachment C

iii. What collection system improvements does the community have under consideration for the next 5 years

See Attachment D

B. If you have ponds, please answer the following questions:

- i. Do you have duckweed buildup in your ponds?
- ii. Do you mow your dikes regularly (at least monthly), to the water edge?
- iii. Do you have bushes or trees growing on the dikes or in the ponds?
- iv. Do you have excess sludge buildup (> 1 foot) on the bottom of any ponds?
- v. Do you exercise all of your valves?
- vi. Are your control manholes in good structural shape?
- vii. Do you maintain at least three feet of freeboard in all your ponds?
- viii. Do you visit your pond system, at least weekly?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

ATTACHMENT

B

ATTACHMENT B

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER COLLECTION DIVISION January 21, 2026

EAST SEWER TREATMENT PLANT

The following describes sewer system maintenance work performed during the MWPP reporting period of January 01, 2025 to December 31, 2025.

1. Wastewater collection employees, who are involved in our I/I reduction program repaired 140 manholes, 61 service lines, 21 main lines, and installed 0 manhole inserts.
2. Vacuum-flusher truck crews cleaned 12 lift stations and performed scheduled maintenance on 164 gravity mains and service lines.
3. CCTV inspection crews inspected 193,318 feet of gravity main line segments consisting both new and existing gravity mains, and 142 service laterals.
4. Wastewater collection employees repaired 1 leaking force main, performed 45 dye testing events, and 1 smoke testing events.
5. Crews flushed and vacuumed 210,242 feet of main line segments.
6. Performed visual inspections of 392 manholes.

ATTACHMENT

C

ATTACHMENT C

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER TREATMENT DIVISION January 21, 2026

EAST SEWER TREATMENT PLANT AREA

The following is a list of sewer maintenance work performed during the MWPP reporting period of January 1, 2025– December 31, 2025:

EAST SEWER TREATMENT PLANT MAINTENANCE AND UPGRADES

- Installed new form for RAW pumps. Removed old piping for dry pit access.
- Replace 4" check valves in sludge return box
- Replaced skimmer pipes on final clarifiers.
- Replaced the circulation pump on the digester 1.
- Replaced broken water line around the plant.
- Upgraded perimeter fencing around ESTP and Conference Center.
- Upgraded area lighting within plant and conference center.
- Replaced digester Boiler recirculation pump.
- Upgraded control room and Chief Operator's office space
- Sealed weirs on final clarifier.
- Complete PLC upgrade for process equipment.
- Repaired crane hoist system in dewatering building.

LIFT STATION MAINTENANCE AND UPGRADES

- Louisiana Ave Lift Station- Repaired a wall on the back of the LS building.
- 7 Guidry Lift Station- Installed safety beams for dry pit entry.
- Palermo Lift Station-Replaced impellers on submersible pump 1 and pump 2.
- Mark Anthony Lift Station- Replaced Pump #2.
- Commercial Lift Station-Upgraded control panel and suction lift pump 1 and pump 2.

ATTACHMENT

D

ATTACHMENT D

LAFAYETTE CONSOLIDATED GOVERNMENT January 1, 2026

PROJECTED SEWER SYSTEM IMPROVEMENTS FOR FISCAL YEARS 2026-2031

EAST SEWER TREATMENT PLANT AREA

The following is a list of improvements that are expected to take place over the next five years.

- Install new SCADA systems at additional lift stations.
- Continue with I/I reduction program.
- Install new sewer systems in newly incorporated areas.
- Televising all sewer services involved with complaint calls and construction work.
Pipe burst or slip line all defective pipe.
- Perform SSES on lift station areas on a scheduled basis.
- Install new pumps and motors as needed to improve reliability.
- Implement the EPA CMOM Program.
- Perform a detailed investigation of all sewer lines on our preventive maintenance list and repair or relay those that can be done physically and economically.
- Rehab digester at treatment plant – bid 8/28/25
- Rehab odor control at treatment plant.
- Replace Beaver Park lift station #8 and include permanent generator – bid 12/19/24.

Permit # **LA0036382**

C. Treatment Plants

i. Have the influent and effluent flow meters been calibrated in the last year?

Yes

No

√ Check one box

Influent flow meter calibration date(s)

1/31/25, 2/28/25, 3/31/25, 4/30/25,
5/28/25, 6/25/25, 7/30/25, 8/27/25
9/30/25, 10/27/25, 11/26/25, 12/29/25,

Effluent flow meter calibration date(s)

ii. What problems, if any, have been experienced over the last year that have threatened treatment?

none

iii. Is your community presently involved in formal planning for treatment facility upgrade?

Yes

No

√ Check one box

Permit # **LA0036382**

D. Preventive Maintenance

i. Does your plant have a written plan for preventive maintenance on major equipment items?

√ Check one box Yes No *If Yes, Please describe:*

We have a preventive maintenance program to track cost and frequency of equipment repair. We use vibration analysis to predict breakdown. We have an Operations and Maintenance Manual.

ii. Does this preventive maintenance program depict frequency of intervals, types of lubrication and other preventive maintenance tasks necessary for each piece of equipment?

√ Check one box Yes No

iii. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assured properly?

√ Check one box Yes No

E. Sewer Use Ordinance

i. Does your Community have a sewer use ordinance that limits or prohibits the discharge of excessive conventional pollutants (BOD, TSS or pH) or toxic substances to the sewer system from industries, commercial users and residences?

√ Check one box Yes No *If Yes, Please describe:*

There are prohibitions and limitations on use of the public sewer in Division 5 of the Sewers and Sewage Disposal Ordinance O-037-2004. There are also Pretreatment requirements which authorize the City to limit or prohibit discharges of excessive conventionals and/or toxic substances in Division 7 of the same Ordinance.

ii. Has it been necessary to enforce?

√ Check one box Yes No *If Yes, Please describe:*

Division 10 of Ordinance O-037-2004 Remedies of the Sewers and Sewage Disposal allows for enforcement of unauthorized discharges which have occurred from industrial users, commercial users and residences.
Industrial dischargers to ESTP that had enforcement action issued in 2025 :
A. NUMEROUS FOOD ESTABLISHMENTS THAT COULD NOT PRODUCE MAINIFESTS INDICATING PROPER CLEANING OF THEIR GREASE TRAPS.
B. ONE INDUSTRIAL USER REGULATED UNDER THE BEST MANAGEMENT PROGRAM WAS CITED FOR LATE REPORTING.

iii. Any additional comments about your treatment plant or collection system? (Attach additional sheets if necessary.)

