

August 10, 2015

Ms. Cheryl Edwards Kentucky Division of Water 200 Fair Oaks Lane, 4<sup>th</sup> Floor Frankfort, Kentucky 40601

# RE: Cedar Creek WQTC, KPDES No: KY0098540 Discharge Monitoring Report-July 2015

Dear Ms. Edwards:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Cedar Creek WQTC, KPDES No.: KY0098540 for the month of July 2015.

There were no exceedances or overflows to report.

Also attached is a bypass report.

If you have any questions concerning the attached DMR's, please contact me at (502) 239-7574.

Sincerely.

Staci Huber Process Supervisor Central Region

SMH/Cedar Creek 07.15.doc

Enclosures

cc: T. Singleton R. Shaw



Facility Name/Location if different)

NAME CEDAR CREEK W					. —							
ADDRESS C/O CEDAR CREE	<u>EK WQTC</u>		KY0098	540		001 2	MAJOR					
8405 CEDAR CRE			PERMIT NU	MBER	DI	SCHARGE NUMBER	(SUBR LV	)				
LOUISVILLE KY	40211						F - FINAL		JEF	FE		
FACILITY CEDAR CREEK W	QTC MSD			MONITO	RING PERIC	D	NEW EXP	ANSION				
			YEAR	MO DAY		AR MO DAY	EFFLUEN					
LOCATION LOUISVILLE	KY 40291		FROM 15	07 01	то	15 07 31	[] No Disc	harge				
ATTN: DENNIS THOMMASSO	N SR. METRO OPS	8			·	Ν	IOTE: Read ins	tructions	before	com	pleting this	s form
PARAMETER			QUANTITY OR LOADING	3		QUALITY OR CONCENTRAT	ON			NO	FREQUENCY	SAMPLE
	$\mid$ $\times$ $\mid$									EX	OF	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	1U 1	NITS		ANALYSIS	
OXYGEN, DISSOLVED	SAMPLE	*****	*****	****	7.8	*****	*****	(*	19)	0	19	GR
(DO)	MEASUREMENT			****	7.0				G/L	v	WEEK	0.11
00300 1 0 0	PERMIT	*****	*****	****	7.0	*****	*****	(19			THREE/	GR
EFFLUENT GROSS VALUE	MEASUREMENT			****	INST MI	N			G/L		WEEK	on
PH	SAMPLE	*****	*****	****	6.6	*****	7.4		12)	0	19	GR
l' ''	MEASUREMENT			****	0.0		,.+		SU	U	WEEK	OIX
00400 1 0 0	PERMIT	*****	*****	****	6.0	*****	9.0	(12			THREE/	GR
EFFLUENT GROSS VALUE	MEASUREMENT			****	MINIMU	м	MAXIMU		SU		WEEK	ÖN
SOLIDS, TOTAL	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DAT		19)	0	THREE/	CP
SUSPENDED	MEASUREMENT	NO DATA	NO DATA	LBS/DY		NO DATA	NO DAI		G/L	0	WEEK	01
00530 G 0 0	PERMIT	REPORT	REPORT	(26)	*****	REPORT	REPOR				THREE/	CP
RAW SEW/INFLUENT	MEASUREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MXWK		G/L		WEEK	01
SOLIDS, TOTAL	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DAT		19)	0	THREE/	CP
SUSPENDED	MEASUREMENT			LBS/DY					G/L	v	WEEK	0.
00530 1 0 0	PERMIT	1876	2815	(26)	*****	30	45	(19			THREE/	CP
EFFLUENT GROSS VALUE	MEASUREMENT	MOAVG	MX WK AV	LBS/DY		MOĂVG	MX WK		G/L		WEEK	01
NITROGEN, AMMONIA	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DAT		19)	0	THREE/	CP
TOTAL (AS N)	MEASUREMENT		NO DAIN	LBS/DY		NO DAIN			G/L	0	WEEK	01
00610 G 0 0	PERMIT	REPORT	REPORT	(26)	*****	REPORT	REPOR				THREE/	CP
RAW SEW/INFLUENT	MEASUREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MXWK		G/L		WEEK	0.
NITROGEN, AMMONIA	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DAT		19)	0	THREE/	СР
TOTAL (AS N)	MEASUREMENT			LBS/DY					G/L	Ŭ	WEEK	
00610 1 1 0	PERMIT	250	375	(26)	*****	4	6	(19			THREE/	CP
EFFLUENT GROSS VALUE	MEASUREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK		, G/L		WEEK	0.
PHOSPHORUS, TOTAL	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DAT		19)	0	THREE/	CP
(AS P)	MEASUREMENT			LBS/DY				<b>`</b>	G/L	Ŭ	WEEK	
00665 1 1 0	PERMIT	63	94	(26)	*****	1.0	1.5	(19			THREE/	СР
EFFLUENT GROSS VALUE	MEASUREMENT	MOAVG	MX WK AV	LBS/DY		MOAVG	MX WK		G/L		WEEK	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TY FO LAW THAT I HAVE PER	RSONALLY EXAMINED AMD AI	M FAMILIAR WITH THE	INFORMATION			TELEPH				TE
GREG HEITZMAN	THE INFORMATION, I BELL	EVE THE SUBMITTED INFOR	MATION IS TRUE, ACCURAT	E AND COMPLETE, I A	M AWARE THAT		F		=			
EXECUTIVE DIRECTOR	THERE ARE SIGNIFICANT AND IMPRISONMENT. SEE	PENALTIES FRO SUBMITTIN 18 U.S.C 1001 AND 33 U.S.C	IG FALSE INFORMATION, INCI C 1319. (Penalties under these	UDING THE POSSIBIL statutes may include fir	ITY OF FINE nes up to \$10,000			502 5	540-600	00		
		ent of between 6 months and 5		,	SI	GNATURE OF PRINCIPAL			NUMBER			
						OFFICER OR AUTHORIZ	ED AGENT	CODE			YEAR M	DAY C

