



PPG INDUSTRIES, INC. INDUSTRIAL CHEMICAL DIVISION P. O. BOX 1000 LAKE CHARLES, LA 70602 LA 70602

October 14, 1982

Mr. Dick Whittington
Administrator
U. S. EPA, Region VI
1201 Elm Street
Dallas, TX 75270

Re: Permit No. LA0000761
Discharge Monitoring Report

Dear Mr. Whittington:

Enclosed are the Discharge Monitoring Reports for July, August, and September, 1982. Incidents of excursions during the quarter were reported to your office as they occurred.

Treatment systems performed very well during the report period. In summary, there were no excursions reported for the toxic pollutants (chlorinated hydrocarbons, mercury, and lead) representing a 100% overall compliance level. The level of pH (6.0 - 9.0) compliance at continuously-monitored Outfall 001 averaged 99.5%. Further explanations for the four excursions (pH, TSS) that did occur during this quarter are also enclosed.

Should you have any questions regarding this report, please call J. E. Wyche at (318) 491-4830.

Respectfully,

WILLIAM J. PEARD
Manager Environmental Control

WJP:ap

Enclosures.

cc: Mr. J. Dale Givens
DNR, Water Pollution Control Division

SL 046585

pH CONTROL (OUTFALL 001). There were three excursions this quarter which were reported as follows:

July 4, 1982 @ 4:58 a.m. for 21 minutes - pH -3.7. The violation was the result of an overloading of the pH neutralization system due to a communication problem between plant personnel during the routine acid regeneration of the Deion Unit. Proper communication was stressed.

August 3, 1982 @ 4:03 p.m. for 12 minutes - pH -2.4. Low pH material entered the pH control system from an undetermined source in the Plant, temporarily exceeding the neutralization capacity of the pH control system.

August 24, 1982 @ 11:45 a.m. for 1 hr. 12 minutes - pH +0.1. The violation was due to an operational problem which resulted in the neutralization capacity of pH control being exceeded.

TOTAL SUSPENDED SOLIDS (OUTFALL 011/017/019). There was one excursion during this reporting period which was reported as follows:

August 5, 1982. Excursion due to a combination of: 1) a chlorine circuit outage resulting from power supply problems caused an increased flow to the Lead Treatment pond, thereby reducing settling time for suspended solids. Flow curtailment measures were taken until the circuit was placed back in service; 2) abnormally high solids (apparently sand) in discharge of brine solids treatment system. Investigation of the cause is underway.

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

PAGE 2462

Approved OMB No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

LA0000761
 PERMIT NUMBER

001
 DISCHARGE NUMBER

MONITORING PERIOD
 FROM YEAR MO DAY TH RU YEAR MO DAY
 82 07 01 82 07 31
 (10-11) (12-13) (14-15) (16-17) (18-19) (20-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	223,419	252,000						NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA	GPM						CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				78	94	108		NA	CONT	REC.
	PERMIT REQUIREMENT				NA		NA	°F		CONT	RECORD
pH	SAMPLE MEASUREMENT		398		2.3	7.3	9.5*		L = 1 H = 0	CONT	RECORD
	PERMIT REQUIREMENT	NA	432	MIN/MO	6.0		9.0	pH UNITS		CONT	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
 AREA CODE

491-4500
 NUMBER

82 07 31
 YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*Duration of excursions above pH 9.0 were within allowed time period of 60 minutes and, thus, did not constitute a permit violation.

For pH -- See Attachment I, Letter of 10/14/82

SL 046588

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved OMB No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

LA0000761
 PERMIT NUMBER

005
 DISCHARGE NUMBER

PAGE 2474

MONITORING PERIOD									
YEAR			MO	DAY	YEAR			MO	DAY
FROM	82	07	01	TH	82	07	31		
	(20-21)	(22-24)	(24-25)	RII	(26-27)	(28-29)	(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	370	370	GPM					NA	3/7	GRAB
	PERMIT REQUIREMENT	NA	NA							3/7	GRAB
TEMPERATURE	SAMPLE MEASUREMENT				72	84	96	°F	NA	3/7	GRA
	PERMIT REQUIREMENT				NA		NA			3/7	GRAB
pH	SAMPLE MEASUREMENT				7.1	7.3	7.4	pH UNITS	L=0 H=0	3/7	GRAB
	PERMIT REQUIREMENT				6.0		9.0			3/7	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
 TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 318 491-4500
 DATE 82 07 31
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046589

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16) LA0000761
PERMIT NUMBER
(17-19) 010
DISCHARGE NUMBER

PAGE 2448

MONITORING PERIOD
FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 07 01 TH 82 07 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	850	1137	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
Cr	SAMPLE MEASUREMENT	0.05	0.14	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	8	16							3/7	24 HC
CIHC	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	*	*								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