√ Check one box Yes No *If Yes, Please describe:*

Permit #

LA0036382

POINT CALCULATION TABLE

	Actual Values	Maximum
Part 1: <i>Influent Flow/Loading</i>	<u>35</u>	80 points
Part 2: <i>Effluent Quantity / Plant Performance</i>	<u>0</u>	100 points
Part 3: <i>Age of WWFT</i>	<u>12.5</u>	50 points
Part 4: <i>Overflows and Bypasses</i>	<u>50</u>	100 points
Part 5: <i>Ultimate Disposition of Sludge</i>	<u>10</u>	100 points
Part 6: <i>New Development</i>	<u>0</u>	30 points
Part 7: <i>Operator Certification Training</i>	<u>0</u>	100 points

TOTAL POINTS**107.5**

**NORTHEAST
WASTEWATER
TREATMENT PLANT**

PERMIT #: LA0036391

LOUISIANA

MUNICIPAL WATER POLLUTION PREVENTION

MWPP



Facility Name:	Lafayette Consolidated Gvt Northeast WWTF
LPDES Permit Number:	LA0036391
Agency Interest (AI) Number:	19462
Address:	PO BOX 4017-C
	Lafayette, LA 70502
Parish:	Lafayette
(Person Completing Form) Name:	J. Shane Delcambre
Title:	Environmental Compliance Supervisor
Date Completed:	February 3, 2026

LA0036391

Permit #

PART 1: INFLUENT FLOW/LOADING (ALL PLANTS)

A. List the average monthly volumetric flows and BOD loadings received at your facility during the last reporting year.

	Column 1 Average Monthly Flow (million gallons per day, MGD)		Column 2 Average Monthly BOD5 Concentration (mg/L)		Column 3 Average Monthly BOD5 Loading (pounds per day, lb/day)
Jan-25	1.15	x	153.7	x 8.34 =	1,474.1
Feb-25	1.19	x	158.1	x 8.34 =	1,569.1
Mar-25	1.22	x	196.0	x 8.34 =	1,994.3
Apr-25	1.39	x	139.3	x 8.34 =	1,614.8
May-25	1.65	x	147.5	x 8.34 =	2,029.7
Jun-25	1.36	x	150.6	x 8.34 =	1,708.2
Jul-25	1.24	x	158.0	x 8.34 =	1,634.0
Aug-25	1.22	x	246.3	x 8.34 =	2,506.1
Sep-25	1.16	x	173.3	x 8.34 =	1,676.6
Oct-25	1.19	x	222.0	x 8.34 =	2,203.3
Nov-25	1.15	x	193.8	x 8.34 =	1,858.7
Dec-25	1.21	x	202.7	x 8.34 =	2,045.5
Avg	1.26		178.4		1,860

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in MGD) x 8.34

B. List the design flow and design BOD loading for your facility in the blanks below. If you are not aware of these design quantities, refer to your Operation and Maintenance (O&M) Manual or contact your consulting engineer.

<i>Design Flow, MGD</i>	1.50	x 0.90 =	1.35
<i>Design BOD, lb/day</i>	2,502 lb/day @ 200 mg/l	x 0.90 =	2,252 lb/day @ 200 mg/l

Permit #

LA0036391

C. How many months did the monthly flow (Column 1) to the wastewater treatment facility (WWTF) exceed 90% of design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	0	0	0	5	5	5	5	5	5	5	5

Write 0 or 5 in the C point total box 0 C Point Total

D. How many months did the monthly flow (Column 1) to the WWTF exceed the design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	15	15	15	15	15	15	15	15

Write 0, 5, 10 or 15 in the D point total box 5 D Point Total

E. How many months did the monthly BOD loading (Column 3) to the WWTF exceed 90% of design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	5	5	5	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the E point total box 0 E Point Total

F. How many months did the monthly BOD loading (Column 3) to the WWTF exceed the design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	10	20	30	40	50	50	50	50	50	50	50	50

Write 0, 10, 20, 30 40 or 50 in the F point total box 10 F Point Total

G. Add together each point total for C through F and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 1: 15 (max = 80)

Also enter this value or 80, whichever is less on the point calculation table on page 16.

Permit #

LA0036391

PART 2: EFFLUENT QUALITY / PLANT PERFORMANCE

A. List the monthly average effluent BOD and TSS concentrations produced by your facility during the last reporting year.

Month	Column 1 Average Monthly BOD (mg/l)	Column 2 Average Monthly TSS (mg/l)
January-25	2.6	3.6
February-25	2.5	3.9
March-25	2.9	4.4
April-25	4.2	6.8
May-25	2.5	5.2
June-25	3.6	9.3
July-25	2.4	4.0
August-25	2.5	5.4
September-25	2.4	4.9
October-25	2.4	4.1
November-25	2.4	4.1
December-25	2.8	4.5
Average	2.8	5.0

B. List the monthly average limits for your facility in the blanks below.

	Permit Limit		90% of Permit Limit
BOD, mg/l	1) 20 mg/L 2) 10 mg/L	x 0.90 =	1) 18.0 mg/L 2) 9.0 mg/L
TSS, mg/l	1) 20 mg/L 2) 15 mg/L	x 0.90 =	1) 18.0 mg/L 2) 13.5 mg/L
	Season 1 = January - April Season 2 = May - December		

Permit #

LA0036391

C. Continuous Discharge to Surface Water.

i. How many months did the effluent BOD (Column 1) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the i point total box 0 i Point Total

ii. How many months did the effluent BOD (Column 1) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the ii point total box 0 ii Point Total

iii. How many months did the effluent TSS (Column 2) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the iii point total box 0 iii Point Total

iv. How many months did the effluent TSS (Column 2) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the iv point total box 0 iv Point Total

v. Add together each point total for I through iv and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 2: 0 (max = 100)

Also enter this value or 100, whichever is less on the point calculation table on page 16.

Permit # LA0036391

D. Other Monitoring and Limitations

i. At any time in the past year was there any exceedance of a permit limit for other pollutant such as: ammonia-nitrogen, phosphorus, pH, total residual chlorine, or fecal coliform?
√ Check one box Yes No *If Yes, Please describe:*

ii. At any time in the past year was there a "failure" of a Biomonitoring (Whole Effluent Toxicity) test of the effluent?
√ Check one box Yes No *If Yes, Please describe:*

iii. At any time in the past year was there any exceedance of a permit limit for toxic substances?
√ Check one box Yes No *If Yes, Please describe:*

Permit #

LA0036391

PART 3: AGE OF THE WASTEWATER TREATMENT FACILITY

A. What year was the wastewater treatment facility constructed or last major expansion improvement completed?

$$\begin{array}{rcccl}
 & & \underline{1990} & & \\
 \text{Current Year} & - & \text{Answer to A} & = & \text{Age in Years} \\
 \underline{2025} & & \underline{1990} & & \underline{35}
 \end{array}$$

Enter age in Part C below

B. Check the type of treatment facility that is employed.

	FACTOR
<input checked="" type="checkbox"/> Mechanical Treatment Plant (trickling filter, activated sludge, etc.) Specify Type: <u>Activated Sludge</u>	2.5
<input type="checkbox"/> Aerated Lagoon	10.0
<input type="checkbox"/> Stabilization Pond	1.5
<input type="checkbox"/> Other Specify Type: _____	1.0

C. Multiply the factor listed next to the type of facility your community employs by the age of your facility to determine the total points value for Part 3.

TOTAL POINT VALUE FOR PART 3 =

$$\frac{2.5}{\text{Factor}} \times \frac{35}{\text{Age}} = \boxed{50}$$

Also enter this value or 50, whichever is less, on the point calculation table on page 16.

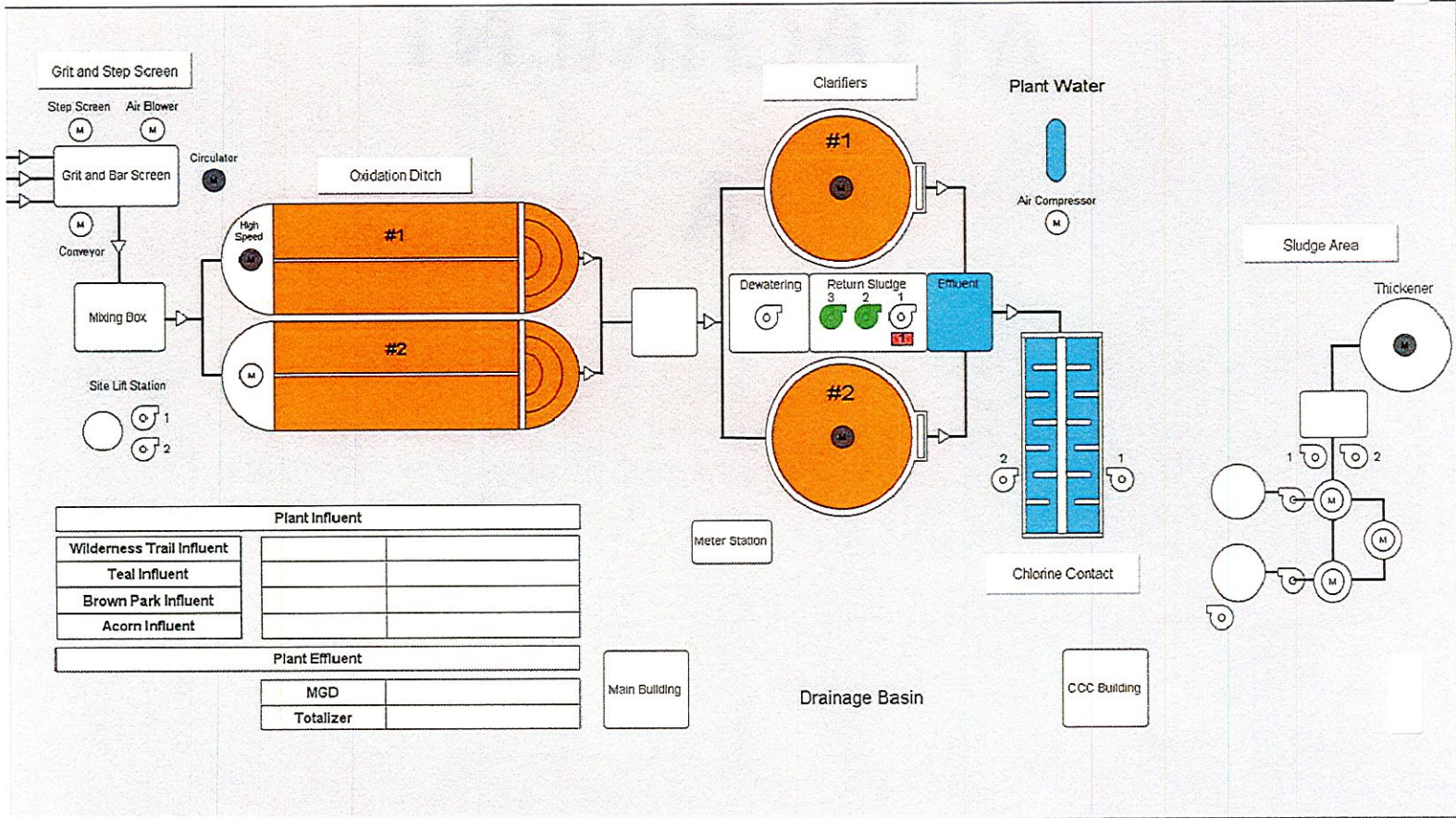
D. Attach a schematic of the treatment plant

See Attachment A.

ATTACHMENT

A

NORTHEAST TREATMENT PLANT



Permit # LA0036391

PART 4: OVERFLOWS AND BYPASSES

- A.
i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due to heavy rain:

1 ✓ Check one box 0 = 0 points 3 = 15 points
 1 = 5 points 4 = 30 points
 2 = 10 points 5 or more = 50 points

- ii. List the number of bypass, overflow, or unpermitted discharges shown in A(i) that were within the collection system and the number at the treatment plant.

Collection System 1 Treatment Plant 0

- B.
i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due equipment failure, either at the treatment plant or due to pumping problems in the collection system:

0 ✓ Check one box 0 = 0 points 3 = 15 points
 1 = 5 points 4 = 30 points
 2 = 10 points 5 or more = 50 points

- ii. List the number of bypass, overflow, or unpermitted discharges shown in B(i) that were within the collection system and the number at the treatment plant.

Collection System 0 Treatment Plant 0

- C. Specify whether the bypasses came from the city/village/town sewer system or from contract or tributary communities/sanitary districts, etc....

All overflows or bypasses came from city sewer collection system.

- D. Add together the point value checked in A and B and place in the box below.

TOTAL POINT VALUE FOR PART 4:

5

(max =100)

Also enter this value or 100, whichever is less, on the point calculation table on page 16.

- E. List the person responsible (name and title) for reporting overflows, bypasses or unpermitted discharges to State and Federal authorities:

Brad Eldridge Manager Wastewater Operations	(337) 291-5921
Ray Fusilier Superintendent/ WW Collection	(337) 291-5751

Describe the procedure for gathering, compiling and reporting:

Lift station telemetry, plant meters and visual inspections utilized to track flows. Collection division personnel gather and submit pertinent information regarding collection system overflows to Treatment Section. Plant operators notify supervisors of treatment plant bypasses. Environmental compliance notifies agencies when necessary. Overflow reports are included with monthly DMRs.

Permit # LA0036391

PART 5: SLUDGE STORAGE AND DISPOSAL SITES

A. Sludge Storage

How many months of sludge storage capacity does your facility have available, either on-site or off-site

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	2	3	4-5	>6
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the A point total box

30

A Point Total

B. For how many months does your facility have access to (and approval for) sufficient land disposal sites to provide proper land disposal?

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	6-12	12-23	24-35	>36
<i>points</i>	50	30	20	10	0

50

Write 0, 10, 20, 30, or 40 in the B point total box

0

B Point Total

C. Add together the A and B points values and place the sum in the box below at the right:

TOTAL POINT VALUE FOR PART 5:

30

(MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit # LA0036391

PART 6 NEW DEVELOPMENT

A. Please provide the following information for the total of all sewer lines extensions which were installed during the last year.

Design Population	1,363	
Design Flow	0.064	MGD
Design BOD	190	mg/l

B. Has an industry (or other development) moved into the community or expanded production in the past year, such that either flow or pollutant loadings to the sewerage system were significantly increased (5% or greater)?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants:

None

C. Is there any development (industrial, commercial or residential) anticipated in the next 2-3 years, such that either flow or pollutant loadings to the sewerage system could significantly increase?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants you anticipate:

None

D. Add together the point value checked in B and C and place in the box below.

TOTAL POINT VALUE FOR PART 6: 0 (max = 30)

Also enter this value or 30, whichever is less, on the point calculation table on page 16.

Permit # LA0036391

PART 7: OPERATOR CERTIFICATION AND EDUCATION

- A. What is the name of the operator-in-charge for the reporting year?
Name: Jasper Francis / Richard Gabriel
- B. What is his/her certification number
Certification #: 10-0124 / 17-552
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant?
Level Required: Class IV
- D. What is the level of certification of the operator-in-charge?
Level Certified: Class IV
- E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant?

√ Check one box Yes = 0 points No = 5 0 points

Write 50 or 0 in the E. point total box 0 E Point Total

- F. Has the operator-in-charge maintained recertification requirements during the reporting year?
- G. How many hours of continuing education has the operator-in-charge completed over the last two calendar years?

√ Check one box Yes No

√ Check one box >12 hours = 0 points <12 hours = 5 0 points

Write 50 or 0 in the G point total box 0 G Point Total

- H. Is there a written policy regarding continuing education and training for wastewater treatment plant employees?

√ Check one box Yes No

Explain

New operators are required to obtain state certification within 6 years of employment. All operators are required to maintain their licenses by attending training seminars, regional meetings, etc. LCG pays for all approved training.

- I. What percentage of the continuing education expenses of the operator-in-charge were paid for:
By the permittee? 100% *By the operator?* _____

J. Add together E and G point values and place this sum in the box below at the right
 TOTAL POINT VALUE FOR PART 7: 0 (MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit # LA0036391

PART 8: FINANCIAL STATUS

A. Are user charge Revenue sufficient to cover operations and maintenance expenses?

√ Check one box Yes No *If No, how are O&M cost being financed?*

B. What financial resources do you have available to pay for your wastewater improvements and reconstruction needs?

Wastewater improvements are funded by a combination of revenue from rates , current retained earnings, and bond proceeds.

Permit # LA0036391

PART 9: SUBJECTIVE EVALUATION

A. Collection System Maintenance

i. Describe what sewer system maintenance work has been done in the last year.

See Attachment B

ii. Describe what lift station work has been done in the last year.

See Attachment C

iii. What collection system improvements does the community have under consideration for the next 5 years

See Attachment D

B. If you have ponds, please answer the following questions:

- | | | |
|--|------------------------------|-----------------------------|
| i. Do you have duckweed buildup in your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ii. Do you mow your dikes regularly (at least monthly), to the water edge? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iii. Do you have bushes or trees growing on the dikes or in the ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iv. Do you have excess sludge buildup (> 1 foot) on the bottom of any ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| v. Do you exercise all of your valves? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| vi. Are your control manholes in good structural shape? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| vii. Do you maintain at least three feet of freeboard in all your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| viii. Do you visit your pond system, at least weekly? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

ATTACHMENT

B

ATTACHMENT B

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER COLLECTION DIVISION

January 21, 2026

NORTHEAST SEWER TREATMENT PLANT AREA

The following describes sewer system maintenance work performed during the MWPP reporting period of January 01, 2025 to December 31, 2025.

1. The wastewater collection employees, who are involved in our I/I reduction program, repaired 7 manholes, 3 service lines, 0 main lines, and installed 0 manhole inserts.
2. Vacuum-flusher truck crews cleaned 18 lift stations and performed scheduled maintenance on 48 gravity mains and service lines.
3. CCTV inspection crews inspected 60 feet of gravity main line segments consisting of both new and existing gravity mains, and 7 service laterals.
4. Wastewater Collection employees repaired 1 leaking force mains, performed 8 dye testing events, and 0 smoke testing events.
5. Crews flushed and vacuumed 1550 feet of main line segments.
6. Performed visual inspections of 0 manholes.

ATTACHMENT

C

ATTACHMENT C

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER TREATMENT DIVISION January 21, 2026

NORTHEAST SEWER TREATMENT PLANT AREA

The following is a list of sewer maintenance work performed during the MWPP reporting period of January 1, 2025– December 31, 2025:

NORTHEAST SEWER TREATMENT PLANT MAINTENANCE AND UPGRADES

- Replaced mixing gear drive.
- Installed aluminum scum trough fittings.
- Removed step screen for repair.
- Replaced handrails that were corroded around the headworks.
- Set 40' Connex building for office personnel.
- Repaired final Clarifier #2 Telescopic Box seal replacement.
- Replaced wasting and Return Valve actuators replaced.
- Upgraded street lighting for plant security and safety.
- Added additional cameras to plant facility.

LIFT STATION MAINTENANCE AND UPGRADES

- Brow Park Lift Station- Installed back up generator on site for emergency operations.

ATTACHMENT

D

ATTACHMENT D

LAFAYETTE CONSOLIDATED GOVERNMENT

January 1, 2026

PROJECTED SEWER SYSTEM IMPROVEMENTS FOR FISCAL YEARS 2026-2031

NORTHEAST SEWER TREATMENT PLANT AREA

The following is a list of improvements that are expected to take place over the next five years.

- Install new SCADA systems at additional lift stations.
- Continue with I/I reduction program.
- Install new sewer systems in newly incorporated areas.
- Televiser all sewer services involved with complaint calls and construction work. Pipe burst or slip line all defective pipe.
- Perform SSES on lift station areas on a scheduled basis.
- Install new pumps and motors as needed to improve reliability.
- Implement the EPA CMOM Program.
- Reroute the force main for Pont Des Mouton Lift Station #33 to bypass High Meadows Lift Station #49 eliminating capacity problem at High Meadows Lift Station #49 – completed July 2025.
- Upgrade plant bar screen and rehabilitate sludge holding tank – Notice to Proceed 5/15/24, expected completion December 2026.
- Increase treatment plant capacity.
- Rehabilitate clarifier headwork piping – Notice to Proceed 5/15/24, expected completion December 2026.

Permit # LA0036391

Treatment Plants

Have the influent and effluent flow meters been calibrated in the last year?

Yes No ✓ Check one box

1/31/25, 2/28/25, 3/30/25, 4/30/25,
5/28/25, 6/24/25, 7/30/25, 8/27/25
9/30/25, 10/31/25, 11/26/25, 12/29/25,

Influent flow meter calibration date(s)

Effluent flow meter calibration date(s)

What problems, if any, have been experienced over the last year that have threatened treatment?

none

Is your community presently involved in formal planning for treatment facility upgrade?

Yes No ✓ Check one box

Permit #

LA0036391

D. Preventive Maintenance

i. Does your plant have a written plan for preventive maintenance on major equipment items?