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

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES)

DISCHARGE MONITORING REPORT (DMR)

Facility Name/Location if different)

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES) DISCHARGE MONITORING REPORT (DMR)

NAME CEDAR CREEK WO	OTC MSD				· · ·						
ADDRESS C/O CEDAR CREE			KY0098	540		001 2	MAJOR				
8405 CEDAR CREE			PERMIT NU		DISCH	ARGE NUMBER	(SUBR LV)				
LOUISVILLE KY							F - FINAL	JEF	FE		
FACILITY CEDAR CREEK WO				MONITO	RING PERIOD		NEW EXPANS				
			YEAR	MO DAY	YEAR	MO DAY	EFFLUENT				
	<y 40291<="" td=""><td></td><td>FROM 15</td><td>07 01</td><td>то 15</td><td>07 31</td><td>[] No Discharg</td><td>е</td><td></td><td></td><td></td></y>		FROM 15	07 01	то 15	07 31	[] No Discharg	е			
ATTN: DENNIS THOMMASSON	SR. METRO OPS					NC	TE: Read instruct	ions before	e com	pleting this	; form
PARAMETER	$\land$		QUANTITY OR LOADING	3	QUAI	LITY OR CONCENTRATION	N		NO	FREQUENCY	SAMPLE
	$\mid$ $\times$ $\mid$					•			EX	OF	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	1
FLOW, IN CONDUIT OR	SAMPLE	6.12	14.28	(03)	*****	*****	*****	****	0	19	CN
THRU TREATMENT PLANT	MEASUREMENT			ŇGĎ				****		UOUS	
50050 1 0 0	PERMIT	REPORT	REPORT	(03)	*****	*****	*****	****		CONTIN	CN
EFFLUENT GROSS VALUE	MEASUREMENT	MO AVG	DAILY MX	MGD				****		UOUS	
COLIFORM, FECAL	SAMPLE	*****	*****	****	*****	NO DATA	NO DATA	(13)	0	THREE/	GR
GENERAL	MEASUREMENT			****				100ML		WEEK	
74055 1 0 0	PERMIT	*****	*****	****	*****	200	400	(13)		THREE/	GR
EFFLUENT GROSS VALUE	MEASUREMENT			****		30DA GEO	7 DA GEO	100ML		WEEK	
BOD, CARBONACEOUS	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DATA	(19)	0	THREE/	CP
05 DAY, 20C	MEASUREMENT			LBS/DY				MG/L		WEEK	
80082 G 0 0	PERMIT	REPORT	REPORT	(26)	*****	REPORT	REPORT	(19)		THREE/	CP
RAW SEW/INFLUENT	MEASUREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK AV	MG/L		WEEK	
BOD, CARBONACEOUS	SAMPLE	NO DATA	NO DATA	(26)	*****	NO DATA	NO DATA	(19)	0	THREE/	CP
05 DAY, 20C	MEASUREMENT			LBS/DY				MG/L		WEEK	
80082 1 0 0	PERMIT	625	938	(26)	*****	10	15	(19)		THREE/	CP
EFFLUENT GROSS VALUE	MEASUREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK AV	MG/L		WEEK	
BOD, CARB 5-DAY, 20	SAMPLE	*****	*****	****	NO DATA	*****	*****	(23)	0	ONCE/	CA
DEG C, PERCENT REMVL	MEASUREMENT			****				CENT		MONTH	
80091 K 0 0	PERMIT	*****	*****	****	85	*****	*****	(23)		ONCE/	CA
PERCENTREMOVAL	MEASUREMENT			****	MO MIN			CENT		MONTH	
SOLIDS, SUSPENDED	SAMPLE	*****	*****	****	NO DATA	*****	*****	(23)	0	ONCE/	CA
PERCENT REMOVAL	MEASUREMENT			****				CENT		MONTH	
81011 K 0 0	PERMIT	*****	*****	****	85	*****	*****	(23)		ONCE/	CA
PERCENTREMOVAL	MEASUREMENT			****	MO MIN			CENT		MONTH	
	SAMPLE										
	MEASUREMENT										
	PERMIT										
	MEASUREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SUBMITTED HEREIN AND E	BASED ON MY INQUIRY OF 1	SONALLY EXAMINED AMD AN THOSE INDIVIDALS IMMEDIAT	ELY RESPONSIBLE FO	OR OBTAINING		TE	LEPHONE		DA	ΓE
GREG HEITZMAN	THE INFORMATION. I BELI	EVE THE SUBMITTED INFOR	MATION IS TRUE, ACCURATI	E AND COMPLETE. I A	M AWARE THAT			L 540.00			
EXECUTIVE DIRECTOR	AND IMPRISONMENT. SEE		C 1319. (Penalties under these		nes up to \$10,000	TURE OF PRINCIPAL E	XECUTIVE AREA	540-60 NUMBER			
TYPED OR PRINTED			,			ICER OF PRINCIPAL E		NOMBE	`	YEAR MO	D DAY
COMMENT AND EXPLANTION OF ANY VIOLATION	IS (Reference all attachm	ents here)						1			2

