



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

November 4, 2011

Ms. Cheryl Edwards
Kentucky Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

RE: Derek Guthrie WQTC, KPDES No: KY0078956
Discharge Monitoring Report
September 2011

Dear Ms. Cheryl Edwards:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Derek Guthrie WQTC, for the month of September 2011.

There were no exceedences, bypasses reports during the month of September for the Derek Guthrie WQTC.

Also included is an overflow report for the month of September.

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 "J. Kessel", written over a horizontal line.

John Kessel
Process Supervisor, West Region

JMK/West County 0911

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
4522 ALGONQUIN PKWY
LOUISVILLE KY 40211
FACILITY DEREK R. GUTHRIE WQTC

LOCATION LOUISVILLE KY 40272
ATTN: DENNIS THOMASSON SR. METRO OPS

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

KY0078956
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MAJOR
(SUBR LV)
F - FINAL JEFFE
MUNICIPAL WASTEWATER
EFFLUENT
[] No Discharge

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
FROM 11	09	01	TO	11	09	30

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE					
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS								
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***	6			(19) MG/L	0	01/01	GR					
	PERMIT MEASUREMENT	*****	*****	***	2 INST MIN	*****	*****	(19) MG/L		DAILY	GRAB					
BOD, 5-DAY (20 DEG. C) 00310 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	30528	37125	(26) LBS/DY		175	197	(19) MG/L	0	01/01	CP					
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AV	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		DAILY	COMPOS					
BOD, 5-DAY (20 DEG. C) 00310 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1735	3589	(26) LBS/DY		8	11	(19) MG/L	0	01/01	CP					
	PERMIT MEASUREMENT	7506 MO AVG	11259 MX WK AV	(26) LBS/DY	*****	30 MO AVG	45 MX WK AV	(19) MG/L		DAILY	COMPOS					
PH	SAMPLE MEASUREMENT			***	7.0		8.3	(12) SU	0	01/01	GR					
	PERMIT MEASUREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	(12) SU		DAILY	GRAB					
SOLIDS, TOTAL SUSPENDED 00530 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	54973	74436	(26) LBS/DY		305	315	(19) MG/L	0	01/01	CP					
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AV	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		DAILY	COMPOS					
SOLIDS, TOTAL SUSPENDED 00530 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1729	4302	(26) LBS/DY		7	13	(19) MG/L	0	01/01	CP					
	PERMIT MEASUREMENT	7506 MO AVG	11259 MX WK AV	(26) LBS/DY	*****	30 MO AVG	45 MX WK AV	(19) MG/L		DAILY	COMPOS					
NITROGEN, AMMONIA TOTAL (AS N) 00610 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	3075	3468	(26) LBS/DY		18	20	(19) MG/L	0	01/01	CP					
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AV	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		DAILY	COMPOS					
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							
H J SCHARDEIN EXECUTIVE DIRECTOR							502	540-6000	11 10 19							
TYPED OR PRINTED							AREA CODE	NUMBER								
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT														
USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.																

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

 NAME DEREK R. GUTHRIE WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 4522 ALGONQUIN PKWY
 LOUISVILLE KY 40211
 FACILITY DEREK R. GUTHRIE WQTC

 KY0078956
 PERMIT NUMBER

 0012
 DISCHARGE NUMBER

 MAJOR
 (SUBR LV)
 F - FINAL JEFFE
 MUNICIPAL WASTEWATER
 EFFLUENT
 [] No Discharge

 LOCATION LOUISVILLE KY 40272
 ATTN: DENNIS THOMASSON SR. METRO OPS

 MONITORING PERIOD
 FROM YEAR 11 MO 09 DAY 01 TO YEAR 11 MO 09 DAY 30

NOTE: Read instructions before completing this form

PARAMETER		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 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1622	2649	(26) LBS/DY		9	10	(19) MG/L	0	01/01	CP
	PERMIT MEASUREMENT	3253 MO AVG	4879 MX WK AV	(26) LBS/DY	*****	20 MO AVG	30 MX WK AV	(19) MG/L		DAILY	COMPOS
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2138	4517	(26) LBS/DY		9	9	(19) MG/L	0	01/07	CP
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AVG	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		WEEKLY	COMPOS
PHOSPHORUS, TOTAL (AS P) 00665 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	744	1285	(26) LBS/DY		3.7	6.6	(19) MG/L	0	01/07	CP
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AVG	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		WEEKLY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	20.98	56.52	(03) MGD				*** ***	0	CN	CN
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT Daily MAX	(03) MGD	*****	*****	*****	***		CONTIN UOUS	CONTIN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	22.38	60.85	(03) MGD				*** ***	0	CN	CN
	PERMIT MEASUREMENT	REPORT MO AVG	REPORT Daily MAX	(03) MGD	*****	*****	*****	***		CONTIN UOUS	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			*** ***			<0.010	(19) MG/L	0	01/01	GR
	PERMIT MEASUREMENT	*****	*****	*** ***	*****	*****	0.019 DAILY MX	(19) MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			*** ***		8	42	(13) 100ML	0	01/01	GR
	PERMIT MEASUREMENT	*****	*****	*** ***	*****	200 30 DA GEO	400 7 DA GEO	(13) 100ML		DAILY	GRAB
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			
H J SCHARDEIN EXECUTIVE DIRECTOR						502 540-6000		11 10 19			
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	