G. C. STRICKLER
WORKS MANAGER

TYPED R PRINTED

318 491-4500

AREA CODE

NUMBER

82 07 31

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 018

SL 046590

PERMITTEE NAME (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16)
LA0000761
PERMIT NUMBER

(17-19)
011
DISCHARGE NUMBER

PAGE 2450

MONITORING PERIOD								
YEAR	MO	DAY	TH	YEAR	MO	DAY	TH	DAY
82	07	01	TH	82	07	31	TH	31
(10-11)	(12-13)	(14-15)	RU	(16-17)	(18-19)	(20-21)	RU	(22-23)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (34-41)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	237	276	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
MERCURY*	SAMPLE MEASUREMENT	0.04	0.11	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	0.21	0.42							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
G. C. STRICKLER WORKS MANAGER			318 491-4500	82	07	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*Sum of Outfall 011 + 111

SL 046591

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME **PPG INDUSTRIES INC**
 ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY
 LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 2504

Approved
 OMB No. 2000-0015

LA0000761

PERMIT NUMBER

111

DISCHARGE NUMBER

MONITORING PERIOD

FROM			THRU		
YEAR	MO	DAY	YEAR	MO	DAY
82	07	01	82	07	31
(20-21)	(22-24)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	437	480	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
MERCURY	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	*	*								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED & PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
 AREA
 CODE

491-4500
 NUMBER

82
 YEAR

07
 MO

31
 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 011

SL 046592

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R

FACILITY _____
 LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)
LA0000761
 PERMIT NUMBER

(17-19)
011/017/019
 DISCHARGE NUMBER

PAGE 2490

Approved
 OMB No. 2000-0015

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
82	07	01	TH	82	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	562	778	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TSS	SAMPLE MEASUREMENT	1253	2055	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	1118	2236							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
G. C. STRICKLER WORKS MANAGER		<i>Burt P...</i>	318 491-4500	82	07	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 04659

PERMITTEE NAME **PPG INDUSTRIES INC**
 Facility Name/Location (Include different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

Approved
 No. 2000-0015

NAME **PPG INDUSTRIES INC**
 ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 **R**
 FACILITY
 LOCATION

(2-16) **LA0000761**
 PERMIT NUMBER
 (17-19) **012**
 DISCHARGE NUMBER

PAGE 2452

MONITORING PERIOD
 FROM YEAR MO DAY TH RU YEAR MO DAY
82 07 01 **82 07 31**
 (10-11) (12-13) (14-15) (16-17) (18-19) (20-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	40	149	GPM					NA	7/7	24 HT
	PERMIT REQUIREMENT	NA	NA							3/7	CALC
MERCURY	SAMPLE MEASUREMENT	0.001	0.004	LBS/D					NA	3/7	24 I
	PERMIT REQUIREMENT	NA	NA							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
G. C. STRICKLER WORKS MANAGER			318 491-4500		82	07	31
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046594

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PAGE 2456

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16)
LA0000761
PERMIT NUMBER

(17-19)
013
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
82	07	01	TH	82	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	25,971	29,240	GPM					NA	CONT	CALC
	PERMIT REQUIREMENT	NA	NA							CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			318	491-4500	82	07	31
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046595

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R

LA0000761

PERMIT NUMBER

015/016

DISCHARGE NUMBER

PAGE 2510

FACILITY LOCATION

MONITORING PERIOD						
YEAR	MO	DAY	TH	YEAR	MO	DAY
82	07	01	TH	82	07	31
(12-11)	(12-11)	(12-25)	RU	(12-27)	(12-29)	(12-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	156,258	173,873	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON AND BASES ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
G. C. STRICKLER WORKS MANAGER											
TYPED & PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					318 491-4500		82	07	31
							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046596

PERMITTEE NAME ADDRESS (Include Facility Name/Local address)

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

LA0000761
 PERMIT NUMBER

017
 DISCHARGE NUMBER

PAGE 2459

Approved
 No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	07	01	82	07	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	212	384	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
LEAD	SAMPLE MEASUREMENT	1.1	3.0	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	5.1	10.1							3/7	24 HC
TSS	SAMPLE MEASUREMENT	575	964	LBS/D					NA	3/7	24 HC
	PERMIT REQUIREMENT	NA	NA							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			318	491-4500	82	07	31
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046597

PERMITTEE NAME ADDRESS (Include Facility Name / Location if different)

NAME PPG Industries, Inc.

ADDRESS G.C. Strickler, WORKS MANAGER

P O BOX 1000

LAKE CHARLES

LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES

LA 70602

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

LA0000761

PERMIT NUMBER

018

DISCHARGE NUMBER

F - FINAL LIMITS
PROCESS WASTEWATER

Approved
OMB No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	07	01	82	07	31
(16-21)	(12-14)	(14-24)	(16-27)	(12-29)	(16-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW RATE	SAMPLE MEASUREMENT	4070	5662	GPM	*****	*****	*****	*****	NA	Cont. Record
00058 1 10 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	CONTINUOUS	RECORD
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	398	493	LBS/DY	*****	*****	*****	*****	0	1/7 24
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	WEEKLY	COMP 24
SOLIDS, TOTAL, SUSPENDED	SAMPLE MEASUREMENT	3080	*****	LBS/DY	*****	*****	*****	*****	0	3/7 24
00530 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	SEE PERMIT	
SOLIDS, TOTAL, SUSPENDED	SAMPLE MEASUREMENT	2621	5770	LBS/DY	*****	*****	*****	*****	0	3/7 24
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	THREE WEEK	COMP 24
TOTAL ORGANIC CARBON (TOC)	SAMPLE MEASUREMENT	962	1708	LBS/DY	*****	*****	*****	*****	0	3/7 24
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	THREE WEEK	COMP 24
CHLORINATED HYDRO- CARBONS, GENERAL	SAMPLE MEASUREMENT	464	1085	LBS/DY	*****	*****	*****	*****	0	3/7 24
74052 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	THREE WEEK	COMP 24
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.C. Strickler
Works Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY KNOWLEDGE OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318-491-4500

DATE

82 7 31

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046598

PERMITTEE NAME (Include Facility Name if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

LA0000761	021
PERMIT NUMBER	DISCHARGE NUMBER

PAGE 2516

MONITORING PERIOD						
YEAR	MO	DAY	TH	YEAR	MO	DAY
82	07	01	TH	82	07	31
(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	11092	25850	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				86	94	106	°F	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA				CONT
pH	SAMPLE MEASUREMENT				2.8	7.4	9.2	pH UNITS	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE			
G. C. STRICKLER WORKS MANAGER						
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	318 491-4500	82	07	31	
		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046599

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 2516

Approved
 OMB No. 2000-0015

LA0000761

PERMIT NUMBER

021

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TH	YEAR	MO	DAY
82	07	01	TH	82	07	31
(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	11092	25850	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				86	94	106	°F	NA	CONT	REC
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
pH	SAMPLE MEASUREMENT				2.8	7.4	9.2	pH UNITS	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318

491-4500

82

07

31

AREA
 CODE

NUMBER

YEAR

MO

DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046600

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

LA0000761

PERMIT NUMBER

024

DISCHARGE NUMBER

PAGE 2520

MONITORING PERIOD

FROM YEAR 82 MO 07 DAY 01 TH RU YEAR 82 MO 07 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT	NA	NA						5/7*	INDIC
pH	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				6.0		11.0		5/7*	GRA.
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

J. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
 AREA CODE

491-4500
 NUMBER

82
 YEAR

07
 MO

31
 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

When flowing

SL 046601

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved UMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST - WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY
LOCATION

LA0000761

PERMIT NUMBER

025

DISCHARGE NUMBER

PAGE 2498

MONITORING PERIOD								
YEAR	MO	DAY		YEAR	MO	DAY		
82	07	01	TH	82	07	31		
(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	<100	<100						NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA	GPM						5/7*	GRAB
pH	SAMPLE MEASUREMENT				8.5	8.9	9.6		NA	5/7*	GRAB
	PERMIT REQUIREMENT				NA		NA	pH UNITS		5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1919. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

AREA CODE

NUMBER

DATE

82 07 31

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

When flowing

SL 046602

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

LA0000761
PERMIT NUMBER

026
DISCHARGE NUMBER

PAGE 2502

MONITORING PERIOD								
YEAR	MO	DAY	TH	YEAR	MO	DAY	TH	DAY
82	07	01	TH	82	07	31	TH	31
(28-31)	(22-31)	(24-31)	RU	(26-31)	(28-31)	(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	35	180						NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA	GPM						5/7*	GRAB
pH	SAMPLE MEASUREMENT				6.6	7.1	7.8		NA	5/7*	GRA
	PERMIT REQUIREMENT				NA		NA	pH UNITS		5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED			318 491-4500	82	07	31

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046603

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PAGE 2536

Approved
OMB No. 2000-0015

NAME **PPG INDUSTRIES INC**
ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R

LA0000761
PERMIT NUMBER

001
DISCHARGE NUMBER

FACILITY LOCATION

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	199645	215500						NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA	GPM						CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				90	102	108		NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA	°F		CONT	RECORD
PH	SAMPLE MEASUREMENT		215		3.6	7.4	9.3		L=1 H=1	CONT	RECORD
	PERMIT REQUIREMENT	NA	1432	MIN/MO	6.0		9.0	pH UNITS		CONT	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. O. STRICKLER
WORKS MANAGER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 23 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

82 08 31

TYPED OR PRINTED

EXPLANATION OF ANY VARIATIONS (Reference to Attachment A)

For PH - See Attachment I, letter of 10/14/82

SL 046604

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY
LOCATION

(2-16)
LA0000761

PERMIT NUMBER

(17-19)
005

DISCHARGE NUMBER

PAGE 2550

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(10-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

FROM

TH
RU

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
FLOW	SAMPLE MEASUREMENT	370	370							NA	3/7	GRAB
	PERMIT REQUIREMENT	NA	NA	GPM							3/7	GRAB
TEMPERATURE	SAMPLE MEASUREMENT				73	84	94			NA	3/7	GRA
	PERMIT REQUIREMENT				NA		NA	°F			3/7	GRAB
pH	SAMPLE MEASUREMENT				7.1	7.2	7.2			7.0	3/7	GRAB
	PERMIT REQUIREMENT				6.0		9.0	pH UNITS			3/7	GRAB
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318

491-4500

82

08

31

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046605

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
B No. 2000-0015

NAME **PE INDUSTRIES INC**
ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY
LOCATION

LA0000761

PERMIT NUMBER

010

DISCHARGE NUMBER

PAGE 2522

MONITORING PERIOD

FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 08 01 82 08 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	1042	2121	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
Cr	SAMPLE MEASUREMENT	0.5	3.4	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	8	16							3/7	24 HC
CIHC	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	*	*								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
G. C. Strickler

TELEPHONE
318 491-4500
AREA CODE NUMBER
DATE
82 03 31
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 018

SL 046606

PERMITTEE NAME ADDRESS (Include Facility Name / Location if different)

NATIONAL POLLUTANT CHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16)
LA0000761

PERMIT NUMBER

(17-19)
011

DISCHARGE NUMBER

PAGE 2526

MONITORING PERIOD								
YEAR	MO	DAY	TH	YEAR	MO	DAY		
82	08	01	TH	82	08	31		
(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	213	252	GPM				NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	RECORD
MERCURY*	SAMPLE MEASUREMENT	0.06	0.20	LBS/D				0	3/7	24
	PERMIT REQUIREMENT	0.21	0.42						3/7	24 HD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
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	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC. § 1001 AND 33 USC. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

AREA
CODE

NUMBER

DATE

82 08 31

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*Sum of Outfall 011 + 111

SL 046607

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R

(2-16)
LA0000761

PERMIT NUMBER

(17-19)
111

DISCHARGE NUMBER

PAGE 2578

FACILITY
LOCATION

MONITORING PERIOD								
YEAR	MO	DAY		YEAR	MO	DAY		
82	08	01	TH	82	08	31		
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	497	650	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
MERCURY	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	*	*								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)			TELEPHONE		DATE			
G. C. STRICKLER WORKS MANAGER					318 491-4500		82	08	31	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			AREA CODE		NUMBER	YEAR	MO	DAY

REMARKS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 011

SL 046608

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY
LOCATION

LA0000761

PERMIT NUMBER

011/017/019

DISCHARGE NUMBER

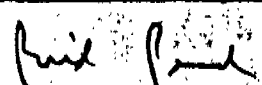
PAGE 2564

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(20-21)	(22-21)	(24-25)	(26-27)	(28-29)	(30-31)

FROM 82 08 01 TH RU

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	527	851						NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA	GPM						CONT	RECORD
TSS	SAMPLE MEASUREMENT	1334	2653						1	3/7	24
	PERMIT REQUIREMENT	1118	2236	LBS/D						3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED			318	491-4500	82	08	31
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

For TSS -- See Attachment II, letter of 10/14/82

SL 046609

PERMITTEE NAME (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME **PPG INDUSTRIES INC**
ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY
LOCATION

LA0000761

PERMIT NUMBER

012

DISCHARGE NUMBER

PAGE 2528

MONITORING PERIOD

FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 08 01 82 08 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (34-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	29	81	GPM					NA	7/7	24 HT
	PERMIT REQUIREMENT	NA	NA							3/7	CALC
MERCURY	SAMPLE MEASUREMENT	0.001	0.003	LBS/D					NA	3/7	24
	PERMIT REQUIREMENT	NA	NA							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
AREA
CODE

491-4500
NUMBER

82
YEAR

08
MO

31
DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046610

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

(2-16) LA0000761 PERMIT NUMBER
 (17-19) 013 DISCHARGE NUMBER

PAGE 2530

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(10-11)	(12-1)	(14-15)	(16-17)	(18-19)	(20-31)

FROM TH RU

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	12007	15142	GPM					NA	CONT	CALC
	PERMIT REQUIREMENT	NA	NA							CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318

491-4500

82

08

31

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046611

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME **PPG INDUSTRIES INC**
 ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY
 LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 2586

Approved
 OMB No. 2000-0015

LA0000761

PERMIT NUMBER

015/016

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TH	YEAR	MO	DAY
	82	08	01	TH	82	08	31
	(10-11)	(22-21)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	163321	191960	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
 AREA CODE