Facility Name/Location if different)

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES) DISCHARGE MONITORING REPORT (DMR)

Facility Name/Location II dillerent)			DISCHARGE MOI			)						
NAME CEDAR CREEK W	QTC MSD											
ADDRESS C/O CEDAR CREE			KY0098	3540		001 Y	MAJOR					
8405 CEDAR CRE			PERMIT NU			DISCHARGE NUMBER	(SUBR L	<i>/</i> )				
LOUISVILLE KY							F - FINAL		JEF	FF		
FACILITY CEDAR CREEK W				MONITOF		IOD	METALS				QUARTE	-RLY
OLD A CONCEPT			YEAR	MO DAY		YEAR MO DAY	EFFLUE					
LOCATION LOUISVILLE	KY 40291		FROM 15	07 01	то	15 07 31	[] No Dis					
ATTN: DENNIS THOMMASSO		3					NOTE: Read in	•		e com	nletina thi	s form
PARAMETER			QUANTITY OR LOADIN	<u>^</u>		QUALITY OR CONCENTRA				NO	FREQUENCY	SAMPLE
PARAMETER			QUANTITY OR LOADIN	9		QUALITY OR CONCENTRA	TION			EX	OF	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMU	JM AVERAGE	MAXIMU	IM	UNITS	EV	ANALYSIS	
		-				· · · · · · · · · · · · · · · · · · ·						L
HARDNESS, TOTAL	SAMPLE	*****	*****	****	*****	* NO DATA	NO DA		(19)	0	QTRLY	CP
(AS CACO3)	MEASUREMENT			****					MG/L			
00900 1 0 0	PERMIT	*****	*****	****	*****	KEPUKI	REPO		(19)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY	MX	MG/L			
CADMIUM, DISSOLVED	SAMPLE	*****	*****	****	*****	* NO DATA	NO DA	TA	(19)	0	QTRLY	CP
(AS CD)	MEASUREMENT			****			_		ŇG/L			
01025 1 0 0	PERMIT	*****	*****	****	*****	* REPORT	REPO		(19)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY		MG/L			
COPPER, DISSOLVED	SAMPLE	*****	*****	****	****		NO DA		(19)	0	QTRLY	CP
(AS CU)	MEASUREMENT			****					MG/L	0	QIIILI	01
01040 1 0 0	PERMIT	*****	*****	****	*****	* REPORT	REPO		(19)		QTRLY	CP
				****		-	-				QIKLI	CP
EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	****	****	MO AVG	DAILY		MG/L		07511/	
LEAD, DISSOLVED	SAMPLE	~~~~~	*****		~ ~ ~ ~ ~	* NO DATA	NO DA		(19)	0	QTRLY	CP
(AS PB)	MEASUREMENT			****					MG/L			
01049 1 0 0	PERMIT	*****	*****	****	*****	KEPUKI	REPO		(19)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY		MG/L			
ZINC, DISSOLVED	SAMPLE	*****	*****	****	*****	* NO DATA	NO DA		(19)	0	QTRLY	CP
(AS ZN)	MEASUREMENT			****					MG/L			
01090 1 0 0	PERMIT	*****	*****	****	*****	* REPORT	REPO	RT (	(19)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY	MX	MG/L			
ZINC	SAMPLE	*****	*****	****	****		NO DA		(19)	0	QTRLY	CP
TOTAL RECOVERABLE	MEASUREMENT			****					MG/L	Ũ		_
01094 1 0 0	PERMIT	*****	*****	****	*****	* REPORT	REPO		(19)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY		MG/L		QIII	0.
	SAMPLE	*****	*****	****	****		NO DA		(19)	0	QTRLY	CP
TOTAL RECOVERABLE	MEASUREMENT			****					MG/L	0	QINLI	UF
		*****	*****	****	*****							CP
01113 1 0 0	PERMIT			****		REPORT	REPO		(19)		QTRLY	CP
EFFLUENT GROSS VALUE					NEODMATION	MO AVG	DAILY		MG/L		-	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	SUBMITTED HEREIN AND I	BASED ON MY INQUIRY OF	RSONALLY EXAMINED AMD A THOSE INDIVIDALS IMMEDIA	TELY RESPONSIBLE FC	ROBTAINING				PHONE		DA	ATE
	THE INFORMATION. I BELI THERE ARE SIGNIFICANT	EVE THE SUBMITTED INFO PENALTIES FRO SUBMITTI	RMATION IS TRUE, ACCURA NG FALSE INFORMATION, INC	TE AND COMPLETE. I AN CLUDING THE POSSIBIL	AWARE THAT			500	E 40.00	00		
EXECUTIVE DIRECTOR	AND IMPRISONMENT. SEE		.C 1319. (Penalties under thes		es up to \$10,000	SIGNATURE OF PRINCIPA		502 AREA	540-60 NUMBER			
TYPED OR PRINTED		sines, between o months dru	o youro.			OFFICER OR AUTHORIZ		AREA CODE	NUMBER	۲	YEAR M	O DAY
COMMENT AND EXPLANTION OF ANY VIOLATIO						OFFICER OR AUTHORIZ		CODE			ICAR M	UAY DAY