√ Check one box Yes No *If Yes, Please describe:*

We have a preventive maintenance program to track cost and frequency of equipment repair. We use vibration analysis to predict breakdown. We have an Operations and Maintenance Manual.

ii. Does this preventive maintenance program depict frequency of intervals, types of lubrication and other preventive maintenance tasks necessary for each piece of equipment?

√ Check one box Yes No

iii. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assured properly?

√ Check one box Yes No

E. Sewer Use Ordinance

i. Does your Community have a sewer use ordinance that limits or prohibits the discharge of excessive conventional pollutants (BOD, TSS or pH) or toxic substances to the sewer system from industries, commercial users and residences?

√ Check one box Yes No *If Yes, Please describe:*

There are prohibitions and limitations on use of the public sewer in Division 5 of the Sewers and Sewage Disposal Ordinance O-037-2004. There are also Pretreatment requirements which authorize the City to limit or prohibit discharges of excessive conventionals and/or toxic substances in Division 7 of the same Ordinance.

ii. Has it been necessary to enforce?

√ Check one box Yes No *If Yes, Please describe:*

Division 10 of Ordinance O-037-2004 Remedies of the Sewers and Sewage Disposal allows for enforcement of unauthorized discharges which have occurred from industrial users, commercial users and residences. Industrial dischargers to NETP that had enforcement action issued in 2025:
A. NUMEROUS FOOD ESTABLISHMENTS THAT COULD NOT PRODUCE MANIFESTS
 INDICATING PROPER CLEANING OF THEIR GREASE TRAPS

iii. Any additional comments about your treatment plant or collection system? (Attach additional sheets if necessary.)

√ Check one box Yes No *If Yes, Please describe:*

Permit #

LA0036391

POINT CALCULATION TABLE

	Actual Values	Maximum
Part 1: <i>Influent Flow/Loading</i>	<u>15</u>	80 points
Part 2: <i>Effluent Quantity / Plant Performance</i>	<u>0</u>	100 points
Part 3: <i>Age of WWFT</i>	<u>50</u>	50 points
Part 4: <i>Overflows and Bypasses</i>	<u>5</u>	100 points
Part 5: <i>Ultimate Disposition of Sludge</i>	<u>30</u>	100 points
Part 6: <i>New Development</i>	<u>0</u>	30 points
Part 7: <i>Operator Certification Training</i>	<u>0</u>	100 points

TOTAL POINTS**100.0**

SOUTH WASTEWATER TREATMENT PLANT

PERMIT #: LA0036374

LOUISIANA

MUNICIPAL WATER POLLUTION PREVENTION

MWPP



Facility Name:	Lafayette Consolidated Gvt South WWTF
LPDES Permit Number:	LA0036374
Agency Interest (AI) Number:	20125
Address:	PO BOX 4017-C
	Lafayette, LA 70502
Parish:	Lafayette
(Person Completing Form) Name:	J. Shane Delcambre
Title:	Environmental Compliance Supervisor
Date Completed:	February 3, 2026

Permit #

LA0036374

PART 1: INFLUENT FLOW/LOADING (ALL PLANTS)

A. List the average monthly volumetric flows and BOD loadings received at your facility during the last reporting year.

	Column 1 Average Monthly Flow (million gallons per day, MGD)		Column 2 Average Monthly BOD5 Concentration (mg/L)		Column 3 Average Monthly BOD5 Loading (pounds per day, lb/day)
Jan-25	6.00	x	271.0	x 8.34 =	13,560.8
Feb-25	6.77	x	200.8	x 8.34 =	11,337.5
Mar-25	5.38	x	178.9	x 8.34 =	8,027.1
Apr-25	6.08	x	167.8	x 8.34 =	8,508.7
May-25	7.51	x	105.2	x 8.34 =	6,589.0
Jun-25	6.75	x	164.9	x 8.34 =	9,283.0
Jul-25	6.40	x	149.5	x 8.34 =	7,979.7
Aug-25	5.66	x	218.9	x 8.34 =	10,333.0
Sep-25	5.24	x	251.7	x 8.34 =	10,999.7
Oct-25	4.24	x	225.4	x 8.34 =	7,970.5
Nov-25	4.29	x	277.1	x 8.34 =	9,914.3
Dec-25	5.74	x	238.4	x 8.34 =	11,412.6
Avg	5.84		204.1		9,660

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in MGD) x 8.34

B. List the design flow and design BOD loading for your facility in the blanks below. If you are not aware of these design quantities, refer to your Operation and Maintenance (O&M) Manual or contact your consulting engineer.

Design Flow, MGD	7.00	x 0.90 =	6.30
Design BOD, lb/day	10,503 lb/day @ 180 mg/l	x 0.90 =	9,457 lb/day @ 180 mg/l

Permit #

LA0036374

- C. How many months did the monthly flow (Column 1) to the wastewater treatment facility (WWTF) exceed 90% of design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	0	0	0	5	5	5	5	5	5	5	5

Write 0 or 5 in the C point total box C Point Total

- D. How many months did the monthly flow (Column 1) to the WWTF exceed the design flow? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	5	5	10	10	15	15	15	15	15	15	15	15

Write 0, 5, 10 or 15 in the D point total box D Point Total

- E. How many months did the monthly BOD loading (Column 3) to the WWTF exceed 90% of design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	0	5	5	5	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the E point total box E Point Total

- F. How many months did the monthly BOD loading (Column 3) to the WWTF exceed the design loading? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

<i>months</i>	0	1	2	3	4	5	6	7	8	9	10	11	12
<i>points</i>	0	10	20	30	40	50	50	50	50	50	50	50	50

Write 0, 10, 20, 30 40 or 50 in the F point total box F Point Total

- G. Add together each point total for C through F and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 1: (max = 80)

Also enter this value or 80, whichever is less on the point calculation table on page 16.

Permit #

LA0036374

PART 2: EFFLUENT QUALITY / PLANT PERFORMANCE

A. List the monthly average effluent BOD and TSS concentrations produced by your facility during the last reporting year.

Month	Column 1 Average Monthly BOD (mg/l)	Column 2 Average Monthly TSS (mg/l)
January-25	2.4	4.4
February-25	2.3	4.5
March-25	2.5	4.9
April-25	2.1	4.0
May-25	2.4	4.4
June-25	2.4	4.0
July-25	2.6	5.2
August-25	2.4	4.8
September-25	2.1	3.9
October-25	2.3	3.9
November-25	2.1	3.8
December-25	2.1	7.2
Average	2.3	4.6

B. List the monthly average limits for your facility in the blanks below.

	Permit Limit		90% of Permit Limit
<i>BOD, mg/l</i>	1) 20 mg/L 2) 10 mg/L	x 0.90 =	1) 18.0 mg/L 2) 9.0 mg/L
<i>TSS, mg/l</i>	1) 20 mg/L 2) 15 mg/L	x 0.90 =	1) 18.0 mg/L 2) 13.5 mg/L

Season 1 = January - April

Permit #

LA0036374

C. Continuous Discharge to Surface Water.

- i. How many months did the effluent BOD (Column 1) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

months	0	1	2	3	4	5	6	7	8	9	10	11	12
points	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the i point total box i Point Total

- ii. How many months did the effluent BOD (Column 1) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

months	0	1	2	3	4	5	6	7	8	9	10	11	12
points	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the ii point total box ii Point Total

- iii. How many months did the effluent TSS (Column 2) exceed 90% of the permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

months	0	1	2	3	4	5	6	7	8	9	10	11	12
points	0	0	10	20	30	40	40	40	40	40	40	40	40

Write 0, 10, 20, 30 or 40 in the iii point total box iii Point Total

- iv. How many months did the effluent TSS (Column 2) exceed permit limits? Circle the number of months and the corresponding point total. Write the point total in the box below at the right.

months	0	1	2	3	4	5	6	7	8	9	10	11	12
points	0	5	5	10	10	10	10	10	10	10	10	10	10

Write 0, 5 or 10 in the iv point total box iv Point Total

- v. Add together each point total for I through iv and place this sum in the box below at the right.

TOTAL POINT VALUE FOR PART 2: (max = 100)

Also enter this value or 100, whichever is less on the point calculation table on page 16.

Permit # LA0036374

D. Other Monitoring and Limitations

i. At any time in the past year was there any exceedance of a permit limit for other pollutant such as: ammonia-nitrogen, phosphorus, pH, total residual chlorine, or fecal coliform?

√ Check one box Yes No *If Yes, Please describe:*

ii. At any time in the past year was there a "failure" of a Biomonitoring (Whole Effluent Toxicity) test of the effluent?

√ Check one box Yes No *If Yes, Please describe:*

iii. At any time in the past year was there any exceedance of a permit limit for toxic substances?

√ Check one box Yes No *If Yes, Please describe:*

Permit #

LA0036374

PART 3: AGE OF THE WASTEWATER TREATMENT FACILITY

A. What year was the wastewater treatment facility constructed or last major expansion improvement completed?

$$\begin{array}{rcccl}
 & & \underline{2023} & & \\
 \text{Current Year} & - & \text{Answer to A} & = & \text{Age in Years} \\
 \\
 \underline{2025} & & \underline{2023} & & \underline{2}
 \end{array}$$

Enter age in Part C below

B. Check the type of treatment facility that is employed.

	FACTOR
<input checked="" type="checkbox"/> Mechanical Treatment Plant (trickling filter, activated sludge, etc.) Specify Type: <u>Activated Sludge</u>	2.5
<input type="checkbox"/> Aerated Lagoon	2.0
<input type="checkbox"/> Stabilization Pond	1.5
<input type="checkbox"/> Other Specify Type: _____	1.0

C. Multiply the factor listed next to the type of facility your community employs by the age of your facility to determine the total points value for Part 3.

TOTAL POINT VALUE FOR PART 3 =

$$\frac{2.5}{\text{Factor}} \times \frac{2}{\text{Age}} = \boxed{5}$$

Also enter this value or 50, whichever is less, on the point calculation table on page 16.

D. Attach a schematic of the treatment plant

See Attachment A.

ATTACHMENT

A

Permit # LA0036374

PART 4: OVERFLOWS AND BYPASSES

A.

i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due to heavy rain:

34 Check one box

<input type="checkbox"/> 0 = 0 points	<input type="checkbox"/> 3 = 15 points
<input type="checkbox"/> 1 = 5 points	<input type="checkbox"/> 4 = 30 points
<input type="checkbox"/> 2 = 10 points	<input checked="" type="checkbox"/> 5 or more = 50 points

ii. List the number of bypass, overflow, or unpermitted discharges shown in A(i) that were within the collection system and the number at the treatment plant.

Collection System	<u>34</u>	Treatment Plant	<u>0</u>
-------------------	-----------	-----------------	----------

B.

i. List the number of times in the last year there was an overflow, bypass, or unpermitted discharge of untreated or incompletely treated wastewater due equipment failure, either at the treatment plant or due to pumping problems in the collection system:

0 Check one box

<input checked="" type="checkbox"/> 0 = 0 points	<input type="checkbox"/> 3 = 15 points
<input type="checkbox"/> 1 = 5 points	<input type="checkbox"/> 4 = 30 points
<input type="checkbox"/> 2 = 10 points	<input type="checkbox"/> 5 or more = 50 points

ii. List the number of bypass, overflow, or unpermitted discharges shown in B(i) that were within the collection system and the number at the treatment plant.

Collection System	<u>0</u>	Treatment Plant	<u>0</u>
-------------------	----------	-----------------	----------

C. Specify whether the bypasses came from the city/village/town sewer system or from contract or tributary communities/sanitary districts, etc....

All overflows or bypasses came from city sewer collection system.

D. Add together the point value checked in A and B and place in the box below.

TOTAL POINT VALUE FOR PART 4:

50

(max =100)

Also enter this value or 100, whichever is less, on the point calculation table on page 16.

E. List the person responsible (name and title) for reporting overflows, bypasses or unpermitted discharges to State and Federal authorities:

Brad Eldridge Manager Wastewater Operations	(337) 291-5921
Ray Fusilier Superintendent/ WW Collection	(337) 291-5751

Describe the procedure for gathering, compiling and reporting:

Lift station telemetry, plant meters and visual inspections utilized to track flows. Collection division personnel gather and submit pertinent information regarding collection system overflows to Treatment Section. Plant operators notify supervisors of treatment plant bypasses. Environmental compliance notifies agencies when necessary. Overflow reports are included with monthly DMRs.

Permit # **LA0036374****PART 5: SLUDGE STORAGE AND DISPOSAL SITES****A. Sludge Storage**

How many months of sludge storage capacity does your facility have available, either on-site or off-site

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	2	3	4-5	>6
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the A point total box

10

A Point Total

B. For how many months does your facility have access to (and approval for) sufficient land disposal sites to provide proper land disposal?

Circle the number of months and the corresponding point total. Write the point total in the box below at the right

<i>months</i>	< 2	6-12	12-23	24-35	>36
<i>points</i>	50	30	20	10	0

Write 0, 10, 20, 30, or 40 in the B point total box

0

B Point Total

C. Add together the A and B points values and place the sum in the box below at the right:

TOTAL POINT VALUE FOR PART 5:

10

(MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit #

LA0036374

PART 6 NEW DEVELOPMENT

A. Please provide the following information for the total of all sewer lines extensions which were installed during the last year.

Design Population	<u>1,680</u>	
Design Flow	<u>0.056</u>	MGD
Design BOD	<u>190</u>	mg/l

B. Has an industry (or other development) moved into the community or expanded production in the past year, such that either flow or pollutant loadings to the sewerage system were significantly increased (5% or greater)?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants:

None

C. Is there any development (industrial, commercial or residential) anticipated in the next 2-3 years, such that either flow or pollutant loadings to the sewerage system could significantly increase?

√ Check one box Yes = 15 points No = 0 points

If Yes, Please describe:

List any new pollutants you anticipate:

None

D. Add together the point value checked in B and C and place in the box below.

TOTAL POINT VALUE FOR PART 6: 0 (max = 30)

Also enter this value or 30, whichever is less, on the point calculation table on page 16.