COMMENT 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)

NAME DEREK R. GUTHRIE WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 4522 ALGONQUIN PKWY
 LOUISVILLE KY 40211
 FACILITY DEREK R. GUTHRIE WQTC

LOCATION LOUISVILLE KY 40272
 ATTN: DENNIS THOMASSON SR. METRO OPS

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES)

DISCHARGE MONITORING REPORT (DMR)

KY0078956
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
11	09	01		11	09	30

MAJOR (SUBR LV)
 F - FINAL JEFFE
 MUNICIPAL WASTEWATER
 EFFLUENT
 [] No Discharge

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT			***	95			(23) CENT	0	01/30	CAL
81010 K 0 0 PERCENTREMOVAL	PERMIT MEASUREMENT	*****	*****	***	85 MO AVG	*****	*****	(23) CENT		ONCE/MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT			***	98			(23) CENT	0	01/30	CAL
81011 K 0 0 PERCENTREMOVAL	PERMIT MEASUREMENT	*****	*****	***	85 MO MIN	*****	*****	(23) CENT		ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										

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 those statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE		
H J SCHARDEIN EXECUTIVE DIRECTOR		502	540-6000	11	10	19
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT 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)

NAME DEREK R. GUTHRIE WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
4522 ALGONQUIN PKWY
LOUISVILLE KY 40211
FACILITY DEREK R. GUTHRIE WQTC

LOCATION LOUISVILLE KY 40272
ATTN: DENNIS THOMASSON SR. METRO OPS

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

KY0078956
PERMIT NUMBER

001 R
DISCHARGE NUMBER

MAJOR (SUBR LV)
F - FINAL JEFFE
REASONABLE POTENTIAL
EFFLUENT
[] No Discharge

MONITORING PERIOD							
YEAR			MO			DAY	
FROM	11	09	01	TO	11	09	30

NOTE: Read instructions before completing this form

PARAMETER		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			***		<0.010	<0.010	(19) MG/L	0	01/30	CP
01032 1 0 0	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	(19) MG/L		ONCE/MONTH	COMPOS
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
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				
H J SCHARDEIN EXECUTIVE DIRECTOR											
TYPED OR PRINTED					502 540-6000		11 10 19		YEAR	MO	DAY
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)					AREA CODE NUMBER						

PERMITTEE NAME/ADDRESS (Include

Facility Name/Location if different)

NAME DEREK R. GUTHRIE WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
4522 ALGONQUIN PKWY
LOUISVILLE KY 40211
FACILITY DEREK R. GUTHRIE WQTC

LOCATION LOUISVILLE KY 40272
ATTN: DENNIS THOMASSON SR. METRO OPS

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

KY0078956
PERMIT NUMBER

001 Y
DISCHARGE NUMBER

MAJOR
(SUBR LV)
F - FINAL JEFFE
BIOMONITORING/METALS/QUARTERLY
EFFLUENT
[] No Discharge

MONITORING PERIOD								
YEAR	MO	DAY				YEAR	MO	DAY
FROM 11	09	01				TO 11	09	30

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
HARDNESS, TOTAL (AS CaCO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***		236	237	(19) MG/L	0	1/90	CP	
	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	(19) MG/L		QTRLY	COMPOS	
ZINC TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***		<0.005	<0.005	(19) MG/L	0	1/90	CP	
	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	(19) MG/L		QTRLY	COMPOS	
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***		<0.001	<0.001	(19) MG/L	0	1/90	CP	
	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	(19) MG/L		QTRLY	COMPOS	
LEAD TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***		<0.08	<0.08	(19) MG/L	0	1/90	CP	
	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	(19) MG/L		QTRLY	COMPOS	
COPPER TOTAL RECOVERABLE 01119 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***		<0.003	<0.003	(19) MG/L	0	1/90	CP	
	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	(19) MG/L		QTRLY	COMPOS	
TOXICITY, FINAL CONC TOXICITY UNITS 61406 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***			<1.0	(2F) TOXCTY	0	1/90	GR-2	
	PERMIT MEASUREMENT	*****	*****	***	*****	*****	1.00	(2F) TOXCTY		QTRLY	GRAB-2	
	SAMPLE MEASUREMENT											
	PERMIT MEASUREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER H J SCHARDEIN EXECUTIVE DIRECTOR 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 502 540-6000		DATE 11 10 19		
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			AREA CODE	NUMBER	YEAR	MO	DAY

Name of Sewage Treatment Plant:

West County WTP

Jefferson

Month of:

September

2011

KPDES Permit Number:

KY0078956

Plant Capacity:

30 MGD

Receiving 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	MLSS mg/L X 1000	WAS	Gal/Day X 1000	Dissolved Oxygen (mg/L) #1	Oxygen (mg/L) #2	MLSS (mg/L) X1000 #1	MLVSS (mg/L) X1000 #1	60 min. Sett.	SVI	% Solids	Phosphorus (mg/L)	TKN (mg/L)	Chlorine Residual (mg/L)	NH3-N (mg/L)	Fecal Coliform Col/100ml	Hexavalent Chromium	Hardness																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
																																							Return	WAS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	

Total Number of Sewer Connections:

0

Industrial Waste Population Equivalent

Operator

Chris Langford

Residential Connections:

Commercial Connections:

Industrial Connections:

Sewer Connections X 4 =

0

213188

Flow

191869

BOD

271474

TSS

Cert. #

#18751

Phone #

540-6042



IMSAST0004

Overflow Report

Initiated Sep 01, 2011 12:00 AM thru Sep 30, 2011 11:59 PM

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

KPDES # KY0078956 (Cont'd)	Facility ID MSD0277	Water Quality Treatment Center DEREK R. GUTHRIE	Receiving Stream of Treatment Center OHIO RIVER	Region WEST
-------------------------------	------------------------	--	--	----------------

Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SLS Sewer Lift Station	MSD0049-PS	3706 NOBEL CT	ROSA TERRACE	MILL CREEK	GROUND

<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	1345235	09/26/11 03:00 AM	SINGLETON	SPENCER	DOCUMENTED	06/22/11	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE-WATER S	09/26/11 08:10 AM	

Spot Inspections:

Discharge Amount:	9,999 GAL
Cause:	LACK OF SYSTEM CAPACITY DUE TO RAIN EVENT
Clean Up:	MSD CLEANED & SANITIZED THE AREA
Control Zone:	TEMPORARY SIGNS POSTED AROUND THE AREA
Impact:	SEWAGE OBSERVED
Repair:	SITE FOUND DURING RAIN EVENT RECON- WILL MONITOR & EVALUATE FOR REPAIR

Notifications:

09/26/11 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
09/26/11 03:00 AM	DISPUB	TEMPORARY SIGNS POSTED AROUND THE AFFECTED AREA
09/26/11 01:00 AM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Sep 01, 2011 12:00 AM thru Sep 30, 2011 11:59 PM

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

KPDES #
KY0078956 (Cont'd)Facility ID
MSD0277Water Quality Treatment Center
DEREK R. GUTHRIEReceiving Stream of Treatment Center
OHIO RIVERRegion
WEST

Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SMN Sewer Main	09738	4914 ANDALUSIA LN		PONDER CREEK	GROUND

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISDW: DRY WEATHER DISCHARGE	1344663	09/22/11 05:18 PM	BIVIN	BIVIN	REPAIRED - ISSUE RESOLVED	09/22/11	OBSTRUCTION-NOT GREASE / ROOTS	UNAUTHORIZED DISCHARGE-WATER S	09/22/11 05:18 PM	MAIN

Spot Inspections:

Discharge Amount:	100 GAL
Cause:	ROOTS IN MAIN SEWER
Clean Up:	VACTORED OUT DRAINAGE MAIN
Control Zone:	TEMPORARY OVERFLOW WARNING SIGNS PLACED AT DRAINAGE MAIN OUTLET
Impact:	OBSERVED SEWAGE IN DRAINAGE MAINLINE, DRAINAGE MAIN MOSTLY OBSTRUCTED, NO SOLIDS OR DEBRIS OBSERVED IN MAIN OR AT OUTFALL
Repair:	WORK ORDERS 1344574 & 1344702 - VACTORED AND ROOT CUT THE MAIN SEWER

Notifications:

09/22/11 05:30 PM	DISPUB	MSD personnel advised customer on site; placed temporary overflow warning signs at outfall of storm line.
09/23/11 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Sep 01, 2011 12:00 AM thru Sep 30, 2011 11:59 PM

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

KPDES # KY0078956	Facility ID MSD0277	Water Quality Treatment Center DEREK R. GUTHRIE	Receiving Stream of Treatment Center OHIO RIVER	Region 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

<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	1345233	09/26/11 03:30 AM	SINGLETON	SPENCER	DOCUMENTED	12/15/07	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE-WATER S	09/26/11 07:45 AM	

Spot Inspections:

Discharge Amount:	9,999 GAL
Cause:	LACK OF SYSTEM CAPACITY DUE TO RAIN EVENT
Clean Up:	MSD CLEANED & SANITIZED THE AREA
Control Zone:	TEMPORARY SIGNS POSTED
Impact:	SEWAGE OBSERVED
Repair:	SITE FOUND DURING RAIN EVENT RECON- WILL MONITOR & EVALUATE FOR REPAIR

Notifications:

09/26/11 03:30 AM	DISPUB	TEMPORARY SIGNS POSTED
09/26/11 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
09/26/11 01:00 AM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov