



*Louisville and Jefferson County Metropolitan Sewer District
700 West Liberty Street
Louisville Kentucky 40203-1911
502-540-6000
www.msdlouky.org*

October 21, 2009

Ms. Carolena Bentley
Kentucky Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

RE: Derek Guthrie WQTC, KPDES No: KY0078956
Discharge Monitoring Report
September 2009

Dear Ms. Bentley:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Derek Guthrie WQTC, for the month of September 2009.

Also included are the September overflow reports and discharge letter.

If you have any questions concerning the attached DMR's, please contact me at (502)540-6031.

Sincerely,

A handwritten signature in black ink, appearing to read "John Kessel", is written over the word "Sincerely,".

John Kessel
Process Supervisor, West Region

JMK/West County 0909

Enclosures

cc: C. Roth
T. Singleton
R. Shaw



*Beneficial Use of Louisville's Biosolids
www.louisvillegreen.com*

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

NAME DEREK R GUTHRIE WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY DEREK R GUTHRIE WQTC MSD
 LOCATION LOUISVILLE KY 40272
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0078956
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

MAJOR (SUBR LV)
 F - FINAL
 MUNICIPAL WASTEWATER
 EFFLUENT

JEPF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	07	01		07	07	30

*** NO DISCHARGE [] ***

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)		*****	*****		5	*****	*****	(19)			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	2 INST MIN.	*****	*****	MG/L			DAILY GRAB
BOD, 5-DAY (20 DEG. C)		32,398	36,624	(26)	*****	176	219	(19)			
00310 9 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LB/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L			DAILY COMPOS
BOD, 5-DAY (20 DEG. C)		2228	2914	(26)	*****	11	15	(19)			
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7505 MO AVG	11259 MX WK AV	LB/DY	*****	30 MO AVG	45 MX WK AV	MG/L			DAILY COMPOS
PH		*****	*****		6.9	*****	7.3	(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	8.0 MINIMUM	*****	9.0 MAXIMUM	SU			DAILY GRAB
SOLIDS, TOTAL SUSPENDED		41,215	47,658	(26)	*****	223	304	(19)			
00530 9 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LB/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L			DAILY COMPOS
SOLIDS, TOTAL SUSPENDED		1610	2274	(26)	*****	8	10	(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7506 MO AVG	11259 MX WK AV	LB/DY	*****	30 MO AVG	45 MX WK AV	MG/L			DAILY COMPOS
NITROGEN, AMMONIA TOTAL (AS N)		2698	2937	(26)	*****	15	19	(19)			
00610 9 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LB/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L			DAILY COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY

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

USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

NAME DEREK R OUTHRIE WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
6405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY DEREK R OUTHRIE WQTC MSD
LOCATION LOUISVILLE KY 40272
ATTN: DENNIS THOMASSON, SR METRO OPS

KY0078956
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MAJOR (SUBR LV)
F - FINAL
MUNICIPAL WASTEWATER EFFLUENT
*** NO DISCHARGE [] ***

JEFF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
09	09	01		09	09	30

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PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	591	5004	7506	(26)	*****	3	4	(19)			DAILY COMPOS
	PERMIT REQUIREMENT	MD AVG	MX WK AV	LBS/DY	*****	MO AVG	MX WK AV	MG/L			
NITROGEN, NITRATE TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE	1337	REPORT	REPORT	(26)	*****	6	8	(19)			WEEKLY COMPOS
	PERMIT REQUIREMENT	MD AVG	MX WK AV	LBS/DY	*****	MO AVG	MX WK AV	MG/L			
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	414	REPORT	REPORT	(26)	*****	2.4	3.8	(19)			WEEKLY COMPOS
	PERMIT REQUIREMENT	MD AVG	MX WK AV	LBS/DY	*****	MO AVG	MX WK AV	MG/L			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 6 0 0 RAW SEW/INFLUENT	23.48	REPORT	REPORT	(03)	*****	*****	*****	*****			CONTINCONTIN UOUS
	PERMIT REQUIREMENT	MD AVG	DAILY MX	MGD	*****	*****	*****	*****			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	23.86	REPORT	REPORT	(03)	*****	*****	*****	*****			CONTINCONTIN UOUS
	PERMIT REQUIREMENT	MD AVG	DAILY MX	MGD	*****	*****	*****	*****			
CHLORINE, TOTAL RESIDUAL 60060 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0.010	(19)			DAILY GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.010	DAILY MX			
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	1	1	(13)			DAILY GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	200	400 #/	30DA GEO			7 DA GEO 100ML