Facility Name/Location if different)

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES) DISCHARGE MONITORING REPORT (DMR)

Facility Name/Location if different)			DISCHARGE MON								
NAME CEDAR CREEK WO											
ADDRESS C/O CEDAR CREE	K WQTC		KY0098	3540		001 Y	MAJOR				
8405 CEDAR CREE			PERMIT NU		DIS	CHARGE NUMBER	(SUBR LV)				
LOUISVILLE KY					<u> </u>		F - FINAL	JEF	FF		
FACILITY CEDAR CREEK WO				MONITO		ר ר	METALS/BION			OUARTE	RIY
OED/ COREER W			YEAR	MO DAY	YEA		EFFLUENT			GOVATE	
LOCATION LOUISVILLE	<y 40291<="" td=""><td></td><td>FROM 15</td><td>07 01</td><td>то 1</td><td>5 07 31</td><td>[] No Discharg</td><td>e</td><td></td><td></td><td></td></y>		FROM 15	07 01	то 1	5 07 31	[] No Discharg	e			
ATTN: DENNIS THOMMASSON			10	01 01			OTE: Read instruct		e com	nletina this	form
		,								FREQUENCY	SAMPLE
PARAMETER			QUANTITY OR LOADING	j	C.	QUALITY OR CONCENTRATIO	IN		NO EX	OF	TYPE
		AV/504.05		1.11.1170		11/50.405			EX	ANALYSIS	TIPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LEAD	SAMPLE	*****	*****	****	*****	NO DATA	NO DATA	(19)	0	QTRLY	CP
TOTAL RECOVERABLE	MEASUREMENT			****				MG/L			
01114 1 0 0	PERMIT	*****	*****	****	*****	REPORT	REPORT	(19)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY MX	MG/L			
COPPER	SAMPLE	*****	*****	****	*****	NO DATA	NO DATA	(19)	0	QTRLY	CP
TOTAL RECOVERABLE	MEASUREMENT			****				MG/L	Ŭ		_
01119 1 0 0	PERMIT	*****	*****	****	*****	REPORT	REPORT	(19)		QTRLY	СР
EFFLUENT GROSS VALUE	MEASUREMENT			****		MO AVG	DAILY MX	MG/L		GINEI	01
TOXICITY, FINAL CONC	SAMPLE	*****	*****	****	*****	*****	NO DATA	(2G)	0	QTRLY	СР
,	-			****			NODATA		-	QIKLI	0F
TOXICITY UNITS	MEASUREMENT	*****	*****	****	*****	*****	1.0				0.5
61406 1 0 0	PERMIT			****			1.0	(2G)		QTRLY	CP
EFFLUENT GROSS VALUE	MEASUREMENT			****			DAILY MX	TOXCTY			
	SAMPLE										
	MEASUREMENT										
	PERMIT										
	MEASUREMENT										
	SAMPLE										
	MEASUREMENT										
	PERMIT										
	MEASUREMENT										
	SAMPLE										
	MEASUREMENT										
	PERMIT										
	MEASUREMENT										
	SAMPLE										
	MEASUREMENT										
				4							
	PERMIT										
	MEASUREMENT										
	SUBMITTED HEREIN AND	Y FO LAW THAT THAVE PER BASED ON MY INQUIRY OF "	RSONALLY EXAMINED AMD AI THOSE INDIVIDALS IMMEDIAT RMATION IS TRUE, ACCURAT	M FAMILIAR WITH THE	DR OBTAINING		TE	LEPHONE		DA	IE
	THERE ARE SIGNIFICANT	PENALTIES FRO SUBMITTIN	IG FALSE INFORMATION, INCI	LUDING THE POSSIBIL	ITY OF FINE		E00	E 40.00	000	1	
EXECUTIVE DIRECTOR	AND IMPRISONMENT. SEE	18 U.S.C 1001 AND 33 U.S. ent of between 6 months and 5	C 1319. (Penalties under these	statutes may include fin	es up to \$10,000	NATURE OF PRINCIPAL	502 EXECUTIVE AREA	540-60 NUMBE		4	
TYPED OR PRINTED			,			OFFICER OR AUTHORIZE		NOWBE	R	YEAR MC	D DAY
COMMENT AND EXPLANTION OF ANY VIOLATION	IS (Reference all attachm	ents here)						1		/	, DAI
	· · · · · · · · · · · · · · · · · · ·	,									

