



INDUSTRIES

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

January 10, 1983

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 October, November, and December, 1982. Incidents of excursions during the quarter were reported to your office as they occurred.

Treatment systems performed well during the report period. In summary, there were no excursions reported for the major 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 99.3% for the fourth quarter. In fact, the only excursions experienced during the quarter were four pH incidents; explanations for these 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 046637

pH CONTROL (OUTFALL 001)

October 29, 1982 @ 3:20 a.m. for 1 hr. 10 min. - pH +0.1

Instrumentation malfunction caused high pH material to be released which exceeded the capacity of the pH control system. The instrument was repaired.

December 17, 1982 @ 1:27 a.m. for 33 min. - pH -3.5

The violation was due to an operation problem which resulted in the neutralization capacity of pH control being exceeded.

December 23, 1982 @ 10:58 a.m. for 1 hr. 7 min. - pH +0.9

Inadequate neutralization took place as a result of operator error.

pH CONTROL (OUTFALL 024)

November 29, 1982 - pH +0.1

An investigation could not determine a reason for this marginal excursion.

PERMITTEE NAME ADDRESS (Include Facility Name if different)

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

Form Approved MB 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

PAGE 2688

MONITORING PERIOD								
YEAR			MO			DAY		
FROM	82	10	01	TH	82	10	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	182710	210000	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				80	90	98	°F	NA	CONT	REC
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
pH	SAMPLE MEASUREMENT	NA	322	MIN/MO	5.3*	7.4	9.3	pH UNITS	L=0 H=1	CONT	RECORD
	PERMIT REQUIREMENT	NA	432		6.0		9.0			CONT	RECORD
	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 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 318 491-4500
 AREA CODE NUMBER
 DATE
 82 10 31
 YEAR MO DAY

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

For pH -- See letter of 1/10/83, Attachment I

*Duration of excursion did not exceed 60 minutes, and so, therefore, did not constitute a violation.

SL 046640

PERMITTEE NAME ADDRESS (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) 005
DISCHARGE NUMBER

PAGE 2700

MONITORING PERIOD
FROM
YEAR MO DAY TH RU
82 10 01 82 10 31
(10-11) (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	450	1100	GPM					NA	3/7	GRAB
	PERMIT REQUIREMENT	NA	NA							3/7	GRAB
TEMPERATURE	SAMPLE MEASUREMENT				79	84	90	°F	NA	3/7	GRAB
	PERMIT REQUIREMENT				NA		NA			3/7	GRAB
pH	SAMPLE MEASUREMENT				7.2	7.3	7.7	pH UNITS	3/7	GRAB	
	PERMIT REQUIREMENT				6.0		9.0			3/7	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

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b. Paul

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

82 10 31

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

SL 046641

PERMITTEE NAME ADDRESS (Include Facility Name if different)

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

Form Approved MB 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 (17-19) 010
 PERMIT NUMBER DISCHARGE NUMBER

PAGE 2672

MONITORING PERIOD
 FROM YEAR MO DAY TH RU YEAR MO DAY
 (10-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 10 01 TH 82 10 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	657	1036	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
Cr	SAMPLE MEASUREMENT	0.2	0.9	LBS/D					O	3/7	24
	PERMIT REQUIREMENT	8	16							3/7	24 HC
CHC	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	*	*								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. C. STRICKLER
WORKS MANAGER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318 491-4500

82 10 31

AREA CODE

NUMBER

YEAR

MO

DAY

EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*See Outfall 018

SL 046642

PERMITTEE NAME ADDRESS (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
DISCHARGE NUMBER

PAGE 2676

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

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	196	241	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
MERCURY*	SAMPLE MEASUREMENT	0.04	0.06	LBS/D					0	3/7	24
	PERMIT REQUIREMENT	0.21	0.42							3/7	24 HC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	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		DATE		
318	491-4500	82	10	31
AREA CODE	NUMBER	YEAR	MO	DAY

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

*Sum of Outfall 011 + 111

SL 046643

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 2678

Form Approved
 MB No. 2000-0015

LA0000761

PERMIT NUMBER

012

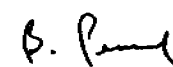
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
82	10	01	TH	82	10	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	44	88	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
	PERMIT REQUIREMENT	NA	NA							3/7	24 HC
	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 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 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			318	491-4500	82	10	31
			AREA CODE	NUMBER	YEAR	MO	DAY

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

SL 046644

PERMITTEE NAME ADDRESS (Include Facility Name/Address 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 2682

Form Approved
 OMB No. 2000-0015

LA0000761

PERMIT NUMBER

013

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TH	YEAR	MO	DAY
82	10	01	TH	82	10	31
(10-21)	(22-27)	(28-31)	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			
FLOW	SAMPLE MEASUREMENT	11945	17040	GPM					NA	CALC
	PERMIT REQUIREMENT	NA	NA						CONT	CALC
	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. § 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 31

AREA
CODE

NUMBER

YEAR

M

DAY

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

SL 046645

PERMITTEE NAME ADDRESS (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)
015/016
DISCHARGE NUMBER

PAGE 2736

MONITORING PERIOD						
FROM						
YEAR	MO	DAY	TH	YEAR	MO	DAY
82	10	01	TH	82	10	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	154117	163432	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	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. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or an imprisonment of between 6 months and 5 years.)

