



DATE: 12/10/2024

TIME: 9:00 a.m.

LOCATION: Executive Boardroom

COMMITTEE MEMBERS: Maurice Sholas, M.D., Ph.D., Chair | Tamika Duplessis, Ph.D., Vice Chair |  
| Robin Barnes | Tyler Antrup | H. Davis Cole

# Audit Committee Meeting Agenda

## PUBLIC MEETING

All meetings are open to the public, and we encourage your attendance.  
Those interested can join in person or virtually.

**Join In-Person:** Executive Board Room, Second Floor  
625 St. Joseph St., New Orleans, LA 70165

**Join Virtually:** <https://www.swbno.org/BoardMeetings>

E-Public comments will be accepted via <https://www.swbno.org/BoardMeetings>.  
All e-public comments must be received at least 2 hours prior to the meeting. Comments  
will be read verbatim into the record.

## I. Roll Call

## II. Presentation Items

- A. MWPP Environmental Audit — Ann Wilson, Environmental Affairs Chief
- B. 4th Quarter Audit Department Update – Chief Audit Executive, Ed Sutherland

## III. Action Items

- A. Resolution (R-090-2024) East Bank Treatment Plant MWPP Environmental Audit
- B. Resolution (R-091-2024) West Bank Treatment Plant MWPP Environmental Audit

## IV. Public Comment

## V. Adjournment

---

**Board of Directors:** Hon. LaToya Cantrell, President, Lynes R. Sloss, President Pro Tempore, Hon. Freddie King III, Robin Barnes, H. Davis Cole, Janet Howard, Chadrick Kennedy, Joseph Peychaud, Tamika Duplessis, Ph. D., Maurice Sholas, M.D., Ph. D., Tyler Antrup

**EAST BANK WASTEWATER TREATMENT PLANT MUNICIPAL WATER POLLUTION PREVENTION  
ENVIRONMENTAL AUDIT**

**WHEREAS**, on April 30, 2024, the Board's wastewater operator (Veolia Water North America) completed the Louisiana Municipal Water Pollution Prevention report for the East Bank Wastewater Treatment Plant for the period, January 1, 2023, to December 31, 2023; and

**WHEREAS**, the Board has reviewed the Municipal Water Pollution Prevention Environmental Audit Report, prepared for the Louisiana Department of Environmental Quality, which is attached to this resolution; and

**WHEREAS**, there have been no permit exceedances at the East Bank Wastewater Treatment Plant, no corrective action is needed at this time, to maintain permit requirements contained in the Louisiana Water Discharge Permit System (LWPDPS) Number LA0038091; and

**WHEREAS**, sanitary sewer overflows (SSOs) were reported, SWBNO personnel and contractors performed cleaning and inspections of the sewer system, inspection of manholes, repairs of the sewer system and preventative maintenance tasks of sewage pump stations to reduce sanitary sewer overflows due to collection system blockages, force main failures and sewer pumping station outages; and

**NOW, THEREFORE BE IT RESOLVED** that the Board hereby acknowledges receipt and review of the report and assures performance of any actions necessary to maintain permit requirements.

I, Ghassan Korban, Executive Director,  
Sewerage and Water Board of New Orleans, do hereby  
certify that the above and foregoing is a true and  
correct copy of a Resolution adopted at the Regular  
Monthly Meeting of said Board, duly called and held,  
according to law on December 18, 2024.

---

Ghassan Korban  
Executive Director  
SEWERAGE AND WATER BOARD OF NEW ORLEANS

# LOUISIANA

## MUNICIPAL WATER POLLUTION PREVENTION

### MWPP



**Facility Name:**

New Orleans East Bank WWTP

**LPDES Permit Number:**

LA0038091

**Agency Interest (AI) Number:**

4859

**Address:**

6501 Florida Ave.

New Orleans, LA 70117

**Parish:**

Orleans

**(Person Completing Form) Name:**

Erick Gomez and Peter Brown

**Title:**

Project Manager, SWBNO SUSM

04/30/2024

## **Instructions to the Operator-in-Charge**

- 1. Complete only the sections of the Environmental Audit which apply to your wastewater treatment system. Leave sections that do not apply blank and enter a "0" for the point value.**
- 2. Parts 1 through 7 contain questions for which points may be generated. These points are intended to communicate to the department and the governing body or owner what actions will be necessary to prevent effluent violations. Place the point totals from parts 1 through 7 on the Point Calculation page.**
- 3. Add up the point totals.**
- 4. Submit the Environmental Audit to the governing body or owner for their review and approval.**
- 5. The governing body must pass a resolution which contains the following items:**
  - a. The resolution or letter must acknowledge the governing body or owner has reviewed the Environmental Audit.**
  - b. The resolution must indicate specific actions, if any, will be taken to maintain compliance and prevent effluent violations. Proposed actions should address the parts where maximum or close to maximum points were generated in the Environmental Audit.**
  - c. The resolution should provide any other information the governing body deems appropriate.**