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TELEPHONE

DATE

AREA CODE NUMBER YEAR MO DAY

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

USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

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

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

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EFFLUENT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	07	01		07	09	30

*** NO DISCHARGE () ***

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLI TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		94	*****	*****	(23)			
BIOLOGICAL 5-DAY PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	85 MO AVG	*****	*****	PER-CENT		ONCE/ MONTH	CALC
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		96	*****	*****	(23)			
BIOLOGICAL 5-DAY PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	85 MO MIN	*****	*****	PER-CENT		ONCE/ MONTH	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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			AREA CODE	NUMBER	YEAR
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

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

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KY0078956
 PERMIT NUMBER

001 R
 DISCHARGE NUMBER

MAJOR (SUBR LV)
 Y - FINAL

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
09	09	01		09	09	30

REASONABLE POTENTIAL EFFLUENT
 *** NO DISCHARGE [] ***

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PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	*****	*****		*****	<0.01	<0.01	(19)			
D10G2 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/ MONTH	COMPLI
	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
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TELEPHONE
 DATE
 AREA CODE NUMBER YEAR MO DAY

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

Name of Sewage Treatment Plant: West County WTP County: Jefferson Month of: September 2009

KPDES Permit Number: KY0078956 Plant Capacity: 30 MGD Recolving Stream: Ohio River