NAME	OF TRE	ATMEN	T PLAN	т	CEDA	R CREE	EK WTF					COUN	TY	JEFFE	RSON					MONTH	OF:	J	uly	20	15									
KPDE	S PERMI	-			KY009		<del></del>				PLANT				7.5	MGD		1		RECEIV	ING ST	REAM		CEDAF	R CREE	K								
	ŝ		AW VAGE	F	н		TTLEAI LIDS (m			SSOLVI 'GEN (n			SPEND LIDS (m		5 DAY	CBOD	(mg/L)	ACTIV	ATED	SLUDGE		AER	ATION E	BASIN			SLI	UDGE I	HANDL	ING		FIN	AL	
	/	(ED	s (					ENT	OVE	ENT	NO.			ENT			ENT	RET	URN	MASTE D	g/L)		(	SETT SLUE VOLU	DGE		RAW			HAULE	D		د م	
DATE	TOTAL FLOW (MILLION GALLONS)	GRIT REMOVED (CUBIC FEET)	SCREENINGS (CUBIC FEET)	RAW	FINAL	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	STREAM ABOVE	FINAL EFFLUENT	STREAM BELOW	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	GAL/DAY X 1000	MLSS x1000	GAL/DAY X 1000	DISSOLVED OXYGEN (mg/L)	MLSS (mg/L) × 1000	MLVSS (mg/L) X 1000	MIN.	MIN.	GALLONS X 1000	DRY SOLIDS	% VOLATILE SOLIDS	DRY SOLIDS	% VOLATILE SOLIDS	WITHDRAWN GALLONS X 1000	NH3-N (mg/L)	FECAL COLIFORM (COLONIES/100ML)	Total Phosphorus
1	으 은 돈 3.04	ΒŪ	S D		臣 7.1	RA	ЧШ	Ē	ST	E 8.3	ST	소 226	РЯ П	Ē 3	찬 108	ЦШ	Ē	8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	₩ 4930	ゼ× 75000	ãô 3.7	₹× 2710	₹× 2230	୍ଲ 340	ි 300	GAL X 10	1.3		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	201 SOI	WIT GAL X 10		900 000	0.053
2	5.06			6.6 6.7	7.1	18.0				8.0		220		3	106		2	4.46	4930 5240	75000	2.8	2660	2230	340	300		1.3	┝───				0.23	3	0.053
3	7.77			6.6	6.9	16.0				8.2								4.40	5240	75000	3.4	2000	2150	320	300			<u> </u>						
4	8.21			6.6	7.2					8.8								3.36		75000	3.9			310	280			<u> </u>				+		
5	5.22			0.0	7.4					8.6		169		3	92		2	1		75000	3.9			260	230			<u> </u>				0.09		0.166
6	4.49			6.8	7.1					8.4		222		3	-		2	5.22	7210	75000	3.4	2310	1760	280	230			<u> </u>				0.13	2	0.152
7	5.79			6.7	7.2					8.2				Ū	00		_	5.06	3570	75000	3.0	2660	2170	380	300			<u> </u>				0.110	4	0.102
8	7.53			6.6	7.0					8.0		72		3	40		2	4.56	5040	75000	3.6	2160	1790	280	260							0.12		0.157
9	6.06	;		6.8	7.2					8.3		109		3	59		2	4.79	6050	75000	4.1	2300	1870	300	280							0.09	2	0.206
10	7.29			6.8	6.9	10.0				8.2								4.59	6360	75000	3.8	2620	2240	310	300								2	
11	7.44			6.8	6.8					8.4								4.80		75000	3.4			250	200									
12	11.80			6.9	7.0					8.6		93		3	36		2	4.70		75000	3.1			280	250							0.09		0.1
13	11.33			6.8	6.7	10.0				8.4								5.27	7000	75000	3.0	2300	1950	300	260								148	
14	14.28			6.8	6.9					8.5								6.60	6480	75000	4.0	2210	1780	300	250									
15	10.15			6.9	7.1					8.6		103		3	49		2	6.06	4310	75000	3.7	1350	780	180	150							0.15		0.289
16	7.33			7.0	7.2	14.0				8.2		128		3	82		2	6.45	4620	75000	2.8	1910	1310	220	200							0.10	5	0.348
17	4.72			7.0	7.2	10.0				8.5								5.35	7620	75000	3.8	2730	2120	220	220		1.4					$\square$	4	
18	7.17			7.0	7.0					8.7							L	4.64		75000	3.8			250	220			L				$\square$		
19	5.26			6.7	6.8					8.4		204		3	8		2	4.39		75000	4.0			270	230			└──				0.11		0.251
20	4.34			6.8	7.0	10.0				8.6							<u> </u>	4.57	6280	75000	3.7	2530	1910	290	270			└──				$\square$	7	
21	5.06			7.0	6.8	-				8.2							<b> </b>	4.46	6300	75000	3.4	2320	1770	280	260			┝───				$\vdash$		-
22	4.72			6.6	6.7					8.4		170		3	73		2	4.40	5860	75000	3.5	2490	1860	260	220			┝──				0.18		0.225
23	3.72			6.8	6.7	-				8.1		135		3	150		2	3.07	5600	75000	3.0	2210	1690	260	230			┝───				0.11		0.265
24	3.26	i		6.6	6.6	-				8.3								2.14	5970	75000	3.3	2160	1560	270	250		1	┝───				┝──┤	2	-
25	3.04	1		6.8	6.6					7.8		40.1		_	<u>.</u>		<u> </u>	2.11		75000	2.2			260	230			┝───					-+	0.00-
26	3.05			6.8	7.0					8.0		131		3	91		2	1.97	5000	75000	3.8	0000	00.40	300	250			├──				0.11		0.087
27	2.87			6.7 6.8	6.9 6.9					8.1 8.0							├──	1.97 2.17	5660	75000	3.4 3.6	2660	2040 1990	320 300	260 270			<u> </u>				┢──┤	2	
28 29	3.25 3.61	1	1	6.8 7.0	6.9 7.0			<u> </u>		8.0							<u> </u>	2.17	5100 6800	75000 75000	3.6	2620 2900	2090	290	270		1.7	<u> </u>	<u> </u>		<u> </u>	┢──┤		
30	2.97			7.0	7.0					8.3							<b>—</b>	2.10	5190	75000	3.8	2900	1970	300	200		1.7	<u> </u>				┢──┤		
31	2.37			7.0	7.0		<u> </u>			8.1								2.07	4910	75000	3.6	2030	2210	290	260			<u> </u>		<u> </u>			-+	
Tot.	182.61																	121.5										<u> </u>						
Avg.	5.89			6.8	7.0	13.9				8.3		147		3	73		2	1	5732	75000	3.477	2416	1875	283.5	251.3		1.35					0.13	4	0.192
	-		·	•			RESID								TRIAL	WASTE		JLATION 217	N EQUI	VALENT 343	852	-	•		seph Sm	ith			-	20987				
								STRIAL	-						OW		-	BOD	-			-			PERATC			•	C	ERT. N	0.	•		
ΤΟΤΑΙ	NUMBE	R OF S	EWER	CONNI	ECTION	S				(	0																2-239-7	695						
																															-			