## PART 1: INFLUENT FLOW/LOADINGS

### Part 1: Influent Flow/Loadings (All plants)

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

	Col. 1 Average Monthly Flow (million gallons per day, MGD)		Col. 2 Average Monthly BOD <sub>5</sub> Concentration (mg/l)		Col. 3 Average Monthly BOD <sub>5</sub> Loading (pounds per day)
Jan-22	111.806	X	74	X 8.34 =	69,002
Feb-22	110.596	X	91	X 8.34 =	83,936
Mar-22	107.490	X	92	X 8.34 =	82,475
Apr-22	92.317	X	88	X 8.34 =	67,753
May-22	93.171	X	86	X 8.34 =	66,826
Jun-22	81.050	X	82	X 8.34 =	55,428
Jul-22	51.100	X	115	X 8.34 =	49,010
Aug-22	76.848	X	82	X 8.34 =	52,555
Sep-22	93.403	X	71	X 8.34 =	55,308
Oct-22	85.084	X	71	X 8.34 =	50,382
Nov-22	81.873	X	72	X 8.34 =	49,163
Dec-22	109.181	X	62	X 8.34 =	56,455

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in mg/l) 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 Manual (O & M) or contact your consulting engineer.

Design Flow, MGD

122

X 0.90 =

110

Design BOD, lb/day

254,370

X 0.90 =

228,933

- C. How many months did the monthly flow (Col. 1) to the wastewater treatment plant (WWTP) exceed 90% of design flow?

Circle the number of months and 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	months
points	0	0	0	0	0	5	5	5	5	5	5	5	5	points

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

- D. How many months did the monthly flow (Col. 1) to the WWTP exceed the design flow?
- Circle the number of months and 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	months
points	0	5	5	10	10	15	15	15	15	15	15	15	15	points

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

- E. How many months did the monthly BOD loading (Col. 3) to the WWTP exceed 90% of the design loading?
- Circle the number of months and 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	months
points	0	0	5	5	5	0	10	10	10	10	10	10	10	points

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

- F. How many times did the monthly BOD loading (Col. 3) to the WWTP exceed the design loading?
- Circle the number of months and 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	months
points	0	10	20	30	40	50	50	50	50	50	50	50	50	points

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 on the point calculation table on page 16.

## 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 Avg. Monthly BOD (mg/l)	Column 2 Avg. Monthly TSS (mg/l)
Jan - 2022	9	12
Feb - 2022	11	16
Mar - 2022	11	13
Apr - 2022	9	9
May - 2022	11	8
Jun - 2022	14	13
Jul - 2022	9	9
Aug - 2022	12	14
Sep - 2022	11	17
Oct - 2022	11	18
Nov - 2022	9	12
Dec - 2022	9	18

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

	Permit Limit		90% of Permit Limit
BOD, mg/l	30	X 0.90 =	27
TSS, mg/l	30	X 0.90 =	27

## C. Continuous Discharge to Surface Water

- i. How many months did the effluent BOD concentrations (Col. 1) exceed 90% of the permit limits? Circle the number of months and 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	months
points	(0)	0	10	20	30	40	40	40	40	40	40	40	40	points

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

- ii. How many months did the effluent BOD concentration (Col. 1) exceeds permit limits? Circle the number of months and 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	months
points	(0)	5	5	10	10	10	10	10	10	10	10	10	10	points

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

- iii. How many months did the effluent TSS concentration (Col. 2) exceed 90% of the permit limits? Circle the number of months and 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	months
points	(0)	0	10	20	30	40	40	40	40	40	40	40	40	points

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

- iv. How many months did the effluent TSS concentration (Col. 2) exceed permit limits? Circle the number of months and 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	months
points	(0)	5	5	10	10	10	10	10	10	10	10	10	10	points

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**

Also enter this value on the point calculation table on page 16.

(max=100)



## D. Other Monitoring and Limits

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

T 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?

T Check one box

☐

Yes

☒

No

If yes, please describe:

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

T Check one box

☒

Yes

☐

No

If yes, please describe:

In the past year the following toxic substances for effluent samples were exceeded:

<b><u>Substance:</u></b>	<b><u>Limit:</u></b>	<b><u>Result:</u></b>	<b><u>Date:</u></b>
Aluminum	2.5 ug/l	123 ug/l	03/15-16/2023
Copper	3 ug/l	6.2 ug/l	03/15-16/2023
Lead	2 ug/l	2.7 ug/l	03/15-16/2023
Mercury	0.0005 ug/l	0.00900 ug/l	03/15-16/2023
Phenols	5 ug/l	10.2 ug/l	03/15-16/2023
Toulene	10 ug/l	19.2 ug/l	03/15-16/2023

A. What year was the wastewater treatment plant constructed or last major expansion/improvements completed? 1974

$$\begin{array}{rclcl} \text{Current Year} & - & (\text{Answer to A}) & = & \text{Age in years} \\ 2023 & - & 1974 & = & 49 \text{ years} \end{array}$$

Enter Age in Part C below.

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

Mechanical Treatment		Factor
X	Plant	2.5
	(Trickling filter, activated sludge, etc.)	
	Specify Type <u>Activated Sludge</u>	
	Aerated Lagoon	2.0
	Stabilization Pond	1.5
	Other (Specify)	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 point value of Part 3:

**TOTAL POINT VALUE FOR PART 3 =**  $\frac{2.5}{\text{FACTOR}} \times \frac{49}{\text{AGE}} = \boxed{122.5} \text{ (max. = 50)}$

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

- D. Please attach a schematic of the treatment plant.

## PART 4: OVERFLOWS AND BYPASSES

- A. (1) 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: 3

(Circle One) 0 = 0 points      1 = 5 points      2 = 10 points  
                          3 = 15 points      4 = 30 points      5 or more = 50 points

- (2) List the number of bypasses, overflows, or unpermitted discharges shown in A (1) that were within the collection system and the number at the treatment plant.

Collection System 3 Treatment Plant 0

- B. (1) List the number of times in the last year there was a bypass or overflow of untreated or incompletely treated wastewater due to equipment failure, either at the treatment plant or due to pumping problems in the collection system: 27

(Circle One) 0 = 0 points      1 = 5 points      2 = 10 points  
                          3 = 15 points      4 = 30 points      5 or more = 50 points

- (2) List the number of bypasses or overflows shown in B (1) that were within the collection system and the number at the treatment plant.

Collection System 27 Treatment Plant 0

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

All of the aforementioned bypasses came from the City's sanitary sewerage system.

- D. Add the point values circled for A and B and place the total in the box below.

**TOTAL POINT VALUE FOR PART 4** 65 (max=100)

Also enter this value on the point calculation table on page 16.

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

Ghassan Korban, P.E. Executive Director SWBNO

Describe the procedure for gathering, compiling, and reporting:

RJN Cassworks Infrastructure Maintenance Management System is used to track overflows by retrieving pertinent information from work orders.

## PART 5: SLUDGE STORAGE AND DISPOSAL SITES

### A. Sludge Storage

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

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

months	<2	2	3	4 to 5	>6	months
points	50	30	20	10	0	points

Write 0, 10, 20, 30, or 50 in the A point total box 0 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 corresponding point total. Write the point total in the box below at the right.

months	<2	6 to 11	12 to 23	24 to 35	>36	months
points	50	30	20	10	0	points

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

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

**TOTAL POINT VALUE FOR PART 5** 0 (max=100)

Also enter this value on the point calculation table on page 16.

**PART 6: NEW DEVELOPMENT**

- A. Please provide the following information for the total of all sewer line extensions which were installed during the last year. N/A

Design Population: \_\_\_\_\_

Design Flow: \_\_\_\_\_ MGD

Design BOD<sub>5</sub>: \_\_\_\_\_ 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)?

(Circle One)

No = 0 points

Yes = 15 points

Describe: \_\_\_\_\_

\_\_\_\_\_

List any new pollutants: \_\_\_\_\_

\_\_\_\_\_

- 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?

(Circle One)

No = 0 points

Yes = 15 points

Describe: \_\_\_\_\_

\_\_\_\_\_

List any new pollutants that you anticipate: \_\_\_\_\_

\_\_\_\_\_

- D. Add together the point value circled in B and C and place the sum in the blank below.

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

Also enter this value on the point calculation table on page 16.

## PART 7: OPERATOR CERTIFICATION AND EDUCATION

- A. What was the name of the operator-in-charge for the reporting year? Steve Benjamin
- B. What is his/her certification number? #21-001; January 1992
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant?  
Class IV Wastewater Treatment
- D. What is the level of certification of the operator-in-charge? Class IV Wastewater Treatment **Level Certified**
- E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant?

T Check one box ☒ yes = 0 points ☐ no = 50 points

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

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

T Check one box ☒ Yes ☐ no

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

T Check one box ☒ 12 hours or more = 0 points ☐ Less than 12 hours = 50 points

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

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

T Check one box ☒ yes ☐ No

Explain:

All personnel maintained at least 16 hours of training every two years. Veolia implements an internal training and safety program that meets all State Operator Certification training requirements. Additionally, 16 hours of cross trainings are provided to each employee.