G. C. STRICKLER
WORKS MANAGER

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

B. Pund

TELEPHONE

318 | 491-4500

AREA CODE | NUMBER

DATE

82 | 10 | 31

YEAR | MO | DAY

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

SL 046646

PERMITTEE NAME (Include Facility Name) _____
 ADDRESS (Include Facility Name) _____

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

Form Approved
 OMB No. 2000-0015

PAGE 2684

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

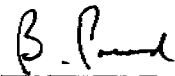
LA0000761
 PERMIT NUMBER

017
 DISCHARGE NUMBER

MONITORING PERIOD								
YEAR	MO	DAY		YEAR	MO	DAY		
82	10	01	TH	82	10	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) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	148	324	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
LEAD	SAMPLE MEASUREMENT	0.9	2.1	LBS/D					0	3/7	24 HC
	PERMIT REQUIREMENT	5.1	10.1							3/7	24 HC
TSS	SAMPLE MEASUREMENT	368	738	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	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	10	31

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

SL 046647

Facility Name/Address (Include)
 Facility Name/Location (if different)

NAME: PPG INDUSTRIES, Inc.

ADDRESS: G.C. Strickler, WORKS MANAGER

P.O. BOX 11000

LAKE CHARLES

FACILITY: PPG IND.

LOCATION: LAKE CHARLES

LA 70602

LA 70602

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

LA0000761

PERMIT NUMBER

018

DISCHARGE NUMBER

F - FINAL LIMITS
 PROCESS WASTEWATER

Form Approved
 EPA No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	10	01	82	10	31
(10-31)	(10-29)	(10-28)	(10-27)	(10-26)	(10-25)

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			
FLOW RATE	SAMPLE MEASUREMENT	4737	5859	GPM	*****	*****	*****	*****	NA	Cont. Record
00058 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	CONTINUOUS	RECORD
300, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	321	488	LBS/DY	*****	*****	*****	*****	1/7	24
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	WEEKLY	COM.
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	2768	*****	LBS/DY	*****	*****	*****	*****	3/7	24
00530 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	SEE PERMIT	*****
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	2884	4900	LBS/DY	*****	*****	*****	*****	3/7	24
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	THREE WEEK	COMP2
TOTAL ORGANIC CARBON (TOC)	SAMPLE MEASUREMENT	969	1742	LBS/DY	*****	*****	*****	*****	3/7	24
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	THREE WEEK	COMP2
CHLORINATED HYDRO- CARBONS, GENERAL	SAMPLE MEASUREMENT	180	510	LBS/DY	*****	*****	*****	*****	3/7	24
4052 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	THREE WEEK	COM.
	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 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. § 1312. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Eric Paul

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
318	491 4500	82	10	31
AREA CODE	NUMBER	YEAR	MO	DAY

WHEN AND EXPLANATION OF ANY VIOLATIONS (If none, state "NONE") IS THE SUM OF 018 AND 010.

PERMITTEE NAME ADDRESS (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 2714

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
82	10	01	TH	82	10	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) (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	449	668	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TSS	SAMPLE MEASUREMENT	821	1262	LBS/D					○	3/7	24 hr
	PERMIT REQUIREMENT	1118	2236							3/7	24 hr
	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.)	B. C.	TELEPHONE	DATE			
G. C. STRICKLER WORKS MANAGER			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	318 491-4500	82	10	31
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

SL 046649

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

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

PAGE 2742

Form Approved
MB No. 2000-0015

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

LA0000761
PERMIT NUMBER

021
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	10	01	82	10	31
(10-21)	(22-31)	(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	19303	22750	GPM					NA	CONT RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				73	88	98		NA	CONT RECORD
	PERMIT REQUIREMENT				NA	NA	NA		CONT	RECORD
pH	SAMPLE MEASUREMENT				6.5	7.4	8.6		NA	CONT RECORD
	PERMIT REQUIREMENT				NA	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. § 1910. (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 31
AREA CODE NUMBER YEAR MO DAY

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

SL 046650

PERMITTEE / ADDRESS (Include Facility Name 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)
024
 DISCHARGE NUMBER

PAGE 2744

Form Approved
 OMB No. 2000-0015

MONITORING PERIOD							
YEAR				MO			
DAY				DAY			
FROM	82	10	01	TH	82	10	31
	(20-21)	(22-23)	(24-25)	RII	(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	Flow indicated four (4) times during month								NA	5/7*	INDIC
	PERMIT REQUIREMENT	NA	NA								5/7*	INDIC
pH	SAMPLE MEASUREMENT				8.8	9.4	10.1		L=O H=O	5/7*	GRAB	
	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 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. § 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 B. P. [Signature]	TELEPHONE		DATE		
			318 AREA CODE	491-4500 NUMBER	82 YEAR	10 MO	31 DAY

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

*When flowing

SL 046651

PERMITTEE NAME ADDRESS (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 _____

LA0000761
PERMIT NUMBER

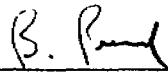
025
DISCHARGE NUMBER

PAGE 2724

MONITORING PERIOD						
YEAR	MO	DAY	TH	YEAR	MO	DAY
82	10	01	TH	82	10	31
(10-31)	(12-31)	(12-31)	RU	(10-31)	(10-31)	(10-31)

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)			N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	<100	<100	GPM					5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							
pH	SAMPLE MEASUREMENT				7.2	8.8	9.4	pH UNITS	5/7*	GRAB
	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.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
G. C. STRICKLER WORKS MANAGER TYPED OR PRINTED			318/ 491-4500	82	10	31

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

*When flowing

SL 046652

PERMITTEE / ADDRESS (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 _____

LA0000761

PERMIT NUMBER

026

DISCHARGE NUMBER

PAGE 2726

MONITORING PERIOD							
YEAR				MO			
DAY				DAY			
FROM	82	10	01	TH	82	10	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)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	24	64						NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA	GPM						5/7*	GRAB
pH	SAMPLE MEASUREMENT				6.6	7.1	8.1		NA	5/7*	GR
	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

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 | 31
AREA CODE | NUMBER | YEAR | MO | DAY

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

*When flowing

SL 046653

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

111

DISCHARGE NUMBER

PAGE 2730

Form Approved
 OMB No. 2000-0015

MONITORING PERIOD

YEAR	MO	DAY	TH	YEAR	MO	DAY
82	10	01	TH	82	10	31

FROM

(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	440	490	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

DATE

318

491-4500

82

10

31

AREA
 CODE

NUMBER

YEAR

MO

DAY

*See Outfall 011

SL 046654

PERMITTEE NAME (Include Facility Name) or (if different)

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

Form Approved
OMB No. 2000-0015

PAGE 2762

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							
				YEAR	MO	DAY	
FROM	YEAR	MO	DAY	TH	YEAR	MO	DAY
	82	11	01	TH	82	11	30
	(20-21)	(22-23)	(24-25)	TH	(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 (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	179267	211500	GPII					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				71	82	93	°F	NA	CONT	RE D
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
pH	SAMPLE MEASUREMENT			MIN/MO	5.6*	7.3	9.7*	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	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.)	B. Paine	TELEPHONE	DATE			
G. C. STRICKLER WORKS MANAGER			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	318 491-4500	82	11	30
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

*Duration of excursions did not exceed 60 minutes, and so, therefore, did not constitute a violation.

SL 046655

PERMITTEE /ADDRESS (Include Facility Name) (on if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PAGE 2774

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 _____

LA0000761
 PERMIT NUMBER

005
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TH	YEAR	MO	DAY
82	11	01	TH	82	11	30
(12-1)	(12-2)	(12-3)	(12-4)	(12-27)	(12-28)	(12-31)

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)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	377	680	GPM					NA	3/7	GRAB
	PERMIT REQUIREMENT	NA	NA							3/7	GRAB
TEMPERATURE	SAMPLE MEASUREMENT				79	82	87	°F	NA	3/7	GR
	PERMIT REQUIREMENT				NA		NA			3/7	GRAB
pH	SAMPLE MEASUREMENT				7.1	7.3	7.5	pH UNITS	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										
	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 11 30

YEAR MO DAY

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

B. P. Smith

SL 046656

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

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

Form Approved
MB No. 2000-0015

NAME **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 | 2748

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	11	01	82	11	30
(20-21)	(22-21)	(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 (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	677	937	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
Cr	SAMPLE MEASUREMENT	0.2	0.4	LBS/D					0	3/7	24 C
	PERMIT REQUIREMENT	8	16							3/7	24 HC
CTHC	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

11
MO

30
DAY

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

*See Outfall 018

SL 046657

PERMITTEE NAME/ADDRESS (Include
Facility Name and location if different)

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

Form Approved
OMB No. 2000-0015

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

LA0000761
PERMIT NUMBER

011
DISCHARGE NUMBER

PAGE 2750

MONITORING PERIOD								
FROM	YEAR	MO	DAY	TH	YEAR	MO	DAY	
	82	11	01	TH	82	11	30	
	(26-27)	(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)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	224	281	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
MERCURY*	SAMPLE MEASUREMENT	0.04	0.14	LBS/D					0	3/7	24 2
	PERMIT REQUIREMENT	0.21	0.42							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

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 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

11
MO

30
DAY

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

*Sum of Outfall 011 + 111

SL 046658

PERMITTEE NAME/ADDRESS (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 _____

PAGE 2754

LA0000761
PERMIT NUMBER

012
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
82	11	01	TH	82	11	30
(18-21)	(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)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	18	89						NA	7/7	24 HT
	PERMIT REQUIREMENT	NA	NA	GPH						3/7	CALC
MERCURY	SAMPLE MEASUREMENT	<.001	0.002						NA	3/7	24
	PERMIT REQUIREMENT	NA	NA	LBS/D						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 TYPED OR PRINTED			318	491-4500	82	11	30

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

SL 046659

PERMITTEE NAME (Include Facility Name) (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 _____

PAGE 2756

LA0000751
PERMIT NUMBER

013
DISCHARGE NUMBER

MONITORING PERIOD								
YEAR	MO	DAY		YEAR	MO	DAY		
82	11	01	TH	82	11	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 (58-65)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	11918	15440	GPM				NA	CONT	CALC
	PERMIT REQUIREMENT	NA	NA						CONT	CALC
	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 11 30
YEAR MO DAY

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

SL 046660

PERMITTEE NAME / ADDRESS (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

PAGE 2810

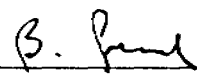
LA0000761
PERMIT NUMBER

015/016
DISCHARGE NUMBER

MONITORING PERIOD									
YEAR			MO	DAY	YEAR			MO	DAY
FROM	82	11	01	TH	82	11	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 (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW	SAMPLE MEASUREMENT	139174	157244	GPM				NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	CALC
	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. § 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	11	30

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

SL 046661

PERMITTEE / ADDRESS (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) 017 DISCHARGE NUMBER

PAGE 2760

MONITORING PERIOD
FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 11 01 TH 82 11 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)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	120	342	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
LEAD	SAMPLE MEASUREMENT	0.26	0.78	LBS/D					0	3/7	24 HC
	PERMIT REQUIREMENT	5.1	10.1							3/7	24 HC
TSS	SAMPLE MEASUREMENT	214	751	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 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 B. P. [Signature]	TELEPHONE		DATE		
			318	491-4500	82	11	30

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

SL 046662

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

NAME: PPG Industries, Inc.
ADDRESS: STRICTER WORKS MANAGER
PO BOX 1000

LAKE CHARLES LA 70602

FACILITY: PPG IND.

LOCATION: LAKE CHARLES LA 70602

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(17-19)

F - FINAL LIMITS
PROCESS WASTEWATER

LA0000761
PERMIT NUMBER

018
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	11	01	82	11	30
(18-21)	(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 (38-45)				N EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE	SAMPLE MEASUREMENT	4271	4780	GPM	*****	*****	*****	*****	NA	Cont	Record
00058 1 10 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****			
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	131	210	LBS/DY	*****	*****	*****	*****	0	1/7	24
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****			
SOLIDS, TOTAL, SUSPENDED	SAMPLE MEASUREMENT	2761	*****	LBS/DY	*****	*****	*****	*****	0	3/7	24
00530 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	2098	4055	LBS/DY	*****	*****	*****	*****	0	3/7	24
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****			
TOTAL ORGANIC CARBON (TOC)	SAMPLE MEASUREMENT	943	1509	LBS/DY	*****	*****	*****	*****	0	3/7	24
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****			
CHLORINATED HYDRO- CARBONS, GENERAL	SAMPLE MEASUREMENT	173	777	LBS/DY	*****	*****	*****	*****	0	3/7	24
74052 1 0 EFFLUENT GROSS VALUE	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. § 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 11 30
YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (If different from above)

SL 046663

PERMITTEE NAME ADDRESS (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

LA0000761

PERMIT NUMBER

011/017/019

DISCHARGE NUMBER

PAGE 2790

FACILITY
LOCATION

MONITORING PERIOD									
YEAR			MO	DAY	YEAR			MO	DAY
FROM	82	11	01	TH	82	11	30		
	(10-31)	(12-31)	(12-25)	RII	(12-27)	(12-29)	(10-31)		

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			
FLOW	SAMPLE MEASUREMENT	403	588	GPM				NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA						CONT	RECORD
TSS	SAMPLE MEASUREMENT	566	1118	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									

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	11	30	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

SL 04666

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 2816

Form Approved
 MB No. 2000-0015

LA0000761

PERMIT NUMBER

021

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TH	YEAR	MO	DAY
82	11	01	TH	82	11	30
(10-21)	(22-24)	(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	20130	27050	GPM					NA	CONT	RECORD
	PERMIT REQUIREMENT	NA	NA							CONT	RECORD
TEMPERATURE	SAMPLE MEASUREMENT				65	78	89	°F	NA	CONT	RECORD
	PERMIT REQUIREMENT				NA		NA			CONT	RECORD
pH	SAMPLE MEASUREMENT				6.6	7.7	10.1	pH UNITS	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

TELEPHONE

DATE

318
 AREA
 CODE

491-4500
 NUMBER

82 11 30
 YEAR MO DAY

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

SL 046665

PERMITTEE NAME ADDRESS (Include
Facility Name/L. 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

024

DISCHARGE NUMBER

PAGE 2820

Form Approved
EPA Form No. 2000-0015

MONITORING PERIOD

FROM YEAR MO DAY TH RU YEAR MO DAY
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
82 11 01 82 11 30

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	Flow indicated six (6) times during month								NA	5/7*	INDIC
	PERMIT REQUIREMENT	NA	NA								5/7*	INDIC
pH	SAMPLE MEASUREMENT				7.3	9.5	11.1	LE O HE I			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.)	TELEPHONE		DATE		
G. C. STRICKLER WORKS MANAGER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	318	491-4500	82	11
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

*When flowing

For pH -- See Letter of 1/10/83, Attachment II

SL 046666

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 2798

Form Approved
 OMB No. 2000-0015

MONITORING PERIOD

FROM			THRU		
YEAR	MO	DAY	YEAR	MO	DAY
82	11	01	82	11	30
(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	<100	<100	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT			pH UNITS	8.4	9.1	9.5		NA	5/7*	GR
	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 11 30

YEAR MO DAY

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

*When flowing

SL 046667

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

026

PERMIT NUMBER

DISCHARGE NUMBER

PAGE 2802

Form Approved
 MB No. 2000-0015

MONITORING PERIOD

FROM YEAR MO DAY TH RU YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
 82 11 01 82 11 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 (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	60	506	GPM					NA	5/7*	GRAB
	PERMIT REQUIREMENT	NA	NA							5/7*	GRAB
pH	SAMPLE MEASUREMENT			pH UNITS	6.3	7.1	8.8		NA	5/7*	GR
	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	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	11	30	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

*When flowing

SL 046668

PERMITTEE NAME ADDRESS (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 _____

PAGE 2805

(2-16) LA0000761 (17-19) 111
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	11	01	82	11	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 (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	388	450	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										

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.)	B. Paine	TELEPHONE	DATE		
G. C. STRICKLER WORKS MANAGER			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	318 AREA CODE	491-4500 NUMBER	82 YEAR

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

*See Outfall 011

SL 046669

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 XXXXXXXXXXXXXXXX PPG Industries, Inc.
ADDRESS G.C. Strickler - RKS - A4663
CITY LAKE CHARLES STATE LA ZIP 70602
FACILITY PPG INT.
LOCATION LAKE CHARLES STATE LA ZIP 70602

LAKE CHARLES (2-16) 001 (17-19)
PERMIT NUMBER DISCHARGE NUMBER

F - FINAL LIMITS
FINAL OUTFALL

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

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			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	75	83	NA	CONT	RECORD
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		CONTINUOUS	RECORD
FLOW RATE 00058 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	181403	223000		*****	*****	*****	NA	CONT	RECORD
	PERMIT REQUIREMENT	*****	*****	GPM	*****	*****	*****		CONTINUOUS	RECORD
PH 00400 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	2.5	*****	10.6	1	CONT	RECORD
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	1	CONTINUOUS	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

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 12 31

TYPED OR PRINTED

AREA CODE

NUMBER

YEAR

MO

DAY

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

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.

For pH -- See Letter of 1/10/83, Attachment I

SL 046670

DISCHARGE MONITORING REPORT (DMR)

NAME XXXXXXXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler - 1000 S. A. Miller

DATE CHANGED 64 79602

FACILITY PP-10

LOCATION AKC CHURCH CA 76602

LA 00000761

PERMIT NUMBER

005

DISCHARGE NUMBER

MONITORING PERIOD

MONTHLY PERIOD				MONTHLY PERIOD		
YEAR	MO	DAY		YEAR	MO	DAY
82	12	01	TO	82	12	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL LIMITS
SURFACE RUNOFF

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			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	80	85	DEG. F	NA	3/7	GRAB
EFFLUENT GROSS VALUE FLOW RATE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			THREE	GRAB
00058 1 0	SAMPLE MEASUREMENT	784	4400	GPM	*****	*****	*****	*****	NA	3/7	GRAB
EFFLUENT GROSS VALUE PH	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		THREE	GRAB
00400 1 0	SAMPLE MEASUREMENT	*****	*****	*****	7.1	*****	7.5	SU	0	3/7	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM			THREE	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

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.)

B. P.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
318 491-4500
AREA CODE NUMBER

DATE
82 12 31
YEAR MO DAY

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

SL 046671

PERMITTEE NAME (Include Facility Name if different)

NAME XXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler-PPG WORKS

LAKE CHARLES LA 70502

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70502

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

LA 00000761

010

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	82	12	01		82	12	31
	(10-31)	(12-31)	(12-31)		(12-31)	(12-31)	(12-31)

F - FINAL LIMITS

AREA B UNCONTAMINATED CTND

Form Approved
EPA No. 2000-0015

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 RATE											
00058 1 0	SAMPLE MEASUREMENT	603	1461		*****	*****	*****	*****	NA	CONT	RECORD
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	GPM	*****	*****	*****	*****		CONTINUOUS	RECORD
CHLORINE, TOTAL (AS CR)	SAMPLE MEASUREMENT	0.08	0.45		*****	*****	*****	*****	0	3/7	24
01034 1 0	PERMIT REQUIREMENT	DAILY AV	DAILY MAX	LBS/DY	*****	*****	*****	*****		THREE WEEK	COMP 2
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*	*		*****	*****	*****	*****	-	3/7	24 HC
CHLORINE, TOTAL (AS CR)	PERMIT REQUIREMENT	DAILY AV	DAILY MAX	LBS/DY	*****	*****	*****	*****		THREE WEEK	COMP 2
74052 1 0	SAMPLE MEASUREMENT										
EFFLUENT GROSS VALUE	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		318 491-4500		82	12	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)

*See Outfall 018

SL 046672

PERMITTEE NAME/ADDRESS (Include Facility Name if different)

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

Form Approved
OMB No. 2000-0015

NAME XXXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler - WORKS MANAGER

0 J K R L O R I

LAKE CHARLES LA 70602

FACILITY PPG I D

LOCATION LAKE CHARLES LA 70602

LA00-0761

PERMIT NUMBER

011

DISCHARGE NUMBER

F - FINAL LIMITS
MERCURY CELLS SEWER

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

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-43) 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 RATE	SAMPLE MEASUREMENT	230	338		*****	*****	*****	*****	NA	CONT	RECORD
00058 1 0	PERMIT REQUIREMENT	*****	*****	GPM	*****	*****	*****	*****		CONT	RECORD
EFFLUENT GROSS VALUE											
MERCURY, TOTAL *	SAMPLE MEASUREMENT	0.024	0.060		*****	*****	*****	*****	0	3/7	24
(AS HG)	PERMIT REQUIREMENT	.21	.42	LBS/DY	*****	*****	*****	*****		THREE	COMP 24
71900 1 0		DAILY AV	DAILY EX							WEEK	
EFFLUENT GROSS VALUE											
	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	12	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	M	DAY

COMMENT AND EXPLANATION OF ANY VIOLATION: NO DISCHARGE OF MERCURY CELLS SEWER (SEE PPG DWG 20A-1-1577-P-6, STREAMS 5,6).

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.

*Sum of Outfall 011 + 111

SL 046673

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

NAME XXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler - OPS MANAGER

P.O. BOX 100

LAKE CHARLES LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70602

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

1A0000761

PERMIT NUMBER

012

DISCHARGE NUMBER

F - FINAL LIMITS

HG CELL COOLING TWR BLOWDOWN

Form Approved
EPA No. 2000-0015

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
82	12	01	82	12	31
(12-31)	(12-31)	(12-31)	(12-31)	(12-31)	(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 RATE	SAMPLE MEASUREMENT	4	57	GPM	*****	*****	*****	*****	NA	7/7	24 HT
00058 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		THREE/CALCT WEEK	
MERCURY, TOTAL (AS HG)	SAMPLE MEASUREMENT	<0.001	<0.001	LBS/DY	*****	*****	*****	*****	NA	3/7	24
71900 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		THREE/COMP2 WEEK	
	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

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 imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

82 12 31

AREA
CODE

NUMBER

YEAR

MO

DAY

DISCHARGE OF POLLUTANTS TO THE LAKE WITH OTHER STREAM(S).

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.

MERCURY SAMPLE TYPE LINEAR OR TIME COMPOSITE

SL 046674

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

NAME ~~XXXXXXXXXXXX~~ PPG Industries, Inc.
 ADDRESS G.C. Strickler - WORKS MANAGER
 P O BOX 1200
 LAKE CHARLES LA 70602
 FACILITY PPG IND.
 LOCATION LAKE CHARLES LA 70602

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

(2-16)

LA0000761

PERMIT NUMBER

(17-19)

013

DISCHARGE NUMBER

F - FINAL LIMITS

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Form Approved
 MB No. 2000-0015

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)
 82 12 01 82 12 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)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE	SAMPLE MEASUREMENT	11624	13607	GPM	*****	*****	*****	*****	NA	CONT	CALC
00058 1 0	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	*****	CONTIN	CALCTD
EFFLUENT GROSS VALUE	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	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	12	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

SL 046675

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 R
FACILITY _____
LOCATION _____

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

(2-16)

LA0000761

PERMIT NUMBER

(17-19)

015/016

DISCHARGE NUMBER

MONITORING PERIOD

FROM

YEAR	MO	DAY
82	12	01

 TH

YEAR	MO	DAY
82	12	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	128535	139320	GPM	*****	*****	*****	*****	NA	CONT	RECORD
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		CONTINUOUS	CALCTD
	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 12 31

YEAR MO DAY

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

SL 046676

PERMITTEE / ADDRESS (Include Facility Name, location if different)

NAME XXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler WORKS A-1000

LAKE CHARLES LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70602

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

(2-16)

(17-19)

LA00000761

PERMIT NUMBER

017

DISCHARGE NUMBER

F - FINAL LIMITS

LEAD TREATMENT DISCHARGE

arm Approved
OMB No. 2000-0015

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	12	01	82	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(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 RATE 00058 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	55	162	GPM	*****	*****	*****	*****	NA	CONT	RECORD
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	15	45	LBS/DY	*****	*****	*****	*****	NA	3/7	24
LEAD, TOTAL (AS Pb) 01081 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.14	0.37	LBS/DY	*****	*****	*****	*****	0	3/7	24 HC
	PERMIT REQUIREMENT	5.1 DAILY AV	10.1 DAILY MX		*****	*****	*****	*****		THREE WEEK	COMP2
	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	12	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.

SL 046677

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

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

Form Approved
OMB No. 2000-0015

NAME XXXXXXXXXXXXXXXX PPG Industries, Inc.
ADDRESS G.C. Strickler - WORKS MANAGER
P.O. BOX 1500
LAKE CHARLES LA 70602
FACILITY PPG IND.
LOCATION LAKE CHARLES LA 70602

LA0000761
PERMIT NUMBER

018
DISCHARGE NUMBER

F - FINAL LIMITS
PROCESS WASTEWATER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	12	01	82	12	31
(28-31)	(12-31)	(24-25)	(28-31)	(12-31)	(10-11)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (18-43) 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 RATE					*****	*****	*****	*****	NA	CONT	RECORD
00058 1 0 EFFLUENT GROSS VALUE		4570	6403	GPM	*****	*****	*****	*****		CONTINUOUS	RECORD
800, 5-DAY (20 DEG. C)					*****	*****	*****	*****			
00310 1 0 EFFLUENT GROSS VALUE		169	300		*****	*****	*****	*****	0	1/7	24
SOLIDS, TOTAL SUSPENDED		774	1298	LBS/DY	*****	*****	*****	*****		WEEKLY	COMP24
00530 R 0 SEE COMMENTS BELOW		DAILY AV	DAILY MX		*****	*****	*****	*****			
SOLIDS, TOTAL SUSPENDED		2737	*****		*****	*****	*****	*****	0	3/7	24 HC
00530 R 0 SEE COMMENTS BELOW		3100	*****	LBS/DY	*****	*****	*****	*****		SEE PERMIT	
SOLIDS, TOTAL SUSPENDED		2273	4500		*****	*****	*****	*****	0	3/7	24 HC
00530 1 0 EFFLUENT GROSS VALUE		4500	8700	LBS/DY	*****	*****	*****	*****		THREE WEEK	COMP24
TOTAL ORGANIC CARBON (DOC)					*****	*****	*****	*****	0	3/7	24 HC
00680 1 0 EFFLUENT GROSS VALUE		756	1300		*****	*****	*****	*****			
CHLORINATED HYDRO- CARBONS, GENERAL		1300	2600	LBS/DY	*****	*****	*****	*****		THREE WEEK	COMP24
74052 1 0 EFFLUENT GROSS VALUE		DAILY AV	DAILY MX		*****	*****	*****	*****	0	3/7	24 HC
		684	1368	LBS/DY	*****	*****	*****	*****		THREE WEEK	COMP24

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			82 12 31				
TYPED & PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	318 491-4500	AREA CODE	NUMBER	YEAR	MO	DAY

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

SL 046678

PERMITTEE / ADDRESS (Include Facility Name if different)

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

Form Approved
OMB No. 2000-0015

NAME XXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler WORKS MANAGER

LAKE CHARLES LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70602

(2-16)
140000761
PERMIT NUMBER

(17-19)
019
DISCHARGE NUMBER

F - FINAL LIMITS
SUM OF 011,017,019, FLOW & TSS

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
82	12	01		82	12	31
(10-11)	(12-1)	(24-2)		(12-1)	(12-1)	(10-31)

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 RATE 00058 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	284	442	GPM	*****	*****	*****	*****	NA	CONT	RECORD
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****		CONTINUOUS	RECORD
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	317	475	LBS/DY	*****	*****	*****	*****	0	3/7	24
	PERMIT REQUIREMENT	1118	2236		*****	*****	*****	*****		THREE WEEK	COMP2
	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 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			
G. C. STRICKLER Works Manager			318 491-4500	82	12	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

SL 046679

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

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

Form Approved
EPA Form 400-0015

NAME XXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler WORKS - A-400R

POST BOX 1000

LAKE CHARLES LA 70602

FACILITY PPG TAD

LOCATION LAKE CHARLES LA 70602

LA0000761

PERMIT NUMBER

021

DISCHARGE NUMBER

F - FINAL LIMITS
COOLING WATER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
82	12	01		82	12	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 (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	71	84		NA	CONT
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****		CONT	RECORD
EFFLUENT GROSS VALUE FLOW RATE	SAMPLE MEASUREMENT	20050	21750		*****	*****	*****		NA	CONT
00058 1 0	PERMIT REQUIREMENT	*****	*****	GPM	*****	*****	*****		CONT	RECORD
EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	*****	*****	*****	5.2	*****	11.3		NA	CONT
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	MAXIMUM		CONT	RECORD
EFFLUENT GROSS VALUE	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 HEREON 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. § 1315. (Penalties under these statutes may include fines up to \$10,000 and/or imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
B. Paul

TELEPHONE 318 491-4500
DATE 82 12 31
YEAR MO DAY

THESE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.

SL 046680

PERMITTEE NAME (Include Facility Name) (1-10) (if different)

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

Form Approved
OMB No. 2000-0015

NAME XXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler - Lake Charles, LA

LAKE CHARLES LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70602

LA0000761
PERMIT NUMBER

024
DISCHARGE NUMBER

F - FINAL LIMITS
SURFACE DRAINAGE - PRODU STRG

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	12	01	82	12	31
(20 11)	(21 29)	(24 29)	(24 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			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.4	*****	10.1		0	5/7	GRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	11.0	SI	0	WEEK =	GRAB
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM			DAYS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
G. C. STRICKLER Works Manager			318 491-4500	82	12	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

Flow indicated five (5) times during the month

SL 046681

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

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

Form Approved
MB No. 2000-0015

NAME ~~XXXXXXXXXXXXXXXX~~ PPG Industries, Inc.
ADDRESS ~~G.C. Strickler~~ WORKS MANAGER
CITY ~~LAKE CHARLES~~ LA 70602
FACILITY ~~PPG T.D.~~
LOCATION ~~LAKE CHARLES~~ LA 70602

LA0000761
PERMIT NUMBER

025
DISCHARGE NUMBER

F - FINAL LIMITS
STORM DRAINAGE 1500 T/D CHLRN

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
82	12	01	82	12	31
(10-11)	(12-1)	(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 RATE	SAMPLE MEASUREMENT	111	413		*****	*****	*****	*****	NA	5/7*	GRAB
00058 1 0	PERMIT REQUIREMENT	*****	*****	GPM	*****	*****	*****	*****		DAILY	GRAB
EFFLUENT GROSS VALUE											
PH	SAMPLE MEASUREMENT	*****	*****	*****	3.1	*****	9.5		NA	5/7*	GR
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		DAILY	GRAB
EFFLUENT GROSS VALUE					MINIMUM		MAXIMUM				
	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		318 491-4500		82	12	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)

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.
MONITOR WHILE FLOWING ALL PARAMETERS.
*When flowing

SL 046682

PERMITTEE NAME (Include Facility Name/Location if different)

NAME XXXXXXXXXXXXXXXX PPG Industries, Inc.

ADDRESS G.C. Strickler WORKS MANAGER

PERMIT NO. 1000

LAKE CHARLES LA 70602

FACILITY PPG IND.

LOCATION LAKE CHARLES LA 70602

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

(2-16)

(17-19)

1A0000761

026

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	82	12	01		83	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL LIMITS
STORM DRAINAGE

Approved
OMB No. 2000-0015

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	44	506	GPM	*****	*****	*****	*****	NA	5/7*	GRAB
00058 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****	*****	WEEK = DAYS	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.3	*****	8.4	*****	NA	5/7*	GRA
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	WEEK = DAYS	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			318 491-4500	82	12	31	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

*When flowing

SL 04668

LOCATION	LAKE CHARLES	LA 70602
----------	--------------	----------

(17-19)

111

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY
------	----	-----

YEAR	MO	DAY
------	----	-----

82	12	01
----	----	----

82	12	31
----	----	----

$\frac{1}{2} \times \frac{1}{2}$	$\frac{1}{2} \times \frac{1}{2}$	$\frac{1}{2} \times \frac{1}{2}$
$\frac{1}{2} \times \frac{1}{2}$	$\frac{1}{2} \times \frac{1}{2}$	$\frac{1}{2} \times \frac{1}{2}$

12	22	31
(24.27)	(28.29)	(30.1)

F - FINAL LIMITS
MERCURY TRACE SEWER

Form Approved
OMB No. 2000-0015

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	*****	*****	*****	*****	*****	*****	*****	NA	CONT	RECORD
00058 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTIN	RECORD
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*	*		*****	*****	*****	*****	—	3/7	24
MERCURY, TOTAL (AS HG)	PERMIT REQUIREMENT	0.21	0.42	LBS/DY	*****	*****	*****	*****	THREE	COMP2	
71900 1 0		DAILY AV	DAILY MX						WEEK		
EFFLUENT GROSS VALUE	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.)

TELEPHONE

318 491-4500

DATE

82 12 31

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

B. P.

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

*See Outfall 011

SL 046684