Date	Total Flow (MG)	Raw Sewage		pH		Settleable Solids (mL/L)			Dissolved Oxygen (mg/L)			Suspended Solids (mg/L)			Total Solids (mg/L)			5-day BOD (mg/L)			Activated Sludge		Aeration Basin					Dig Sludge		Final							
		Grit Removed (cu. ft.)	Screenings (cu. ft.)	Raw	Final	Raw	Primary (or Sec.)	Final	Stream Above	Final	Stream Below	Raw	Primary (or Sec.)	Final	Raw	Primary (or Sec.)	Final	Raw	Primary (or Sec.)	Final	Million Gal/Day	MLSS mg/L X 1000	Gal/Day X 1000	Dissolved Oxygen (mg/L) #1	Dissolved Oxygen (mg/L) #2	MLSS (mg/L) X 1000 #1	MLVSS (mg/L) X 1000 #1	30 min. Setts.	SVI	% Solids	Phosphorus (mg/L)	TKN (mg/L)	Chlorine Residual (mg/L)	NH3-N (mg/L)	Fecal Coliform Col/100ml		
1	17.70			7.4	7.2				7.0		250		6				223		9		2710					1470	1260	100.0	0.07		3.78		0.01	2.00	1		
2	17.40			6.2	7.0				6.8		314		3				214		9		2590					1600	1330	100.0	0.06				0.01	3.20	1		
3	17.72			7.2	7.0				6.8		440		5				278		9		2460					1620	1310	100.0	0.06				0.01	2.20	1		
4	17.73			7.2	6.9				6.5		356		7				178		7		4400					1670	1320	100.0	0.06				0.01	5.40	1		
5	17.49			7.3	6.9				6.2		240		8				207		8		3780					1630	1240	100.0	0.06				0.01	2.30	1		
6	18.32			7.3	6.9				9.5		234		7				220		13		2350					1730	1380	100.0	0.06				0.01	2.20	1		
7	19.36			7.2	7.0				6.2		296		9				210		16		2510					1430	1170	100.0	0.07			4.90	0.01	3.60	1		
8	18.78			7.3	7.0				5.4		284		11				193		14		2380					1500	1260	100.0	0.07	2.34			0.01	2.40	1		
9	17.84			7.3	7.0				7.1		242		10				207		12		2290					1470	1240	100.0	0.07	2.51			0.01	2.80	1		
10	18.04			7.3	7.0				7.1		206		9				158		11		2200					1540	1350	90.0	0.06				0.01	2.20	1		
11	18.30			7.3	7.0				5.9		166		8				180		12		2290					1440	1260	100.0	0.07				0.01	3.00	1		
12	17.76			7.3	7.1				6.7		180		11				193		13		2710					1230	1070	80.0	0.07				0.01	2.70	1		
13	17.74			7.3	7.1				6.1		176		9				171		26		3120					1320	1010	90.0	0.07			7.80	0.01	6.10	1		
14	17.09			7.3	7.1				6.1		222		9				201		14		2220					1290	1120	80.0	0.06				0.01	5.70	1		
15	17.10			7.2	7.0				6.6		194		5				189		10		2360					980	870	70.0	0.07	2.40			0.01	5.70	1		
16	16.77			7.3	7.1				7.3		252		5				251		10		2190					1290	1070	80.0	0.06				0.01	5.40	1		
17	17.23			7.4	7.0				7.2		236		7				181		8		2340					1710	1430	80.0	0.05				0.01	4.80	1		
18	17.11			7.7	6.9				6.8		176		6				157		9		2410					1270	1130	70.0	0.06				0.01	4.90	1		
19	17.27			7.3	7.0				6.4		214		8				157		9		2480					1690	1390	60.0	0.04				0.01	4.30	1		
20	24.91			7.5	7.1				6.0		230		14				211		22		2500					1470	1210	60.0	0.04			6.70	0.01	2.70	1		
21	55.59			7.1	6.9				6.8		124		9				110		11		3750					1030	860	50.0	0.05				0.01	2.00	1		
22	28.47			7.4	7.1				7.1		110		9				121		10		1940					930	760	50.0	0.05	1.55			0.01	3.30	1		
23	33.30			7.3	7.2				7.1		320		9				283		15		1690					790	650	50.0	0.06				0.01	3.90	1		
24	29.37			7.3	7.1				7.0		138		8				129		8		3050					1700	1310	100.0	0.06				0.01	2.40	1		
25	37.52			7.4	7.1				7.2		100		4				64		4		3410					1440	1140	80.0	0.06				0.01	1.40	1		
26	33.08			7.2	7.0				7.4		264		7				124		7		3590					1470	1090	90.0	0.06				0.01	1.40	1		
27	52.46			7.2	7.1				7.4		104		9				81		13		3650					1060	860	70.0	0.07			4.60	0.01	2.00	1		
28	32.98			7.3	7.0				6.8		128		8				101		11		3160					1460	1160	100.0	0.07				0.01	2.10	1		
29	26.70			7.4	7.3				7.0		202		10				124		9		3030					1490	1240	90.0	0.06	2.14			0.01	2.80	1		
30	24.64			7.5	7.2				6.8		292		9				176		11		3010					1680	1330	100.0	0.06				0.01	2.30	1		
Total	715.8	0	0																																		
Avg.	23.86			7.3	7.0				6.8		223		8				176		11		2752.3					1413.33	1160.67	84.67	0	2.45	6.00	0.01	3.24		1		

Total Number of Sewer Connections: 0 Industrial Waste Population Equivalent: _____ Operator: Kevin Thompson
 Residential Connections: _____ Commercial Connections: 227228 Flow _____ 206475 BOD _____ 211302 TSS _____ Cert. #: # 18871
 Industrial Connections: _____ Sower Connections X 4 = 0 Phone #: 540-6032



700 West Liberty Street
Louisville Kentucky 40203-1911
502-540-6000
www.msdlouky.org

9/17/09

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

Re: Bypass Report for the: Derek R. Guthrie WQTC - KPDES KY0078956

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 PM on September 16, 2009, referencing Work Order 955750 as a Dry Weather 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: During an equipment check, a sample taken by the operator indicated that the wastewater was not receiving full dechlorination treatment. Although a pre-effluent residual chlorine reading indicated some level of dechlorination was achieved, full dechlorination demand was not met. An estimated volume of 153,000 gallons received full treatment except for dechlorination.
- Period of noncompliance: Starting 03:25 AM on September 16, 2009 and stopping 03:28 AM on September 16, 2009.
- Steps taken or planned to reduce, eliminate and prevent recurrence: To eliminate this bypass, the operator started another dechlorination chemical feed pump. An immediate pre-effluent residual chlorine reading was then taken, which indicated full dechlorination compliance. We will increase volume of dechlorination feed until we fully automate our dechlorination system.
- Additional comments: none

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-540-6031, my cell phone at (502)-648-5984 or via email at Kessel@msdlouky.org.