Permit # **LA0036374**

PART 7: OPERATOR CERTIFICATION AND EDUCATION

- A. What is the name of the operator-in-charge for the reporting year?
Name: Richard Gabriel / Charles Corkern
- B. What is his/her certification number
Certification #: 17-552 / 14-1843
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant?
Level Required: Class IV
- D. What is the level of certification of the operator-in-charge?
Level Certified: Class IV
- E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant?

√ Check one box Yes = 0 points No = 5 0 points

Write 50 or 0 in the E. point total box

0

E Point Total

- F. Has the operator-in-charge maintained recertification requirements during the reporting year?

√ Check one box Yes No

- G. How many hours of continuing education has the operator-in-charge completed over the last two calendar years?

√ Check one box >12 hours = 0 points <12 hours = 5 0 points

Write 50 or 0 in the G point total box

0

G Point Total

- H. Is there a written policy regarding continuing education and training for wastewater treatment plant employees?

√ Check one box Yes No

Explain

New operators are required to obtain state certification within 6 years of employment. All operators are required to maintain their licenses by attending training seminars, regional meetings, etc. LCG pays for all approved training.

- I. What percentage of the continuing education expenses of the operator-in-charge were paid for:
By the permittee? 100% By the operator? _____

- J. Add together E and G point values and place this sum in the box below at the right

TOTAL POINT VALUE FOR PART 7:

0

(MAX = 100)

Also enter this value or 100, whichever is less, on the point calculation table page 16

Permit # LA0036374

PART 8: FINANCIAL STATUS

A. Are user charge Revenue sufficient to cover operations and maintenance expenses?

√ Check one box Yes No *If No, how are O&M cost being financed?*

B. What financial resources do you have available to pay for your wastewater improvements and reconstruction needs?

Wastewater improvements are funded by a combination of revenue from rates , current retained earnings, and bond proceeds.

Permit # LA0036374

PART 9: SUBJECTIVE EVALUATION

A. Collection System Maintenance

i. Describe what sewer system maintenance work has been done in the last year.

See Attachment B

ii. Describe what lift station work has been done in the last year.

See Attachment C

iii. What collection system improvements does the community have under consideration for the next 5 years

See Attachment D

B. If you have ponds, please answer the following questions:

- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|--------------------------|-----|--------------------------|----|
| <ul style="list-style-type: none"> i. <i>Do you have duckweed buildup in your ponds?</i> ii. <i>Do you mow your dikes regularly (at least monthly), to the water edge?</i> iii. <i>Do you have bushes or trees growing on the dikes or in the ponds?</i> iv. <i>Do you have excess sludge buildup (> 1 foot) on the bottom of any ponds?</i> v. <i>Do you exercise all of your valves?</i> vi. <i>Are your control manholes in good structural shape?</i> vii. <i>Do you maintain at least three feet of freeboard in all your ponds?</i> viii. <i>Do you visit your pond system, at least weekly?</i> | <table border="0"> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> <tr><td><input type="checkbox"/></td><td>Yes</td><td><input type="checkbox"/></td><td>No</td></tr> </table> | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

ATTACHMENT

B

ATTACHMENT B

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER COLLECTION DIVISION

January 21, 2026

SOUTH SEWER TREATMENT PLANT AREA

The following describes sewer system maintenance work performed during the MWPP reporting period of January 01, 2025 to December 31, 2025.

1. The wastewater collection employees, who are involved in our I/I reduction program, repaired 24 manholes, 53 service lines, 30 main lines, and installed 0 manhole inserts.
2. Vacuum-flusher truck crews cleaned 16 lift stations and performed scheduled maintenance on 286 gravity mains and service lines.
3. CCTV inspection crews inspected 9,596 feet of gravity main line segments consisting of both new and existing gravity mains, and 76 service laterals.
4. Wastewater Collection employees repaired 3 leaking force main, performed 41 dye testing events, and 3 smoke testing events.
5. Crews flushed and vacuumed 43,953 feet of main line segments.
6. Performed visual inspections of 94 manholes.

ATTACHMENT

C

ATTACHMENT C

LAFAYETTE CONSOLIDATED GOVERNMENT WASTEWATER TREATMENT DIVISION

January 21, 2026

SOUTH SEWER TREATMENT PLANT AREA

The following is a list of sewer maintenance work performed during the MWPP reporting period of January 1, 2025– December 31, 2025:

SOUTH SEWER TREATMENT PLANT MAINTENANCE AND UPGRADES

- Replaced Rotatry drum screen for pre treatment.
- Repaired broken aerators in basin. Blocked off leaking air ports.
- Upgraded blower #5 on west side of plant.
- Upgraded RAW pump to clear water flush to prevent overheating of pumps.
- Installed 2 split filters on rotating equipment.
- Rewound transfer pumps on digester 1 and 2.

LIFT STATION MAINTENANCE AND UPGRADES

- Greenbriar Lift Station - Installed safety aluminum access hatch.
- 20 Old Maurice Lift Station - Replaced check valves on pump 2 and 3. Upgraded switching actuators for flow to SS or ACTP. Repaired 18” forcemain running through Moncus Park. Replaced dry well sump pump 2 and 3. Installed air relief valves on 24” line.
- Eric Lift Station - Replaced submersible pump and control panel.
- Keller Lift Station - Removed dead trees from station.

ATTACHMENT

D

ATTACHMENT D

LAFAYETTE CONSOLIDATED GOVERNMENT

January 1, 2026

PROJECTED SEWER SYSTEM IMPROVEMENTS FOR FISCAL YEARS 2026-2031

SOUTH SEWER TREATMENT PLANT AREA

The following is a list of improvements that are expected to take place over the next five years.

- Install new SCADA systems at additional lift stations.
- Continue with I/I reduction program.
- Install new sewer systems in newly incorporated areas.
- Televising all sewer services involved with complaint calls and construction work.
Pipe burst or slip line all defective pipe.
- Perform SSES on lift station areas on a scheduled basis.
- Install new pumps and motors as needed to improve reliability.
- Implement the EPA CMOM Program.
- Increase capacity of the Treatment Plant.
- CIPP defective clay and large concrete sewer mains.
- Odor control at treatment plant.
- Install large lift station to handle downtown developments – bid 5/1/25
- Replace South College Lift Station #23 – bid March 2026
- Install permanent generator at Acacia Lift Station – complete construction March 2026

Permit # LA0036374

C. Treatment Plants

i. Have the influent and effluent flow meters been calibrated in the last year?

Yes

No

√ Check one box

Influent flow meter calibration date(s)

1/31/25, 2/28/25, 3/31/25, 4/30/25,
5/30/25, 6/30/25, 7/30/25, 8/25/25
9/30/25, 10/31/25, 11/26/25, 12/29/25.

Effluent flow meter calibration date(s)

ii. What problems, if any, have been experienced over the last year that have threatened treatment?

none

iii. Is your community presently involved in formal planning for treatment facility upgrade?

Yes

No

√ Check one box

We have both a facility and master plan in place. Engineering firms have been selected to develop plans and specification for SSTEP upgrade.

Permit # **LA0036374**

D. Preventive Maintenance

i. Does your plant have a written plan for preventive maintenance on major equipment items?

√ Check one box Yes No *If Yes, Please describe:*

We have a preventive maintenance program to track cost and frequency of equipment repair. We use vibration analysis to predict breakdown. We have an Operations and Maintenance Manual.

ii. Does this preventive maintenance program depict frequency of intervals, types of lubrication and other preventive maintenance tasks necessary for each piece of equipment?

√ Check one box Yes No

iii. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assured properly?

√ Check one box Yes No

E. Sewer Use Ordinance

i. Does your Community have a sewer use ordinance that limits or prohibits the discharge of excessive conventional pollutants (BOD, TSS or pH) or toxic substances to the sewer system from industries, commercial users and residences?

√ Check one box Yes No *If Yes, Please describe:*

There are prohibitions and limitations on use of the public sewer in Division 5 of the Sewers and Sewage Disposal Ordinance O-037-2004. There are also Pretreatment requirements which authorize the City to limit or prohibit discharges of excessive conventionals and/or toxic substances in Division 7 of the same Ordinance.

ii. Has it been necessary to enforce?

√ Check one box Yes No *If Yes, Please describe:*

Division 10 of Ordinance O-037-2004 Remedies of the Sewers and Sewage Disposal allows for enforcement of unauthorized discharges which have occurred from industrial users, commercial users and residences.

Industrial dischargers to SSTP that had enforcement action issued in 2025 :

A. NUMEROUS FOOD ESTABLISHMENTS THAT COULD NOT PRODUCE MANIFESTS INDICATING PROPER CLEANING OF THEIR GREASE TRAPS
B. TWO SIGNIFICANT INDUSTRIAL USERS WERE CITED FOR INCORRECT AND LATE REPORTING, AND ALSO TOTAL SILVER EXCEEDANCE.

iii. Any additional comments about your treatment plant or collection system? (Attach additional sheets if necessary.)

√ Check one box Yes No *If Yes, Please describe:*

Permit # **LA0036374**

POINT CALCULATION TABLE

	Actual Values	Maximum
Part 1: <i>Influent Flow/Loading</i>	<u>55</u>	80 points
Part 2: <i>Effluent Quantity / Plant Performance</i>	<u>0</u>	100 points
Part 3: <i>Age of WWFT</i>	<u>5</u>	50 points
Part 4: <i>Overflows and Bypasses</i>	<u>50</u>	100 points
Part 5: <i>Ultimate Disposition of Sludge</i>	<u>10</u>	100 points
Part 6: <i>New Development</i>	<u>0</u>	30 points
Part 7: <i>Operator Certification Training</i>	<u>0</u>	100 points
TOTAL POINTS	120.0	

Internal Memorandum

Lafayette Utilities System
Wastewater Treatment Division (7060)

TO: Rachel Godeaux **DATE:** February 9, 2026

THRU: Jeffrey B. Stewart *JBS*
02/12/26

FROM: Brad Eldridge

SUBJECT: **March 10, 2026 City Agenda Item: Municipal Water Pollution Prevention Environmental Audit Reports**

INTRODUCTION

The required Municipal Water Pollution Prevention (MWPP) Environmental Audit Reports have been prepared for our four (4) wastewater treatment plants. Preparation of the MWPP Audit Reports is required annually of all municipalities with Publicly Owned Treatment Works (POTWs). The MWPP Audit Report is comprehensive in scope and covers all aspects of the wastewater collection and treatment system.

The purpose of the audit report is to thoroughly evaluate the physical system and its operation in an attempt to define those areas that may be deficient or may become deficient in the near future. By performing this extensive audit annually, the Governing Authority should be able to plan and carry out necessary upgrades and rehabilitation to ensure current and future compliance with federal and state discharge permit limits.

In addition to the audit reports, it is required that the Lafayette City Council pass a resolution stipulating that these reports have been reviewed and appropriate steps will be taken to ensure proper operation and maintenance of the collection and treatment system. It is to be emphasized that the discharge permits not only stipulate the level of treatment required before discharge, but also describes the appropriate operation of the pretreatment and sludge landfarming programs. Thus, all aspects of these programs must be considered when determining current and future compliance with the discharge permits. The reports will be kept on file for review at each wastewater treatment facility as per regulations.

SPECIFICS OF THE MWPP ENVIRONMENTAL REPORTS

The following information is gathered and reviewed for each treatment plant area and entered into the MWPP Audit Report:

- Age and general condition of each treatment plant.
- Volume of incoming wastewater into each plant compared to its design capacity.
- Are treatment plants consistently meeting their discharge permit limits?
- Age and general condition of the wastewater collection system.
- Are there existing inflow/infiltration (I/I) problems within the collection system? Do these issues cause untreated wastewater to be discharged into the environment by way of overflows in the collection system or treatment plants?
- How does the municipality handle industrial discharges into the system? Is there a pretreatment program in place?
- What sludge treatment systems are used and how is sludge disposed by the municipality?
- What are the staffing needs of the municipality? Is the staff trained and certified?
- Does the municipality have adequate funding to operate and maintain the system?
- What improvements or repairs have been completed within the last year? What is being considered for the next 5 years?

RESULTS OF 2025 LUS MWPP ENVIRONMENTAL AUDIT REPORTS

While the overall results of the reports were positive and LUS is currently meeting required discharge permit limits, the MWPP Audit Report does highlight the collection system as an area where additional work is required. Inflow and infiltration (I/I) is entering the collection system through cracks or breaks in both public collection lines and private customer services. Generally, these issues are seen in older areas of the system. The cracks allow rainwater and ground water to enter the wastewater system which could potentially overload the capacity of the collection system or treatment plants and in turn allow untreated wastewater to be discharged into the environment.


LUS implemented a CMOM Program imposed by Administrative Order (AO) issued by the EPA in 2018. Beginning on November 1, 2020, LUS is required to televise all collection lines in its system within a 10-year period and make repairs within 3 years after they are identified.

LUS has been actively working, both internally and with outside contractors, to locate and correct these issues throughout its system. Within recent years LUS has implemented a Scada System (Supervisory Control and Data Acquisition System) on all its lift stations. The SCADA System has enabled us to identify areas where large quantities of I/I are entering our collection system during rain events. LUS has used this information to focus our efforts in these areas to find and repair the deficiencies.

As per the requirements of our LPDES Permit for our treatment facilities we request that the attached documentation be presented to Council for approval by Resolution. After the passing of this resolution LUS will forward the report and resolution to LA DEQ to meet our April 1st deadline.

The Utilities Department is governed by the City; therefore, please place this on the agenda for the Lafayette City Council for introduction and final adoption on March 10, 2026.

Should you have any questions regarding this report please feel free to contact me.



Brad Eldridge, PE
Wastewater Operations Manager
Lafayette Utilities System

Attachments