491-4500
 NUMBER

82
 YEAR

08
 MO

31
 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046612

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved No. 2000-0015

PAGE 2534

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

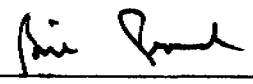
LA0000761
 PERMIT NUMBER

017
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TH	YEAR	MO	DAY
82	08	01	TH	82	08	31
(20-21)	(22-21)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	212	462	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
LEAD	SAMPLE MEASUREMENT	1.14	4.0	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	5.1	10.1							3/7	24 HC
TSS	SAMPLE MEASUREMENT	554	1370	LBS/D					NA	3/7	24 HC
	PERMIT REQUIREMENT	NA	NA							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
G. C. STRICKLER WORKS MANAGER			318	491-4500	82	08	31
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046613

PERMITTEE NAME/ADDRESS (Include Facility Name (Location if different))

NAME PPG Industries, Inc.

ADDRESS P.O. BOX 1000

LAKE CHARLES LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70602

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

LA0000761

PERMIT NUMBER

018

DISCHARGE NUMBER

FINAL LIMITS PROCESS WASTEWATER

Approved No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(10-11)	(12-1)	(12-2)	(12-3)	(12-4)	(12-5)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (46-53)			(1 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX. ANALYSIS (62-63)	FREQUENCY (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE 00058 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	3927	4860	GPM	*****	*****	*****	*****	NA	Cont.	Record
300, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	GPM	*****	*****	*****	*****		CONTINUOUS	RECORD
SOLIDS, TOTAL, SUSPENDED 00530 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	425	487	LBS/DY	*****	*****	*****	*****	0	1/7	2
	PERMIT REQUIREMENT	DAILY AV	DAILY MX	LBS/DY	*****	*****	*****	*****		WEEKLY	CONP2
SOLIDS, TOTAL, SUSPENDED 00530 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	2999	*****	LBS/DY	*****	*****	*****	*****	0	3/7	24
	PERMIT REQUIREMENT	3100	*****	LBS/DY	*****	*****	*****	*****		SEE PERMIT	
SOLIDS, TOTAL, SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2796	4235	LBS/DY	*****	*****	*****	*****	0	3/7	24
	PERMIT REQUIREMENT	DAILY AV	DAILY MX	LBS/DY	*****	*****	*****	*****		THREE WEEK	CONP2
TOTAL ORGANIC CARBON (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1094	1974	LBS/DY	*****	*****	*****	*****	0	3/7	24
	PERMIT REQUIREMENT	DAILY AV	DAILY MX	LBS/DY	*****	*****	*****	*****		THREE WEEK	CONP2
CHLORINATED HYDRO- CARBONS, GENERAL 74052 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	112	318	LBS/DY	*****	*****	*****	*****	0	3/7	2
	PERMIT REQUIREMENT	DAILY AV	DAILY MX	LBS/DY	*****	*****	*****	*****		THREE WEEK	CONP2
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.C. Strickler
Works Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318-491-4500

AREA CODE

NUMBER

DATE

82 8 31

YEAR M DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments if any)

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY
LOCATION

(2-16) LA0000761 PERMIT NUMBER
(17-19) 021 DISCHARGE NUMBER

PAGE 2592

MONITORING PERIOD
FROM YEAR MO DAY TH RU YEAR MO DAY
(26-27) (28-29) (30-31)
82 08 01 TH 82 08 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	28487	34850	GPM				NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				89	98	108	NA	CONT	REC
	PERMIT REQUIREMENT				NA		NA		CONT	RECORD
pH	SAMPLE MEASUREMENT				6.3	7.5	9.6	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA		CONT	RECORD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Bill [Signature]

TELEPHONE
318 491-4500
AREA CODE NUMBER
DATE
82 08 31
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046615

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

LA0000761
PERMIT NUMBER

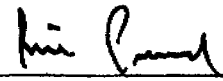
024
DISCHARGE NUMBER

PAGE 2594

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	08	01	82	08	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	Flow observed once during the month								5/7*	INDIC
	PERMIT REQUIREMENT	NA	NA							5/7*	INDIC
pH	SAMPLE MEASUREMENT				9.9	9.9	9.9			5/7*	GR
	PERMIT REQUIREMENT				6.0		11.0	pH UNITS		5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED			318 491-4500 AREA CODE NUMBER	82 08 31 YEAR MO DAY		

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046616

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16) LA0000761 PERMIT NUMBER	(17-19) 025 DISCHARGE NUMBER
---	---

PAGE 2574

MONITORING PERIOD								
YEAR			MO			DAY		
FROM	82	08	01	TH	82	08	31	
	(10-11)	(22-21)	(24-25)	RU	(26-27)	(28-29)	(30-31)	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	61	112	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT			pH UNITS	1.4	8.3	9.1		NA	5/7*	GRAB
	PERMIT REQUIREMENT				NA		NA			5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>G. C. Strickler</i>	TELEPHONE	DATE	
			318 491-4500 AREA CODE NUMBER	82 08 31 YEAR MO DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046617

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16) LA0000761
PERMIT NUMBER
(17-19) 026
DISCHARGE NUMBER

PAGE 2576

MONITORING PERIOD								
YEAR			MO			DAY		
FROM	82	08	01	TH	82	08	31	
	(10-11)	(12-1)	(12-31)	RU	(10-11)	(12-1)	(12-31)	

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	22	64	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT			pH UNITS	6.5	7.1	7.7		NA	5/7*	GRA
	PERMIT REQUIREMENT				NA		NA			5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>G. C. Strickler</i>	TELEPHONE 318 491-4500 AREA CODE NUMBER	DATE 82 08 31 YEAR MO DAY
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046618

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16)
LA0000761
PERMIT NUMBER

(17-19)
024
DISCHARGE NUMBER

PAGE 2594

MONITORING PERIOD							
YEAR			MO	DAY	YEAR		
FROM	82	08	01	TH	82	08	31
	(20-21)	(22-23)	(24-25)	RII	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-43) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	Flow observed once during the month							NA	5/7*	INDIC
	PERMIT REQUIREMENT	NA	NA							5/7*	INDIC
pH	SAMPLE MEASUREMENT				9.9	9.9	9.9	pH UNITS	L=O H=O	5/7*	GR/
	PERMIT REQUIREMENT				6.0		11.0			5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
G.C. STRICKLER WORKS MANAGER			318	491-4500	82	08	31
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

REMARKS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046619

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R

FACILITY _____
 LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

LA0000761

PERMIT NUMBER

025

DISCHARGE NUMBER

PAGE 2574

Approved
 No. 2000-0015

MONITORING PERIOD

FROM	YEAR	MO	DAY	TH	YEAR	MO	DAY
	82	08	01	TH	82	08	31
	(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	61	112	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT				1.4	8.3	9.1	pH UNITS	NA	5/7*	GRA.
	PERMIT REQUIREMENT				NA		NA			5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

AREA
 CODE

NUMBER

DATE

82 08 31

YEAR MO DAY

COMMENT AND EXPLANATION IF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046620

PERMITTEE NAME (Include Facility Name/Location if different)

NAME **PPG INDUSTRIES INC**
 ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY
 LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 2576

Approved
 DMS No. 2000-0015

LA0000761

026

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TH	YEAR	MO	DAY
82	08	01	TH	82	08	31
(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (54-61)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	22	64	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT			pH UNITS	6.5	7.1	7.7	NA	5/7*	GRA.	
	PERMIT REQUIREMENT				NA		NA		5/7*	GRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER G. C. STRICKLER WORKS MANAGER TYPED R PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>For [Signature]</i>	TELEPHONE		DATE		
			318 AREA CODE	491-4500 NUMBER	82 YEAR	08 MO	31 DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046621

PERMITTEE NAME (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY
 LOCATION

(2-16) LA0000761 PERMIT NUMBER
 (17-19) 001 DISCHARGE NUMBER

PAGE 2611

MONITORING PERIOD
 FROM YEAR 82 MO 09 DAY 01 TH RU YEAR 82 MO 09 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	199972	223500	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				81	98	104	°F	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
pH	SAMPLE MEASUREMENT		48	MIN/MO	6.0	7.2	9.6*	pH UNITS	L=0 H=0	CONT	RECORD
	PERMIT REQUIREMENT	NA	432		6.0		9.0			CONT	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

TELEPHONE

318 491-4500

DATE

82 10 30

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

G. C. Strickler

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*Duration of excursions above pH 9.0 were within allowed time period of 60 minutes and, thus, did not constitute a permit violation.

SL 046622

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Approved OMB No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R

LA0000761

PERMIT NUMBER

005

DISCHARGE NUMBER

PAGE 2623

FACILITY
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TH	YEAR	MO	DAY
	82	09	01	TH	82	09	30
	(20-21)	(22-23)	(24-25)	RU	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	474	1100	GPM					NA	3/7	GRAB
	PERMIT REQUIREMENT	NA	NA							3/7	GRAB
TEMPERATURE	SAMPLE MEASUREMENT				71	85	110		NA	3/7	GRA
	PERMIT REQUIREMENT				NA		NA	°F		3/7	GRAB
pH	SAMPLE MEASUREMENT				7.1	7.3	7.5		L=0 H=0	3/7	GRAB
	PERMIT REQUIREMENT				6.0		9.0	pH UNITS		3/7	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318 491-4500 82 10 30
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046623

PERMITTEE NAME ADDRESS (Include Facility Name / Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PAGE 2598