Sincerely,


John Kessel
Process Supervisor-Operations

cc: Gary Levy, KDEP
Paula Purifoy, MSD



Report Selections: Excluding PPI, CSO, Prob Code: BYPAS, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES # KY0078956	Facility ID MSD0277	Water Quality Treatment Center DEREK R. GUTHRIE		Receiving Stream of Treatment Center OHIO RIVER	Region WEST					
Facility Type SPL Sewer Treatment Plant	Facility ID MSD0277	Facility Address 11621 LOWER RIVER RD	If Pump Station, Name of Pump Station:	Receiving Stream OHIO RIVER	Discharge to STREAM					
Activity Code / Description DISDW: DRY WEATHER DISCHARGE	WO # 955750	Initiated 09/16/09 03:25 AM	Initiated By MARKS JR	Assigned To LAMB DIN JR	Disch Status DOCUMENTED	Event Date 10/17/06	Problem BYPASS AT WQTC	Result UNAUTHORIZED DISCHARGE - WATERS	Completed 09/16/09 03:28 AM	Condition

Spot Inspections:

Discharge Amount: 153,000 GAL
 Cause: #2 BISULFITE PUMP NOT PUMPING ENOUGH
 Clean Up: NO DEBRIS
 Control Zone: PIPE DISCHARGE SUBMERGED NO CONTROL ZONE
 Impact: NO IMPACT OBSERVED
 Repair: STARTED #1 BISULFITE PUMP RETOOK CL2 READING

Notifications:

09/16/09 12:47 PM DIS PUB Bypass stopped within 3 minutes. Public notice was not posted on the website because overflow was directly into the Ohio River and was quickly diluted.
 (Per BB)
 09/16/09 01:00 AM DIS NOT Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Report Selections: Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES #	Facility ID	Water Quality Treatment Center	Receiving Stream of Treatment Center	Region						
KY0078956	MSD0277	DEREK R. GUTHRIE	OHIO RIVER	WEST						
Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to					
SMH Sewer Manhole	04699-W	1714 LAMKINS CT		MILL CREEK	GROUND					
Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISREV: RAIN EVENT DISCHARGE	957089	09/21/09 01:00 AM	SINGLETON	THOMPSON	DOCUMENTED	12/15/07	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	09/21/09 04:30 AM	

Spot Inspections:

Discharge Amount: 9,999 GAL
 Cause: STATION UNDER WATER DUE TO RAIN EVENT
 Clean Up: NO DEBRIS
 Control Zone: TEMPORARY SIGNS
 Impact: NO VISUAL IMPACT OBSERVED
 Repair: A SOLUTION FOR THIS LOCATION IS INCLUDED IN THE INTEGRATED OVERFLOW ABATEMENT PLAN.

Notifications:

09/21/09 04:30 AM DIS PUB Temporary signs posted
 09/21/09 01:00 AM DIS NOT Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Report Selections: Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES # KY0078956 (Cont'd)	Facility ID MSD0277	Water Quality Treatment Center DEREK R. GUTHRIE	Receiving Stream of Treatment Center OHIO RIVER	Region WEST
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Facility Type SLS Sewer Lift Station	Facility ID MSD1013-PS	Facility Address 9114 CINDERELLA LN	If Pump Station, Name of Pump Station: CINDERELLA	Receiving Stream FISHPOOL CREEK	Discharge to DITCH
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<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISREV: RAIN EVENT DISCHARGE	961484	09/26/09 10:30 PM	MARKS JR	KESSEL	DOCUMENTED	11/29/01	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	09/27/09 09:00 AM	

Spot Inspections:

Discharge Amount	3,300 GAL
Cause:	LACK OF SYSTEM CAPACITY DURING RAIN EVENT
Clean Up:	MSD CLEANED & SANITIZED THE AREA
Control Zone:	TEMPORARY SIGNS POSTED
Impact:	SEWAGE & DEBRIS OBSERVED
Repair:	HAULING TO PREVENT FURTHER DISCHARGE. #961575

Notifications:

09/27/09 12:35 AM	DISPUB	msd used temporary signs and web site to inform public
09/26/09 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
09/26/09 01:00 PM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov