SEWERAGE & WATER BOARD OF NEW ORLEANS

AUDIT COMMITTEE MEETING
TUESDAY, NOVEMBER 10, 2020
10:00 AM

November 2020 Audit Attendee Link

Call In: +1 504-224-8698 United States, New Orleans (Toll)
Conference ID: 806 631 235#

PUBLIC COMMENT WILL BE ACCEPTED VIA EMAIL TO BOARDRELATIONS@SWBNO.ORG. ALL PUBLIC COMMENTS MUST BE RECEIVED PRIOR TO 10:30 AM ON November 10, 2020. COMMENTS WILL BE READ VERBATIM INTO THE RECORD.

Dr. Tamika Duplessis, Chair • Robin Barnes
Joseph Peychaud • Maurice Sholas • Alejandra Guzman

FINAL AGENDA

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1. **ROLL CALL**
2. **PRESENTATION ITEMS**

   Risk Assessment and its Benefits – Ryan Kelley with LaPorte CPAs and Business Advisors
3. **ACTION ITEMS**

   b. R-120-2020: West Bank Wastewater Treatment Plant Municipal Water Pollution Prevention Environmental Audit

   c. R-121-2020: East Bank Wastewater Treatment Plant Municipal Water Pollution Prevention Environmental Audit
4. **PUBLIC COMMENT**
5. **ADJOURNMENT**

This teleconference meeting is being held pursuant to and in accordance with the provisions of Section 4 of Proclamation Number JBE 2020-30, extended by Proclamation 110 JBE 2020, pursuant to Section 3 of Act 302 of 2020.

SEWERAGE AND WATER BOARD
Inter-Office Memorandum

Date: October 23, 2020

From: Ann Wilson
Chief of Environmental Affairs

Ann Wilson
Digitally signed by Ann Wilson
DN: cn=Ann Wilson, o=SWBNO, ou=Env. Affairs., email=awilson2@swbno.org, c=US
Date: 2020.10.24 07:39:26 -05'00'

Via: Robert Turner, P.E.
General Superintendent

To: Ghassan Korban, P.E.
Executive Director

Re: Municipal Water Pollution Audit for West Bank STP

Enclosed please find a recommendation from the Chief of Environmental Affairs for the approval of resolution for the Municipal Water Pollution (MWPP) Audit for West Bank Sewer Treatment Plant (WBSTP). The Louisiana Pollutant Discharge Elimination System Permit No. LA0038105 requires SWBNO Board of Directors review. This is an annual requirement of the permit. There is no financial requirement associated with the MWPP Audit review.

I would appreciate you forwarding this to the attention of the appropriate committees of the Board for consideration and approval.

APPROVED:

Robert Turner
Digitally signed by Robert Turner
DN: cn=Robert Turner, o=SWBNO, ou=GSO, email=rturner@swbno.org, c=US
Date: 2020.11.03 10:59:34 -06'00'

Robert Turner, P.E.
General Superintendent

R-120-2020

WEST BANK WASTEWATER TREATMENT PLANT MUNICIPAL WATER POLLUTION PREVENTION ENVIRONMENTAL AUDIT

WHEREAS, on September 25, 2020 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, September 1, 2019 to August 31, 2020; 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, to maintain permit requirements contained in the Louisiana Water Discharge Permit System (LWPDPS) Number LA0038105. However, during this audit reporting period, to reduce sanitary sewer overflows due to collection system blockages, force main failures and sewer pumping station outages, the Board and/or its contactors preformed the following collection system and sewer station preventive maintenance actions:

- inspected 88,000 feet of the sewer system utilizing smoke testing
- inspected 479 sewer manholes,
- completed 31 repairs
- inspected a total of 265 feet of sewer line utilizing CCTV
- cleaned 84,000 feet of the sewer system
- completed 1,196 sewage pumping station preventive maintenance tasks and 112 corrective maintenance actions

WHEREAS, the MWPP Audit for the West Bank Sewer Treatment Plant identified permit limit exceedances for Total Residual Chlorine. Corrective actions have been implemented which included revisions of Standard Operating Procedures to reduce Total Residual Chlorine concentration at the outfall while maintaining effective chlorination to reduce Fecal Coliform Bacteria.

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, November 18, 2020.

_____

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:	3501 Canal Street New Orleans, LA 70131
Parish:	Orleans
(Person Completing Form) Name:	Scott Oalmann
Title:	Project Manager
Date Completed:	09/23/2020

Permit # LA0038105

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 <u>specific</u> 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.**

Permit # LA0038105

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_5 Concentration (mg/l)		**Col. 3** Average Monthly BOD_5 Loading (pounds per day)
Sep-19	7.891	X	88	X 8.34 =	5,791
Oct-19	12.754	X	75	X 8.34 =	7,978
Nov-19	11.245	X	80	X 8.34 =	7,503
Dec-19	13.234	X	82	X 8.34 =	9,050
Jan-20	20.314	X	70	X 8.34 =	11,859
Feb-20	20.130	X	68	X 8.34 =	11,416
Mar-20	8.209	X	91	X 8.34 =	6,230
Apr-20	7.019	X	87	X 8.34 =	5,093
May-20	6.967	X	78	X 8.34 =	4,532
Jun-20	10.972	X	60	X 8.34 =	5,490
Jul-20	12.129	X	50	X 8.34 =	5,058
Aug-20	9.644	X	48	X 8.34 =	3,861

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

Permit # LA0038105

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 [0] 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 [0] 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 [0] 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 [0] 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 [0] **(max=80)**

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

Permit # LA0038105

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)
Sep-19	5	7
Oct-19	7	9
Nov 19	8	10
Dec-19	10	12
Jan-20	10	16
Feb-20	9	15
Mar-20	10	12
Apr-20	11	13
May-20	8	11
Jun-20	9	12
Jul-20	8	13
Aug-20	7	10

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

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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 [0] 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 [0] 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 [0] 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 [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
Also enter this value on the point calculation table on page 15. [0] **(max=100)**

Permit # LA0038105

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?

✓ Check one box [X] Yes [ ] No If yes, please describe:

09/13/2019, the Total Residual Chlorine (TRC) exceeded its daily limit of 1.4 mg/l. The result was 1.5 mg/l.
07/02/2020, the Total Residual Chlorine (TRC) exceeded its daily limit of 1.7 mg/l. The result was 1.81 mg/l.
08/25/2020, the Total Residual Chlorine (TRC) exceeded its daily limit of 1.7 mg/l. The result was 1.8 mg/l.

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 [X] 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?

✓ Check one box [X] Yes [ ] No If yes, please describe:

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

Substance:	**Limit:**	**Result:**	**Date:**
Aluminum	2.5 ug/l	70.4 ug/l	09/10-12/2019
Copper	3 ug /l	4.0 ug/l	09/10-12/2019
Cyanide	10 ug/l	10.6 ug/l	09/10-12/2019
Lead	2 ug/l	2.2 ug/l	09/10-12/2019
Mercury	0.0005 ug/l	0.00421ug/l	09/10-12/2019
Aluminum	2.5 ug/l	56.2 ug/l	03/17-18/2020
Arsenic	5 ug/l	8.3 ug/l	03/17-18/2020
Chromium VI	10 ug/l	18 ug/l	03/17-18/2020
Copper	3 ug/l	3.9 ug/l	03/17-18/2020
Mercury	0.0005 ug/l	0.0045 ug/l	03/17-18/2020
Phenols	5 ug/l	24 ug/l	03/17-18/2020
Zinc	20 ug/l	28.2 ug/l	03/17-18/2020

Permit # LA0038105

PART 3: AGE OF THE WASTEWATER TREATMENT FACILITIES

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

Current Year	-	(Answer to A)	=	Age in years	
2020	-	1974	=	46	years

Enter Age in Part C below.

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

		Factor
X	Mechanical Treatment Plant (Trickling filter, activated sludge, etc.) Specify Type Trickling Filter	2.5
	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 = 2.5 (**FACTOR**) **x** 46 (**AGE**) **=** 115 **(max. = 50)**

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.

Permit # LA0038105

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: 2

(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 2 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: 2

(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 0 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 10 **(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.

Permit # LA0038105

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 15.

Permit # LA0038105

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_5:_____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.

Permit # LA0038105

PART 7: OPERATOR CERTIFICATION AND EDUCATION

A. What was the name of the operator-in-charge for the reporting year? **Cantrelle Larkins**

B. What is his/her certification number? **#15-250 October, 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?

✓ Check one box [X] 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 [X] yes [ ] no

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

✓ Check one box [X] 12 hours or more = 0 points [ ] Less than 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 [X] 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 [0] **(max=100)**

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

Permit # LA0038105

PART 8: FINANCIAL STATUS

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

Check one box [x] 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.

Permit # LA0038105

PART 9: SUBJECTIVE EVALUATION

A. Collection System Maintenance

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

Sewer Line Cleanings: 84,000 feet
Sewer Repairs: 31
Sewer Manhole Inspections 479
Inspected 88,000 feet of the sewer system smoke testing
Inspected a total of 265 feet sewer line utilizing CCTV

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

1,196 Preventative Maintenance Actions
112 Corrective Maintenance Actions

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

Permit # LA0038105

C. Treatment Plants

1. Have the influent and effluent flow meters been calibrated in the last year? [X] Yes [ ] No

Influent flow meter calibration dates(s):	Effluent flow meter calibration date(s):
The most recent calibration of that period – 12/10/2019 –	The most recent calibration of that period – 08/27/2019 – The Flow Meters are calibrated monthly

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

None

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

[ ] Yes [X] No If yes, describe:

D. Preventive Maintenance

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

[X] 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? [X] 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? [X] 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?

[X] 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? [X] 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.)

Permit # LA0038105

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.

		Actual Values	Maximum
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	10	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 60

SEWERAGE AND WATER BOARD
Inter-Office Memorandum

Date: October 23, 2020

From: Ann Wilson
Chief of Environmental Affairs

Ann Wilson
Digitally signed by Ann Wilson
DN: cn=Ann Wilson, o=SWBNO, ou=Env. Affairs., email=awilson2@swbno.org, c=US
Date: 2020.10.24 07:59:57 -05'00'

Via: Robert Turner, P.E.
General Superintendent

To: Ghassan Korban, P.E.
Executive Director

Re: Municipal Water Pollution Audit for East Bank STP

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I would appreciate you forwarding this to the attention of the appropriate committees of the Board for consideration and approval.

APPROVED:

Robert Turner
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DN: cn=Robert Turner, o=SWBNO, ou=GSO, email=rturner@swbno.org, c=US
Date: 2020.11.03 10:58:32 -06'00'

Robert Turner, P.E.
General Superintendent

EAST BANK WASTEWATER TREATMENT PLANT MUNICIPAL WATER POLLUTION PREVENTION ENVIRONMENTAL AUDIT

WHEREAS, on July 24, 2020 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, June 1, 2019 to May 31, 2020; 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, further corrective actions are necessary in order to address the deficiencies found in the audit, the Board will continue to take actions as outlined as requirements in the Third Modified Consent Decree which are necessary to maintain permit requirements contained in the Louisiana Water Discharge Permit System (LWPDPS) Number LA0038091. During this audit reporting period, to reduce sanitary sewer overflows due to collection system blockages, force main failures and sewer pumping station outages, the Board and/or its contactors preformed the following collection system and sewer station preventive maintenance actions:

- inspected 1754,959.70 feet of the sewer system, 6,918 sewer manholes, completed 290 repairs, and cleaned 1,058,480.50 feet of the sewer system
- inspected a cumulative total of 54,517.70 feet of sewer line utilizing CCTV and a cumulative total of 704,106.00 feet of sewer line utilizing Smoke Testing
- inspected and maintained 68 known air release valves
- 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
- 4,942 sewage pumping station preventive maintenance tasks were completed

WHEREAS, the MWPP Audit for the East Bank Sewer Treatment Plant identified permit limit exceedances for Total Residual Chlorine and Fecal Coliform Bacteria. Corrective actions included revisions of Standard Operating Procedures to reduce Total Residual Chlorine concentration at the outfall while maintaining effective chlorination to reduce Fecal Coliform Bacteria.

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 November 18, 2020.

_____

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:	Scott Oalmann
Title:	Project Manager
Date Completed:	07/24/2020

Permit # LA0038091

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 <u>specific</u> 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

Permit # LA0038091

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_5 Concentration (mg/l)		**Col. 3** Average Monthly BOD_5 Loading (pounds per day)
Jun-19	77.850	X	74	X 8.34 =	48,046
Jul-19	110.897	X	55	X 8.34 =	50,868
Aug-19	106.116	X	67	X 8.34 =	59,295
Sep-19	85.607	X	87	X 8.34 =	62,115
Oct-19	95.532	X	75	X 8.34 =	59,775
Nov-19	90.343	X	85	X 8.34 =	64,044
Dec-19	86.442	X	89	X 8.34 =	64,162
Jan-20	108.029	X	88	X 8.34 =	79,285
Feb-20	116.203	X	80	X 8.34 =	77,531
Mar-20	91.181	X	98	X 8.34 =	74,524
Apr-20	95.52	X	87	X 8.34 =	69,307
May-20	103.123	X	74	X 8.34 =	63,643

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 [0] 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 [0] 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 [0] 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 [0] 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 [0] **(max=80)**

Also enter this value 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** Avg. Monthly BOD (mg/l)	**Column 2** Avg. Monthly TSS (mg/l)
Jun-2019	21	15
Jul-2019	22	24
Aug -2019	20	23
Sep – 2019	19	17
Oct – 2019	20	16
Nov – 2019	26	18
Dec – 2019	23	16
Jan – 2020	24	20
Feb – 2020	22	25
Mar – 2020	21	25
Apr – 2020	19	18
May – 2020	19	24

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 [0] 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 [0] 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 [0] 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 [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
Also enter this value on the point calculation table on page 16. [0] **(max=100)**

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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?

✓ Check one box [X] Yes [ ] No If yes, please describe:

09/27/2019, the Total Residual Chlorine (TRC) exceeded its daily limit of 0.5 mg/l. The result was 0.6 mg/l.
02/04/2020, the Total Residual Chlorine (TRC) exceeded its daily limit of 0.5 mg/l. The result was 0.56 mg/l.
04/20/2020, the Total Residual Chlorine (TRC) exceeded its daily limit of 0.5 mg/l. The result was 0.53 mg/l.
04/28/2020, the Fecal Coliform exceeded its daily limit of 400 colonies/100ml. The result was 4500 colonies/100ml.

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 [X] 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?

✓ Check one box [X] Yes [ ] No If yes, please describe:

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

Substance:	Limit:	Result:	Date:
Zinc	20 ug/l	20.7 ug/l	09/10-12/2019
Phenols	10 ug/l	34 ug/l	03/17-18/2020
Chromium	10 ug/l	21 ug/l	03/17-18/2020
Zinc	20 ug/l	22.1 ug/l	03/17-18/2020

Permit # LA0038091

PART 3: AGE OF THE WASTEWATER TREATMENT FACILITIES

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

Current Year	-	(Answer to A)	=	Age in years
2020	-	1974	=	46 years

Enter Age in Part C below.

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

		Factor
X	Mechanical Treatment Plant (Trickling filter, activated sludge, etc.) Specify Type Activated Sludge	2.5
	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 = 2.5 (**FACTOR**) **x** 46 (**AGE**) **=** 115 **(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.

Permit # LA0038091

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: _____

(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 6 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: 13

(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 13 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 4 100 **(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.

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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.

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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_5:_____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.

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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?

✓ Check one box [X] 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 [X] yes [ ] no

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

✓ Check one box [X] 12 hours or more = 0 points [ ] Less than 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 [X] 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 [0] **(max=100)**

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

Permit # LA0038091

STATUS PART 8: FINANCIAL

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

✓ Check one box [X] 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.

Permit # LA0038091

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 6,918 sewer manholes. The Board and its contractors completed 290 repairs and cleaned 1,058,480.50 feet of the sewer system in 2019. Also, the Board and its contractors inspected a cumulative total of 54,517.70 feet of sewer line utilizing CCTV and a cumulative total of 704,106.00 feet of sewer line utilizing Smoke Testing in 2019. During the first and second halves of 2019, 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 4,942 sewage pumping station preventive maintenance tasks through December 31, 2019.

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

C. Treatment Plants

1. Have the influent and effluent flow meters been calibrated in the last year? [X] Yes [ ] No

Influent flow meter calibration dates(s):	Effluent flow meter calibration date(s):
The most recent calibration for that period - 05/01/2020 – The Flow Meters are calibrated monthly	The most recent calibration for that period - 05/01/2020 – The Flow Meters are calibrated monthly

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

None

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?

[X] 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? [X] 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? [X] 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?

[X] 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? [X] 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.)

Permit # LA0038091

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.

		Actual Values	Maximum
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	100	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 150

Permit # LA0038091

ATTACHMENT 3

SAMPLE MWPP RESOLUTION

Resolved that the city/town of _____ informs Louisiana Department 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