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

LA0000761
PERMIT NUMBER

010
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	09	01	82	09	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	535	662	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
Cr	SAMPLE MEASUREMENT	0.03	0.06	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	8	16							3/7	24 HC
CIHC	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	*	*								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER R AUTHORIZED AGENT

TELEPHONE
318 491-4500
DATE
82 10 30
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 018

SL 046624

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME **PPG INDUSTRIES INC**
 ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY
 LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 2600

Approved
 DMB No. 2000-0015

LA0000761

PERMIT NUMBER

011

DISCHARGE NUMBER

MONITORING PERIOD

FROM

YEAR	MO	DAY		YEAR	MO	DAY
82	09	01	TH	82	09	30
(16-21)	(22-27)	(28-30)	RU	(16-21)	(22-27)	(28-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	197	241	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
MERCURY*	SAMPLE MEASUREMENT	0.04	0.12	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	0.21	0.42							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

82 10 30

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*Sum of Outfall 011 + 111

SL 046625

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PAGE 2653

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16)
LA0000761
PERMIT NUMBER

(17-19)
111
DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 09 01 82 09 30

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	406	460	GPM				NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	RECORD
MERCURY	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT	*	*							
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

AREA
CODE NUMBER

DATE

82 10 30

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 011

SL 046626

PERMITTEE NAME (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2000-0015

NAME **PPG INDUSTRIES INC**
ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 **R**
FACILITY
LOCATION

(2-16)
LA0000761
PERMIT NUMBER

(17-19)
011/017/019
DISCHARGE NUMBER

PAGE **2640**

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	09	01	82	09	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	452	610	GPM				NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	RECORD
TSS	SAMPLE MEASUREMENT	951	1506	LBS/D				0	3/7	24
	PERMIT REQUIREMENT	1118	2236						3/7	24 HC
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
AREA CODE

491-4500
NUMBER

82
YEAR

10
MO

30
DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046627

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Approved OMB No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

(2-16) LA0000761
 PERMIT NUMBER
 (17-19) 012
 DISCHARGE NUMBER

PAGE 2604

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	09	01	82	09	30
(28-31)	(22-24)	(24-26)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	59	107	GPM				NA	7/7	24 HT
	PERMIT REQUIREMENT	NA	NA						3/7	CALC
MERCURY	SAMPLE MEASUREMENT	0.001	0.005	LBS/D				NA	3/7	24
	PERMIT REQUIREMENT	NA	NA						3/7	24 HC
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
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	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318

491-4500

DATE

82

10

30

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046628

PERMITTEE NAME **DRESS (Include Facility Name/Location if different)**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME **PPG INDUSTRIES INC**
ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 **R**
FACILITY
LOCATION

LA0000761
PERMIT NUMBER

013
DISCHARGE NUMBER

PAGE 2606

MONITORING PERIOD								
YEAR			MO			DAY		
82			09			01		
(20-21)			(22-23)			(24-25)		
TH								
R11								
YEAR			MO			DAY		
82			09			30		
(26-27)			(28-29)			(30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	11831	15440	GPM					NA	CONT	CALC
	PERMIT REQUIREMENT	NA	NA							CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 5 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
318 491-4500
AREA CODE NUMBER
DATE
82 10 30
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046629

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PAGE 2660

Approved
 OMB No. 2000-0015

LA0000761

PERMIT NUMBER

015/016

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
82	09	01	82	09	30

FROM

TH

RU

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				N. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	149257	172201						NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA	GPM						CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
 WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under other statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318 491-4500

82 10 30

AREA NUMBER

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046630

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NAME **PPG INDUSTRIES INC**
 ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 **R**

FACILITY
 LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

LA0000761
 PERMIT NUMBER

017
 DISCHARGE NUMBER

PAGE 2610

Approved
 OMB No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	09	01	82	09	30
(12-11)	(12-11)	(12-11)	(12-11)	(12-11)	(12-11)

FROM

TH
 RU

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (34-41)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	149	270	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
LEAD	SAMPLE MEASUREMENT	0.8	1.9	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	5.1	10.1							3/7	24 HC
TSS	SAMPLE MEASUREMENT	325	719	LBS/D					NA	3/7	24 HC
	PERMIT REQUIREMENT	NA	NA							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

B. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

EXPLANATION OF ANY DISCREPANCIES (If any, please explain all discrepancies here)

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 23 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318
 AREA
 CODE

491-4500
 NUMBER

82
 YEAR

10
 MO

30
 DAY

SL 046631

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location)

NAME PPG Industries, Inc.

ADDRESS 3000 DUXFLOO

LAKE CHARLES

LA 70602

LAKE CHARLES

LA 70602

NATIONAL POLLUTANT
DISCHARGE
MONITORING REPORT (DMR)

LA0000761

PERMIT NUMBER

018

DISCHARGE NUMBER

F - FINAL LIMITS
PROCESS WASTEWATER

Approved
No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	09	01	82	09	30
(26-31)	(12-24)	(24-25)	(26-31)	(12-24)	(24-25)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE	SAMPLE MEASUREMENT	4291	5540	GPM	*****	*****	*****	*****	NA	Cont.	Record
00058 1 10 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		CONTI UOUS	RECORD
300, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	315	479	LBS/DY	*****	*****	*****	*****	0	1/7	2
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		WEEKLY	COMP2
SOLIDS, TOTAL, SUSPENDED	SAMPLE MEASUREMENT	2836	*****	LBS/DY	*****	*****	*****	*****	0	3/7	24
00530 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		SEE PERMIT	
SOLIDS, TOTAL, SUSPENDED	SAMPLE MEASUREMENT	2581	4553	LBS/DY	*****	*****	*****	*****	0	3/7	24
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		THREE WEEK	COMP2
TOTAL ORGANIC CARBON (TOC)	SAMPLE MEASUREMENT	1176	2219	LBS/DY	*****	*****	*****	*****	0	3/7	24
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		THREE WEEK	COMP2
CHLORINATED HYDRO- CARBONS, GENERAL	SAMPLE MEASUREMENT	160	1409	LBS/DY	*****	*****	*****	*****	0	3/7	2
4052 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		THREE WEEK	COMP2
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.C. Strickler
Works Manager

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED
ON MY KNOWLEDGE OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR
OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION
IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-
NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING
THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND
33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000
and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318

491 4500

82

09

30

AREA
CODE

NUMBER

YEAR

MO

DAY

EXPLANATION OF ANY VIOLATIONS (If none, state "NONE")

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

m Approved OMB No. 2000-0015

NAME PPG INDUSTRIES INC
 ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
 FACILITY _____
 LOCATION _____

(2-16) LA0000761
 PERMIT NUMBER
 (17-19) 021
 DISCHARGE NUMBER

PAGE 2666

MONITORING PERIOD
 FROM YEAR MO DAY TH RU YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 09 01 TH 82 09 30

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	26062	35050	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				81	93	99	°F	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
pH	SAMPLE MEASUREMENT				5.9	7.3	9.1	pH UNITS	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT, SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318
AREA CODE

491-4500
NUMBER

DATE

82 10 30
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SL 046633

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

(2-16) LA0000761
PERMIT NUMBER
(17-19) 024
DISCHARGE NUMBER

PAGE 2670

MONITORING PERIOD
FROM
YEAR MO DAY YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 09 01 TH 82 09 30
RU

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	FLOW INDICATED ONCE DURING THE MONTH							NA	5/7*	INDIC
	PERMIT REQUIREMENT	NA	NA							5/7*	INDIC
pH	SAMPLE MEASUREMENT				8.6	8.6	8.6	L= 0 H= 0 pH UNITS		5/7*	GR
	PERMIT REQUIREMENT				6.0		11.0			5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318 491-4500 82 10 30
AREA CODE NUMBER YEAR M DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

When flowing

SL 046634

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Approved
OMB No. 2000-0015

NAME **PPG INDUSTRIES INC**
ADDRESS **MR J R FARST-WORKS MANAGER**
P O BOX 1000
LAKE CHARLES LA 70602 **R**

(2-16)
LA0000761
PERMIT NUMBER

(17-19)
025
DISCHARGE NUMBER

PAGE **2648**

FACILITY
LOCATION

MONITORING PERIOD
FROM **82 09 01 TH** **82 09 30**
(10-11) (12-13) (14-15) **RU** (16-17) (18-19) (20-21)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	<100	<100	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT				7.5	8.7	9.3	pH UNITS	NA	5/7*	GR
	PERMIT REQUIREMENT				NA		NA			5/7*	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT
Bill Tucker

TELEPHONE
318 491-4500
AREA CODE NUMBER
DATE
82 10 30
YEAR MONTH DAY

REASON AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
When flowing

SL 046635

PERMITTEE NAME ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PAGE 2652

Approved
OMB No. 2000-0015

NAME PPG INDUSTRIES INC
ADDRESS MR J R FARST-WORKS MANAGER
P O BOX 1000
LAKE CHARLES LA 70602 R
FACILITY _____
LOCATION _____

LA0000761
PERMIT NUMBER

026
DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 09 01 82 09 30

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	42	64	GPM				NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA						5/7*	GRAB
pH	SAMPLE MEASUREMENT			PH UNITS	2.7	6.3	7.7	NA	5/7*	GRA
	PERMIT REQUIREMENT				NA		NA		5/7*	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. C. STRICKLER
WORKS MANAGER
TYPED R PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 16 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
318 491-4500
AREA CODE NUMBER
DATE
82 10 30
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*When flowing

SL 046636