- I. What percentage of the continuing education expenses of the operator-in-charge were paid for:

By the permittee? 100% Veolia North America

By the operator? 0%

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

**TOTAL POINT VALUE FOR PART 7**  **(max=100)**

Also enter this value on the point calculation table on page 16.

**STATUS PART 8: FINANCIAL**

- A. Are User-Charge Revenues sufficient to cover operation and maintenance expenses?

T Check one box

☒

Yes

☐

No

If no, how are O & M costs being financed?

Explain:

In 2012, the New Orleans City Council approved eight consecutive annual 10 percent water rate increases beginning January 1, 2013.

Revenue from Plumbing Inspections, License Fees and Other Miscellaneous Revenue

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

Revenues in excess of expenses and proceeds from bond issues.

## PART 9: SUBJECTIVE EVALUATION

### A. Collection System Maintenance

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

The Board inspected 6,873 sewer manholes. The Board and its contractors completed 667 repairs and cleaned 916,824.30 feet of the sewer system in 2023. Also, the Board and its contractors inspected a cumulative total of 93,882.70 feet of sewer line utilizing CCTV and 815,533.10 utilizing Smoke Testing in 2023. During the first and second halves of 2023, the Board inspected and maintained 68 known air release valves. In addition, 170 of 170 sewer force main isolation valves were inspected and exercised. 22 cathodic protection surveys were conducted and (100%) of the 102 miles of sewer force mains were visually inspected

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

The Board's Operations and Facility Maintenance personnel completed 4,928 sewage pumping station preventive maintenance tasks through December 31, 2023.

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

Collection system improvements are planned in accordance with the Third Modified Consent Decree.

### B. If you have ponds, please answer the following questions: N/A

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| 1. Do you have duckweed buildup in your ponds?                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Do you mow your dikes regularly (at least monthly), to the waters edge?         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Do you have bushes or trees growing on the dikes or in the ponds?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you have excess sludge buildup (>1 foot) on the bottom of any of your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Do you exercise all of your valves?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Are your control manholes in good structural shape?                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Do you maintain at least three feet of freeboard in all your ponds?             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Do you visit your pond system, at least weekly?                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |



## C. Treatment Plants

1. Have the influent and effluent flow meters been calibrated in the last year? ☒ Yes ☐ No

Influent flow meter calibration date(s):

Effluent flow meter calibration date(s):

The calibrations were performed on 01/24/2023 by BBP Co. Calibrations are performed annually.

The calibrations were performed on 01/24/2023 by BBP Co. Calibrations are performed annually.

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

3. Is your community presently involved in formal planning for treatment facility upgrading?

☐

Yes

☐

No If yes, describe:

## D. Preventive Maintenance

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

☒

Yes

☐

No

If yes, describe:

Current system utilizes a computer-generated maintenance work order system for both preventive and emergency repairs on all components in the plants.

Each piece of equipment's O&M manual is closely followed to ensure all factory preventive maintenance recommendations are performed.

2. Does this preventive maintenance program depict frequency of intervals, types of lubrication, and other preventive maintenance tasks necessary for each piece of equipment? ☒ Yes ☐ No
3. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assessed properly? ☒ Yes ☐ No

## E. Sewer Use Ordinance

1. 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 from industries, commercial users, and residences?

☒

Yes

☐

No

If yes, describe:

E.P.A. approved Pretreatment Program and Section 16 of the Sewerage & Water Board of New Orleans Plumbing Code.

The implementation of a Fats, Oils, and Grease Program, Section 16.5 of the Sewerage & Water Board of New Orleans Plumbing Code, that involves the annual issuance of a Grease Trap Discharge Permit to all Food Service Establishments in Orleans Parish.

2. Has it been necessary to enforce?
- ☒
- Yes
- ☐
- No If yes, describe:

E.P.A. approved Pretreatment Program requires sampling/monitoring of Significant Industrial Users to demonstrate compliance with applicable Federal, State and Local discharge requirements.

- F. Any additional comments about your treatment plant or collection system? (Attach additional sheet if necessary.)

**POINT CALCULATION TABLE**

Fill in the values from parts 1 through 7 in the columns below. Add the numbers in the left column to determine the point total that the wastewater system has generated for the previous year.

	<b>Actual Values</b>	<b>Actual Values</b>	<b>Maximum</b>
Part 1:	Influent Flow/Loadings	<u>0</u>	80 Points
Part 2:	Effluent Quality/Plant Performance	<u>0</u>	100 Points
Part 3:	Age of WWTP	<u>50</u>	50 Points
Part 4:	Overflows and Bypasses	<u>65</u>	100 Points
Part 5:	Ultimate Disposition of Sludge	<u>0</u>	100 Points
Part 6:	New Development	<u>0</u>	30 Points
Part 7:	Operator Certification Training	<u>0</u>	100 Points

**TOTAL POINTS**

115

**ATTACHMENT 3****SAMPLE MWPP RESOLUTION**

Resolved that the city/town \_\_\_\_\_ informs Louisiana Department of  
 of \_\_\_\_\_  
 Environmental Quality that the following actions were taken by  
 the \_\_\_\_\_  
 \_\_\_\_\_ (governing  
 body).

1. Reviewed the Municipal Water Pollution Prevention Environmental Audit Report which is attached to this resolution.
2. Set forth the following actions necessary to maintain permit requirements contained in the Louisiana Water Discharge Permit System (LWDPS) number \_\_\_\_\_ .

(Please be specific in listing the actions that will be taken to address the problems identified in the audit report.)

a.

b.

c.

d.

etc.

Passed by a majority/unanimous (circle one) vote of  
 the \_\_\_\_\_

on \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_ (date).

\_\_\_\_\_  
 \_\_\_\_\_  
**CLERK**

**WEST BANK WASTEWATER TREATMENT PLANT MUNICIPAL WATER POLLUTION  
PREVENTION ENVIRONMENTAL AUDIT**

**WHEREAS**, April 30, 2024, the Board's wastewater operator (Veolia Water North America) completed the Louisiana Municipal Water Pollution Prevention report for the West Bank Wastewater Treatment Plant for the period, January 1, 2023, to December 31, 2023; and

**WHEREAS**, the Board has reviewed the Municipal Water Pollution Prevention Environmental Audit Report, prepared for the Louisiana Department of Environmental Quality, which is attached to this resolution; and

**WHEREAS**, there have been no permit exceedances at the West Bank Wastewater Treatment Plant, no corrective action is needed at this time, to maintain permit requirements contained in the Louisiana Water Discharge Permit System (LWPDPS) Number LA0038105; and

**WHEREAS**, sanitary sewer overflows (SSOs) were reported, SWBNO personnel and contractors performed cleaning and inspections of the sewer system, inspection of manholes, repairs of the sewer system and preventative maintenance tasks of sewage pump stations to reduce sanitary sewer overflows due to collection system blockages, force main failures and sewer pumping station outages; and

**NOW, THEREFORE BE IT RESOLVED** that the Board hereby acknowledges receipt and review of the report and assures performance of any actions necessary to maintain permit requirements.

I, Ghassan Korban,  
Sewerage and Water Board of New Orleans, do hereby  
certify that the above and foregoing is a true and  
correct copy of a Resolution adopted at the Regular  
Monthly Meeting of said Board, duly called and held,  
according to law, on December 18, 2024.

---

Ghassan Korban  
Executive Director  
SEWERAGE AND WATER BOARD OF NEW ORLEANS

# LOUISIANA

## MUNICIPAL WATER POLLUTION PREVENTION

### MWPP



**Facility Name:**

New Orleans West Bank WWTP

**LPDES Permit Number:**

LA0038105

**Agency Interest (AI) Number:**

4688

**Address:**

6500 East 6<sup>th</sup> Street

New Orleans, LA 70131

**Parish:**

Orleans

**(Person Completing Form) Name:**

Erick Gomez, Peter Brown

**Title:**

Project Manager, SWBNO SUSM

**Date Completed:**

04/29/2024

## **Instructions to the Operator-in-Charge**

- 1. Complete only the sections of the Environmental Audit which apply to your wastewater treatment system. Leave sections that do not apply blank and enter a "0" for the point value.**
- 2. Parts 1 through 7 contain questions for which points may be generated. These points are intended to communicate to the department and the governing body or owner what actions will be necessary to prevent effluent violations. Place the point totals from parts 1 through 7 on the Point Calculation page.**
- 3. Add up the point totals.**
- 4. Submit the Environmental Audit to the governing body or owner for their review and approval.**
- 5. The governing body must pass a resolution which contains the following items:**
  - a. The resolution or letter must acknowledge the governing body or owner has reviewed the Environmental Audit.**
  - b. The resolution must indicate specific actions, if any, will be taken to maintain compliance and prevent effluent violations. Proposed actions should address the parts where maximum or close to maximum points were generated in the Environmental Audit.**
  - c. The resolution should provide any other information the governing body deems appropriate.**

## PART 1: INFLUENT FLOW/LOADINGS

### Part 1: Influent Flow/Loadings (All plants)

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

Col. 1 Average Monthly Flow (million gallons per day, MGD)		Col. 2 Average Monthly BOD <sub>5</sub> Concentration (mg/l)		Col. 3 Average Monthly BOD <sub>5</sub> Loading (pounds per day)	
Jan-23	8.479	X	58	X 8.34 =	4,101
Feb-23	7.831	X	105	X 8.34 =	6,858
Mar-23	6.398	X	137	X 8.34 =	7,310
Apr-23	6.857	X	152	X 8.34 =	8,692
May-23	7.634	X	103	X 8.34 =	6,558
Jun-23	5.670	X	116	X 8.34 =	5,485
Jul-23	5.806	X	121	X 8.34 =	5,859
Aug-23	4.455	X	90	X 8.34 =	3,344
Sep-23	5.032	X	84	X 8.34 =	3,525
Oct-23	5.803	X	94	X 8.34 =	4,549
Nov-23	6.011	X	104	X 8.34 =	5,214
Dec-23	8.474	X	93	X 8.34 =	6,573

BOD loading = Average Monthly Flow (in MGD) x Average Monthly BOD concentration (in mg/l) 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 Manual (O & M) or contact your consulting engineer.

Design Flow, MGD

40

X 0.90 =

36

Design BOD, lb/day

29,945

X 0.90 =

26,950



- C. How many months did the monthly flow (Col. 1) to the wastewater treatment plant (WWTP) exceed 90% of design flow?

Circle the number of months and 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	months
points	0	0	0	0	0	5	5	5	5	5	5	5	5	points

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

- D. How many months did the monthly flow (Col. 1) to the WWTP exceed the design flow?

Circle the number of months and 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	months
points	0	5	5	10	10	15	15	15	15	15	15	15	15	points

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

- E. How many months did the monthly BOD loading (Col. 3) to the WWTP exceed 90% of the design loading?

Circle the number of months and 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	months
points	0	0	5	5	5	0	10	10	10	10	10	10	10	points

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

- F. How many times did the monthly BOD loading (Col. 3) to the WWTP exceed the design loading?

Circle the number of months and 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	months
points	0	10	20	30	40	50	50	50	50	50	50	50	50	points

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 on the point calculation table on page 16.

## 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 Avg. Monthly BOD (mg/l)	Column 2 Avg. Monthly TSS (mg/l)
Jan-2023	17	16
Feb-2023	23	20
Mar-2023	21	20
Apr-2023	20	13
May-2023	16	8
Jun-2023	21	9
Jul-2023	15	6
Aug-2023	16	7
Sep-2023	19	12
Oct-2023	15	7
Nov-2023	19	12
Dec-2023	15	13

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

	Permit Limit		90% of Permit Limit
BOD, mg/l	30	X 0.90 =	27
TSS, mg/l	30	X 0.90 =	27

## C. Continuous Discharge to Surface Water

- i. How many months did the effluent BOD concentration (Col. 1) exceeds 90% of permit limits?  
Circle the number of months and 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	months
points	0	0	10	20	30	40	40	40	40	40	40	40	40	points

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

- ii. How many months did the effluent BOD concentration (Col. 1) exceeds permit limits?  
Circle the number of months and 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	months
points	0	5	5	10	10	10	10	10	10	10	10	10	10	points

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

- iii. How many months did the effluent TSS concentration (Col. 2) exceed 90% of permit limits?  
Circle the number of months and 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	months
points	0	0	10	20	30	40	40	40	40	40	40	40	40	points

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

- iv. How many months did the effluent TSS concentration (Col.2) exceed permit limits?  
Circle the number of months and 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	months
points	0	5	5	10	10	10	10	10	10	10	10	10	10	points

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**

Also enter this value on the point calculation table on page 15.

(max=100)

## D. Other Monitoring and Limits

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

T 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?

T Check one box

☐

Yes

☒

No

If yes, please describe:

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

T Check one box

☒

Yes

☐

No

If yes, please describe:

In the past year the following toxic substances for effluent samples were exceeded:

<b>Substance:</b>	<b>Limit:</b>	<b>Result:</b>	<b>Date :</b>
Arsenic	5 ug/l	7.5 ug/l	03/15-16/2023
Aluminum	2.5 ug/l	69.4 ug/l	03/15-16/2023
Copper	3 ug/l	3.8 ug/l	03/15-16/2023
Mercury	0.0005 ug/l	0.00411 ug/l	03/15-16/2023
Aluminum	2.5 ug/l	42.2 ug/l	09/27-28/2023
Cooper	3 ug/l	4.8 ug/l	09/27-28/2023
Mercury	0.0005 ug/l	0.0042 ug/l	09/27-28/2023
Zinc	20 ug/l	21.1 ug/l	09/27-28/2023

### PART 3: AGE OF THE WASTEWATER TREATMENT FACILITIES

- A. What year was the wastewater treatment plant constructed or last major expansion/improvements completed? 1974

$$\begin{array}{rclcl} \text{Current Year} & - & (\text{Answer to A}) & = & \text{Age in years} \\ \hline 2023 & - & 1974 & = & 49 \text{ years} \end{array}$$

Enter Age in Part C below.

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

		Factor
<u>X</u>	Mechanical Treatment Plant (Trickling filter, activated sludge, etc.) Specify Type <u>Trickling Filter</u>	2.5
<u>        </u>	Aerated Lagoon	2.0
<u>        </u>	Stabilization Pond	1.5
<u>        </u>	Other (Specify) <u>                                </u>	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 point value of Part 3:

$$\begin{array}{rclcl} \text{TOTAL POINT VALUE FOR PART 3} = & 2.5 & \times & 49 & = \\ & \underline{\hspace{1cm}} & & \underline{\hspace{1cm}} & \boxed{122.5} \quad (\text{max.} = 50) \\ & \text{FACTOR} & & \text{AGE} & \end{array}$$

Also enter this value or 50, whichever is less, on the point calculation table on page 15.

- D. Please attach a schematic of the treatment plant.

## PART 4: OVERFLOWS AND BYPASSES

- A. (1) 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: 0

(Circle One) 0 = 0 points    1 = 5 points    2 = 10 points  
3 = 15 points    4 = 30 points    5 or more = 50 points

- (2) List the number of bypasses, overflows, or unpermitted discharges shown in A (1) that were within the collection system and the number at the treatment plant.

Collection System 0 Treatment Plant 0

- B. (1) List the number of times in the last year there was a bypass or overflow of untreated or incompletely treated wastewater due to equipment failure, either at the treatment plant or due to pumping problems in the collection system: 6

(Circle One) 0 = 0 points    1 = 5 points    2 = 10 points  
3 = 15 points    4 = 30 points    5 or more = 50 points

- (2) List the number of bypasses or overflows shown in B (1) that were within the collection system and the number at the treatment plant.

Collection System 6 Treatment Plant 0

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

The collection system bypass came from the city's sewer system.

- D. Add the point values circled for A and B and place the total in the box below.

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

Also enter this value on the point calculation table on page 15.

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

Bypass report is signed by the Executive Director of the SWBNO. The report is submitted to the Department of Environmental Quality.

Describe the procedure for gathering, compiling, and reporting:

RJN Cassworks Infrastructure Maintenance Management System is used to track overflows by retrieving pertinent information from work orders.

## PART 5: SLUDGE STORAGE AND DISPOSAL SITES

### A. Sludge Storage

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

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

months	<2	2	3	4 to 5	( >6 )	months
points	50	30	20	10	( 0 )	points

Write 0, 10, 20, 30, or 50 in the A point total box  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 corresponding point total. Write the point total in the box below at the right.

months	<2	6 to 11	12 to 23	24 to 35	( >36 )	months
points	50	30	20	10	( 0 )	points

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

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

**TOTAL POINT VALUE FOR PART 5**  **(max=100)**

Also enter this value on the point calculation table on page 15.



**PART 6: NEW DEVELOPMENT**

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

Design Population: \_\_\_\_\_

Design Flow: \_\_\_\_\_ MGD

Design BOD<sub>5</sub>: \_\_\_\_\_ 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)?  
(Circle One) **No** = 0 points Yes = 15 points

Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any new pollutants: \_\_\_\_\_  
\_\_\_\_\_

- 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?  
(Circle One) **No** = 0 points Yes = 15 points

Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any new pollutants that you anticipate: \_\_\_\_\_  
\_\_\_\_\_

- D. Add together the point value circled in B and C and place the sum in the blank below.

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

Also enter this value on the point calculation table on page 15.

## PART 7: OPERATOR CERTIFICATION AND EDUCATION

- A. What was the name of the operator-in-charge for the reporting year? **Erick Gomez**
- B. What is his/her certification number? **#19-1177 August 20, 2019**
- C. What level of certification is the operator-in-charge required to have to operate the wastewater treatment plant?  
**Class IV Wastewater Treatment**
- D. What is the level of certification of the operator-in-charge? **Class IV Wastewater Treatment** **Level Certified**
- E. Was the operator-in-charge of the report year certified at least at the grade level required in order to operate this plant?
- T Check one box ☒ yes = 0 points ☐ no = 50 points
- Write 0 or 50 in the E point total box  E Point Total
- F. Has the operator-in-charge maintained recertification requirements during the reporting year?
- T Check one box ☒ yes ☐ no
- G. How many hours of continuing education have the operator-in-charge completed over the last two calendar years?
- T Check one box ☒ 12 hours or more = 0 points ☐ Less than 12 hours = 50 points
- Write 0 or 50 in the G point total box  G Point Total
- H. Is there a written policy regarding continuing education and training for wastewater treatment plant employees?
- T Check one box ☒ yes ☐ no
- Explain:
- All personnel maintained at least 16 hours of training every two years for Wastewater Treatment certifications. Veolia implements an internal training and safety program that meets all State Operator Certification training requirements. Additionally, 16 hours of cross training are provided
- I. What percentage of the continuing education expenses of the operator-in-charge were paid for:
- By the permittee? 100% Veolia
- By the operator? \_\_\_\_\_
- J. Add together the E and G point values and place this sum in the box below at the right:

**TOTAL POINT VALUE FOR PART 7**  **(max=100)**

Also enter this value on the point calculation table on page 15.

**PART 8: FINANCIAL STATUS**

A. Are User-Charge Revenues sufficient to cover operation and maintenance expenses?

Check one box

☒

Yes

☐

No

If no, how are O & M costs being financed?

Explain:

In 2012, the New Orleans City Council approved eight consecutive annual 10 percent water rate increases beginning January 1, 2013.

Revenue from Plumbing Inspections, License Fees, and Other Miscellaneous Revenue

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

Revenues in excess of expenses and proceeds from bond issues.

## PART 9: SUBJECTIVE EVALUATION

### A. Collection System Maintenance

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

The Board inspected 735 sewer manholes. The Board completed 18 repairs and cleaned 108,557 feet of the sewer system in 2023. Also, the Board and its contractors inspected a cumulative total of 113,378 feet of sewer line utilizing Smoke Testing in 2023.

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

The Board's Operations and Facility Maintenance personnel completed 1,282 sewage pumping station preventive maintenance tasks through December 31, 2023.

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

Even though the West Bank is not mandated to improve the collection system in accordance with the Third Modified Consent Decree, repairs and improvements are made when identified through sewer main inspections, sewer main cleaning and manhole inspections.

### B. If you have ponds, please answer the following questions: N/A

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| 1. Do you have duckweed buildup in your ponds?                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Do you mow your dikes regularly (at least monthly), to the waters edge?         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Do you have bushes or trees growing on the dikes or in the ponds?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you have excess sludge buildup (>1 foot) on the bottom of any of your ponds? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Do you exercise all of your valves?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Are your control manholes in good structural shape?                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Do you maintain at least three feet of freeboard in all your ponds?             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Do you visit your pond system, at least weekly?                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

## C. Treatment Plants

1. Have the influent and effluent flow meters been calibrated in the last year? ☒ Yes ☐ No

Influent flow meter calibration date(s):

Effluent flow meter calibration date(s):

The calibrations were performed on 01/24/2023 by BBP. Calibrations are performed annually.

The calibrations were performed on 01/24/2023 by BBP. Calibrations are performed annually.

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

No -

3. Is your community presently involved in formal planning for treatment facility upgrading?

☐

Yes

☒

No If yes, describe:

## D. Preventive Maintenance

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

☒ Yes ☐ No If yes, describe:

Current system utilizes a computer-generated maintenance work order system for both preventive and emergency repairs on all components in the plants.

Each piece of equipment's O&M manual is closely followed to ensure all factory preventive maintenance recommendations are performed.

2. Does this preventive maintenance program depict frequency of intervals, types of lubrication, and other preventive maintenance tasks necessary for each piece of equipment? ☒ Yes ☐ No
3. Are these preventive maintenance tasks, as well as equipment problems, being recorded and filed so future maintenance problems can be assessed properly? ☒ Yes ☐ No

## E. Sewer Use Ordinance

1. 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 from industries, commercial users, and residences?

☒ Yes ☐ No If yes, describe:

E.P.A. approved Pretreatment Program and Section 16 of the Sewerage & Water Board of New Orleans Plumbing Code.

The implementation of a Fats, Oils, and Grease Program, Section 16.5 of the Sewerage & Water Board of New Orleans Plumbing Code, that involves the annual issuance of a Grease Trap Discharge Permit to all Food Service Establishments in Orleans Parish.

2. Has it been necessary to enforce? ☒ Yes ☐ No If yes, describe:

E.P.A. approved Pretreatment Program requires sampling/monitoring of Significant Industrial Users to demonstrate compliance with applicable Federal, State and Local discharge requirements.

## F. Any additional comments about your treatment plant or collection system? (Attach additional sheet if necessary.)

## POINT CALCULATION TABLE

Fill in the values from parts 1 through 7 in the columns below. Add the numbers in the left column to determine the point total that the wastewater system has generated for the previous year.

	<b>Actual Values</b>	<b>Actual Values</b>	<b>Maximum</b>
Part 1:	Influent Flow/Loadings	0	80 Points
Part 2:	Effluent Quality/Plant Performance	0	100 Points
Part 3:	Age of WWTP	50	50 Points
Part 4:	Overflows and Bypasses	50	100 Points
Part 5:	Ultimate Disposition of Sludge	0	100 Points
Part 6:	New Development	0	30 Points
Part 7:	Operator Certification Training	0	100 Points

**TOTAL POINTS**

100