



STATE OF LOUISIANA
DEPARTMENT OF ENVIRONMENTAL QUALITY
 MAIL COMPLETED FORM TO:
 Office of Environmental Services, Water Permits Division
 Post Office Box 4313
 Baton Rouge, La 70821-4313
 Phone#: (225) 219-3181

REQUEST FOR PRELIMINARY DETERMINATION
OF LPDES PERMIT ISSUANCE
SECTION I – SITE CONTACT INFORMATION

Name _____
 Address _____
 City _____
 Zip _____ Phone _____ e-mail _____

If the wastewater treatment facility is to be owned and/or operated by a separate entity once constructed, please provide contact information for that entity.

SECTION II – SITE INFORMATION

Name of Project _____
 Physical Location of Project _____
 Latitude- ____ deg. ____ min. ____ sec. Longitude- ____ deg. ____ min. ____ sec.
 Parish _____ Anticipated Date of Discharge _____
 Total No. of Planned Dwellings _____ No. Phases/Filings in Development _____

SECTION III – SITE DISCHARGE INFORMATION

Provide the proposed discharge route to the first named waterbody.

SECTION III – SITE MAP

Attach to this form a topographic map which has been highlighted to show the proposed path of the wastewater from the proposed facility to the first named waterbody. Include on the map the area extending at least one mile beyond your property boundaries. Indicate the outline of the facility and the location of each proposed discharge structure.

SECTION IV – CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who are directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

Print Name _____ Date _____

Signature _____