 TOTAL NUMBER OF SEWER CONNECTIONS
 0

 SEWER CONNECTIONS
 0

 X
 4

 =
 0

 SEWERED POPULATION

PLANT TELEPHONE



August 12, 2015

Mr. Charlie Roth, District Supervisor KY Division of Water Louisville Regional Office 9116 Leesgate Road Louisville, KY 40222-5084

# Re: Bypass Report for the: Cedar Creek WQTC- KPDES Permit: KY0098540

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 PM on July 13, 2015, referencing Work Order 2387653 as a rain event discharge. This letter serves as a written report of the bypass as required by 401 KAR 5:065.

Provided below are the details of the bypass event:

- Description of the noncompliance and its cause: On July 13, 2015, we submitted a bypass letter
  that stated the cause of the July 12, 2015 Cedar Creek WQTC bypass was caused by algae on the
  tertiary relief gate level transducer. Following the bypass event, as a result of an investigation, it
  was determined that the cause of the bypass was due to human error.
- Period of noncompliance: Starting 08:50 PM on July 12, 2015 and stopping 09:00 PM on July 12, 2015.
- Steps taken or planned to reduce, eliminate and prevent recurrence:
- Additional comments: MSD is in currently considering appropriate disclipinary action. In addition, we will retrain operations employees on the plant Standard Operating Procedure (SOP).

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-239-7574, my cell phone at (502)-475-2224 or via email at kevin.thqmpson@louisvillemsd.org.

werely, Kevin Thompson

Process Supervisor-Operations

cc: Courtney Seitz, KDEP Paula Purifoy, MSD eB File



NSREV KPDES #	Facility ID		Water C	Quality Treatem	ent Center	Rece	iving Stream of	Treatment Center	Regio	n
KY0098540	MSD0289		CEDAR (	CREEK		CEDAR	CREEK		CENT	
Facility Type	Facility ID		Facility Addre	SS	If Pump Sta	tion, Name of Pu	np Station:	Receiving Stream	Discha	rge to
SMH Sewer Manhole	28984		5410 SPRIGV	VOOD LN				CEDAR CREEK	GROUN	ND
Activity Code / Description	WO # Ref No	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
: DISREV: RAIN EVENT	2387239	07/12/2015	DAVIS	BLANFORD	DOCUMENTED	01/24/2002	LACK OF	UNAUTHORIZED	07/12/15 11:48	
DISCHARGE							SYSTEM	DISCHAGE - WATERS	AM	
							CAPACITY			

### Discharge Reporting:

Discharge Amount:	9,650 GAL
Cause:	HEAVY RAIN CAUSED LACK OF SYSTEM CAPACITY
Clean Up:	MSD TO CLEAN AND SANITIZE AFFECTED AREA
Control Zone:	CAUTION TAPE AND TEMP SIGNS
Impact:	SEWAGE
Repair:	INCLUDED IN IOAP
Public Notification:	DOOR CARDS

7/11/15 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'
7/11/15 1:00 am	DISSNO	SUPPLEMENTAL EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE HAS BEEN SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

KPDES #	PDES # Facility ID			Quality Treatem	ent Center	Recei	iving Stream of	f Treatment Center	Regio	ion	
KY0098540	MSD0289		CEDAR (	CREEK		CEDAR	CREEK		CENT		
Facility Type	Facility ID		Facility Addre	ss	If Pump Sta	tion, Name of Pu	np Station:	Receiving Stream	Discha	rge to	
SMH Sewer Manhole	28998		5600 HOFELI	СН СТ				CEDAR CREEK	GROUN	ND	
Activity Code / Description	WO # Ref No	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition	
: DISREV: RAIN EVENT	2387255	07/12/2015	DAVIS	BLANFORD	DOCUMENTED	01/24/2002	LACK OF	UNAUTHORIZED	07/12/15 10:00		
DISCHARGE							SYSTEM	DISCHAGE - WATERS	AM		
							CAPACITY				

### Discharge Reporting:

Discharge Amount:	6,750 GAL
Cause:	LACK OF SYSTEM CAPACITY
Clean Up:	MSD TO CLEAN AND SANITIZE AFFECTED AREA
Control Zone:	CAUTION TAPE TEMP SIGNS
Impact:	SEWAGE
Repair:	AREA INCLUDED IN IOAP
Public Notification:	DOOR CARDS

7/11/15 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'
7/11/15 1:00 am	DISSNO	SUPPLEMENTAL EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE HAS BEEN SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

NSREV KPDES #				Quality Treatem	ent Center	Recei	ving Stream of	f Treatment Center	Regio	n
KY0098540	MSD0289		CEDAR (	CREEK		CEDAR	CREEK		CENT	
Facility Type	Facility ID		Facility Addre	ss	If Pump Sta	tion, Name of Pu	np Station:	Receiving Stream	Discha	rge to
SMH Sewer Manhole	63094		9517 PLUMW	OOD RD				CEDAR CREEK	GROUN	ND
Activity Code / Description	WO # Ref No	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
: DISREV: RAIN EVENT	2387215	07/12/2015	DAVIS	BLANFORD	DOCUMENTED	04/04/2008	LACK OF	UNAUTHORIZED	07/12/15 10:28	
DISCHARGE							SYSTEM	DISCHAGE - WATERS	AM	
							CAPACITY			

### Discharge Reporting:

Discharge Amount:	5,850 GAL
Cause:	HEAVY RAIN CAUSED LACK OF SYSTEM CAPACITY
Clean Up:	MSD TO CLEAN AND SANITIZE AFFECTED AREA
Control Zone:	CAUTION TAPE AND TEMP SIGNS
Impact:	SEWAGE
Repair:	INCLUDED IN IOAP
Public Notification:	DOOR CARDS

7/11/15 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'
7/11/15 1:00 am	DISSNO	SUPPLEMENTAL EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE HAS BEEN SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

KPDES #	Facility ID		Water C	Water Quality Treatement Center			<b>Receiving Stream of Treatment Center</b>			Region	
KY0098540	MSD0289		CEDAR (	CREEK	CEDAR CREEK			CENT	CENT		
Facility Type Facility ID		Facility Addre	y Address If Pump Station, Name of Pump Station:			np Station:	Receiving Stream	Discha	Discharge to		
SMH Sewer Manhole	63095		9300 HAYES	300 HAYES AVE			CEDAR CR		GROUM	JND	
Activity Code / Description	WO # Ref No	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition	
: DISREV: RAIN EVENT	2387214	07/12/2015	DAVIS	BLANFORD	DOCUMENTED	04/04/2008	LACK OF	UNAUTHORIZED	07/12/15 12:05		
DISCHARGE							SYSTEM	DISCHAGE - WATERS	PM		
							CAPACITY				

### Discharge Reporting:

Discharge Amount:	11,500 GAL
Cause:	HEAVY RAIN CAUSED LACK OF SYSTEM CAPACITY
Clean Up:	MSD TO CLEAN AND SANITIZE AFFECTED AREA
Control Zone:	CAUTION TAPE AND TEMP SIGNS
Impact:	SEWAGE
Repair:	INCLUDED IN IOAP
Public Notification:	DOOR CARDS

7/11/15 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'
7/11/15 1:00 am	DISSNO	SUPPLEMENTAL EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE HAS BEEN SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

NSREV KPDES #	Facility ID		Water G	Water Quality Treatement Center			Receiving Stream of Treatment Center			Region	
KY0098540	MSD0289		CEDAR CREEK CEDAR CREEK				CENT				
Facility Type Facility ID		Facility Addre	y Address If Pump Station, Name of Pump Station:			mp Station:	Receiving Stream	Discha	Discharge to		
SMH Sewer Manhole	70158		5600 HOFELI	500 HOFELICH CT			CEDAR CRI		GROUN	ND	
Activity Code / Description	WO # Ref No	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition	
: DISREV: RAIN EVENT	2387210	07/12/2015	DAVIS	BLANFORD	DOCUMENTED	01/24/2002	LACK OF	UNAUTHORIZED	07/12/15 10:00		
DISCHARGE							SYSTEM	DISCHAGE - WATERS	AM		
							CAPACITY				

### Discharge Reporting:

Discharge Amount:	6,750 GAL
Cause:	HEAVY RAIN CAUSED LACK OF SYSTEM CAPACITY
Clean Up:	MSD TO CLEAN AND SANITIZE AFFECTED AREA
Control Zone:	CAUTION TAPE AND TEMP SIGNS
Impact:	SEWAGE
Repair:	INCLUDED IN IOAP
Public Notification:	DOOR CARDS

7/11/15 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'
7/11/15 1:00 am	DISSNO	SUPPLEMENTAL EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE HAS BEEN SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

DISREVKPDES #Facility IDKY0098540MSD0289			Water C	Quality Treatem	nent Center Receiving Stream of Treatment Center CEDAR CREEK			f Treatment Center	<b>Region</b> CENT	
Facility Type SMH Sewer Manhole	Facility ID 83011				Receiving Stream	<b>Discha</b> r GROUN	0			
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Ref No</u> 2387314	<u>Initiated</u> 07/12/2015	<u>Initiated By</u> DAVIS	<u>Assigned To</u> BOND JR	<u>Disch Status</u> BEYOND APPROVED DESIGN STORM	<u>Event Date</u> 04/03/2015	<u>Problem</u> LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 07/12/15 11:48 AM	Condition

### Discharge Reporting:

Discharge Amount:	5,000 GAL
Cause:	LACK OF SYSTEM CAPACITY
Clean Up:	MSD TO CLEAN AND SANITIZE AFFECTED AREA
Control Zone:	TEMP SIGNS
Impact:	DISCOLORATION IN STREAM
Repair:	AREA INCLUDED IN IOAP
Public Notification:	DOOR CARDS

7/11/15 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'
7/11/15 1:00 am	DISSNO	SUPPLEMENTAL EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE HAS BEEN SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

NSREV KPDES #	Facility ID		Water Q	Water Quality Treatement Center			Receiving Stream of Treatment Center			Region	
KY0098540	MSD0289		CEDAR CREEK CEDAR CREEK			CENT		Г			
Facility Type SPL Sewer Treatment Plant	2		•	Facility Address If Pump S 8605 CEDAR CREEK RD		Station, Name of Pump Station:		Receiving Stream CEDAR CREEK	Discharge to GROUND		
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Ref No</u> 2387653	<u>Initiated</u> 07/12/2015	<u>Initiated By</u> SINGLETON	<u>Assigned To</u> OPS BSHIFT CENTRAL	Disch Status REPAIRED - ISSUE RESOLVED	<u>Event Date</u> 07/12/2015	<u>Problem</u> BYPASS AT WQTC	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 07/12/15 09:00 PM	<u>Condition</u>	

### Discharge Reporting:

Discharge Amount:	1,000 GAL
Cause:	FILTER BYPASS GATE FAILED TO OPEN IN AUTO
Clean Up:	NO DEBRIS
Control Zone:	PERMANENT SIGNS POSTED
Impact:	NO IMPACT OBSERVED
Repair:	OPERATOR OPENED BYPASS GATE MANUALLY
Public Notification:	PERMANENT SIGNS POSTED AT THIS LOCATION

#### Notifications:

7/13/15 1:01 am DISNOT EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO 'DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV'

Total Facilities Printed: 7

Total Work Orders Printed:

7