

700 West Liberty Street | Louisville, KY 40203-1911 Phone: 502.540.6000 | LouisvilleMSD.org

October 24, 2018

Ms. Crystal Dennis Kentucky Division of Water 200 Fair Oaks Lane Frankfort, Kentucky 40601

Re: Derek Guthrie Water Quality Treatment Center KPDES Permit No. KY0078956, Discharge monitoring report for September 2018.

Dear Ms. Crystal Dennis:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Derek Guthrie WQTC, KPDES No: KY0078956, for the month of September 2018.

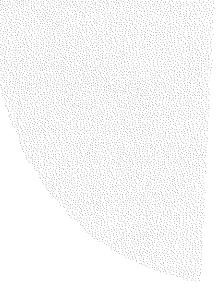
There were no exceedances or bypass reports for the Derek Guthrie WQTC. Also attached are overflow reports and 3rd quarter Biomonitoring NETDMR.

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

Kevin Thompson Process Supervisor, West Region

KLT/West County 09/18 Enclosures

cc: C. Roth V. Graves R. Shaw



DMR Copy of Record

Permit																				
Permit #:	KY	0078956			Pern	mittee:			Derek R Guthrie	WQTC	MSD			Facility:		DERE	K R GUTH	IRIE W	QTC MSD	
Major:	Yes	;				mittee Add	ress:		700 W Liberty S Louisville, KY 40					Facility Locati	on:		LOWER F SVILLE, KY			
Permitted Feature:	001 Exte	ernal Outfall			Disc	charge:			001-1 Sanitary was	STEWA	TER									
Report Dates & Status																				
Monitoring Period:	Fro	m 09/01/18 to 09/30/	/18		DMR	R Due Date):		10/28/18					Status:		NetDI	IR Validat	ed		
Considerations for Form Co	ompletion													1						
Parameter 00610 - Use Seas		ner months (May, Jur	ne, July, <i>i</i>	August, Septembe	er, and	d October) a	and Season 2	2 for winte	er months (Novemb	er, Dece	ember, J	lanuary, Febru	ary March	n, and April); ent	er NODI=9) for the Season n	ot needed.			
Principal Executive Officer				0 / 1	,	,			Υ.	,	,									
First Name:		nes A.			Title	e:			Executive Direct	tor				Telephone:		502-54	40-6000			
Last Name:	Par													1						
No Data Indicator (NODI)																				
Form NODI:																				
Parameter		Monitoring Location	Season #	Param. NODI			Qı	uantity or L	oading					Quality or Conce	entration			# of E	Ex. Frequency of Analys	is Sample Type
Code Name		Monitoring Loodton	0000011		G	Qualifier 1	Value 1	Qualifier	-	Units	Qualifie	er 1 Value 1	Qualifier		Qualifier 3	Value 3	Units		in requerey or marye	
					nple						=	6					19 - mg/L	_	01/01 - Daily	GR - GRAB
00300 Oxygen, dissolved [DO]		1 - Effluent Gross	0		it Req.						>=	2 INST MIN					19 - mg/L	0	01/01 - Daily	GR - GRAB
				-	nple						=	6.8			=	7.6	12 - SU		01/01 - Daily	GR - GRAB
00400 pH		1 - Effluent Gross	0		it Req.						>=	6 MINIMUM			<=	9 MAXIMUM	12 - SU	0	01/01 - Daily	GR - GRAB
					NODI nple =	- 34	60	=	5807	26 - lb/d			=	6	=	7	19 - mg/L		01/01 - Daily	24 - COMP24
00530 Solids, total suspended		1 - Effluent Gross	0		it Req. <		600 6021 MO AVG	- <=		26 - lb/d			- <=	30 MO AVG		45 MX WK AV	19 - mg/L	0	01/01 - Daily	24 - COMP24
					NODI															
00520 Solido, total augraphicad		C Bow Sowage Influent	0		nple								=	206		281 Req Mon MX WK AV	19 - mg/L		01/01 - Daily	24 - COMP24 24 - COMP24
00530 Solids, total suspended		G - Raw Sewage Influent	0		it Req.									Req Mon MO AVG		Req Mon MA WK AV	19 - mg/L	0	01/01 - Daily	24 - COIVIP24
				San	nple						_		=	9.6		12.9	19 - mg/L		01/07 - Weekly	24 - COMP24
00600 Nitrogen, total [as N]		1 - Effluent Gross	0		it Req.									Req Mon MO AVG	6	Req Mon MX WK AV	19 - mg/L	0	01/07 - Weekly	24 - COMP24
					NODI nple								=	18.08	=	32.18	19 - mg/L		01/07 - Weekly	24 - COMP24
00600 Nitrogen, total [as N]		G - Raw Sewage Influent	0		it Req.									Req Mon MO AVG		Req Mon MX WK AV	•	0	01/07 - Weekly	24 - COMP24
					NODI						_			0			10		04/04 D=14	04 00MP04
00610 Nitrogen, ammonia total [as N	1]	1 - Effluent Gross	0		nple it Req.								= <=	3 20 MO AVG		4 30 MX WK AV	19 - mg/L 19 - mg/L	0	01/01 - Daily 01/01 - Daily	24 - COMP24 24 - COMP24
	-			Value	NODI															
00665 Phosphorus, total [as P]		1 - Effluent Gross	0		nple								=	1 Reg Mon MO AVG		2 Reg Mon MX WK AV	19 - mg/L		01/07 - Weekly 01/07 - Weekly	24 - COMP24 24 - COMP24
00005 Phosphorus, total [as P]		I - Enluent Gross	0		it Req.									Req Mon MO AVG) 	Red MOU MY AV	19 - mg/L	0	01/07 - Weekly	24 - COMP24
				San	nple								=	3.27		4.92	19 - mg/L		01/07 - Weekly	24 - COMP24
00665 Phosphorus, total [as P]		G - Raw Sewage Influent	0		it Req.									Req Mon MO AVG	6	Req Mon MX WK AV	19 - mg/L	0	01/07 - Weekly	24 - COMP24
					NODI =	= 66	5.66	=	112.32	03 - MGE	2								99/99 - Continuous	RC - Recorder (auto
50050 Flow, in conduit or thru treatm	nent plant	1 - Effluent Gross	0		it Req.	Re	eq Mon MO AV	3	Req Mon MX WK AV	03 - MGE	C							0	99/99 - Continuous	RC - Recorder (auto
					NODI nple =	62	2.31	=	106.91	03 - MGE	`								99/99 - Continuous	RF - RCDFLO
50050 Flow, in conduit or thru treatm	nent plant	G - Raw Sewage Influent	0		it Req.		eq Mon MO AV		Req Mon MX WK AV									0	99/99 - Continuous	RF - RCDFLO
					NODI															
50060 Chlorine, total residual		1 - Effluent Gross	0		nple it Req.								< <=	0.016 .019 MO AVG		0.016 .019 MX WK AV	19 - mg/L		01/01 - Daily	GR - GRAB GR - GRAB
Soudo Chionne, total residual		1 - Ellident Gloss	0		NODI								<=	.019 100 AVG	<=	.019 MA WK AV	19 - mg/L	0	01/01 - Daily	GR - GRAB
					nple								=	20		49	13 - #/100m		01/01 - Daily	GR - GRAB
51040 E. coli		1 - Effluent Gross	0		it Req. NODI								<=	130 30DA GEO	<=	240 7 DA GEO	13 - #/100m	nL 0	01/01 - Daily	GR - GRAB
					nple =	= 42	210	=	6068	26 - lb/d			=	8	=	10	19 - mg/L		01/01 - Daily	24 - COMP24
80082 BOD, carbonaceous [5 day, 2	20 C]	1 - Effluent Gross	0	Permi	it Req. <		021 MO AVG	<=		26 - Ib/d			<=	30 MO AVG		45 MX WK AV	19 - mg/L	0	01/01 - Daily	24 - COMP24
					NODI									142	_	100	10 ~~~/		01/01 Doily	24 COMP24
80082 BOD, carbonaceous [5 day, 2	20 C]	G - Raw Sewage Influent	0		nple it Req.								=	143 Req Mon MO AVG		188 Req Mon MX WK AV	19 - mg/L 19 - mg/L	0	01/01 - Daily 01/01 - Daily	24 - COMP24 24 - COMP24
	-	3		Value	NODI									•						
80091 BOD, carb-5 day, 20 deg C, p	oroont removel	K Porcont Romoval	0		nple it Rog						=	94 85 MO AV MN	1				23 - % 23 - %	0	01/30 - Monthly	CA - CALCTD CA - CALCTD
UUUSI DUD. CalD-5 UaV. 20 Ged C. D	ercent removal	K - Feiceni Kennoval	0		it Req.						>=	05 IVIO AV IVIN	N				23 - 70	0	01/30 - Monthly	UA - CALUID

		0		ample				=	97		23 - %	01/30 - Mont	•	CA - CALCTD
011 Solids, suspended percent removal	K - Percent Removal	0		nit Req. le NODI				>=	85 MO AV MN		23 - %	0 01/30 - Mont	hly	CA - CALCTD
Submission Note			Val	e NODI										
a parameter row does not contain a	ny values for the Sample	nor Efflu	ent Trading, then	none of the fol	lowing fields will b	e submitted for th	nat row: Units, Nun	nber of I	Excursions, Frequency of Anal	ysis, and Sample Type.				
Edit Check Errors														
No errors.														
Comments														
Attachments														
				N	ame						Туре		Siz	е
September2018_OverflowReport_DRG.pd	df									pdf		115005		
WCMOR061318092018.xls										xls		137728		
0918_drg_Coverletter.pdf										pdf		55321		
Report Last Saved By														
Derek R Guthrie WQTC MSD														
Jser:		kevin.th	nompson@louisvi	lemsd.org										
Name:		Kevin	Thompson											
E-Mail:		kevin.th	nompson@louisvi	lemsd.org										
Date/Time:		2018-10	0-25 13:52 (Tim	e Zone: -04:00)									
Report Last Signed By														
Jser:		WRIGH	ITDUANE											
Name:		Duane	Wright											
E-Mail:		duane.	wright@louisviller	nsd.org										
Date/Time:		2018-10	0-25 13:54 (Tim	e Zone: -04:00)									

DMR Copy of Record

Permit																					
Permit #:	KY0078956			Permittee:			Derek	R Guthr	ie W	QTC MSI	C		Facil	ity:		C	DEREK R	GUTH	HRIE WQTC MS	D	
Major:	Yes			Permittee A	Address:		700 W Louisvi)3			Facil	ity Loca	tion:		1621 LO OUISVIL		RIVER RD Y 40272		
Permitted Feature:	001 External Outfall			Discharge:			001-2 QUAR	TERLY	BION	MONITOF	RING										
Report Dates & Status																					
Monitoring Period:	From 07/01/18 to 0	09/30/18		DMR Due D	Date:		10/28/1	18					Statu	IS:		N		/alida	ted		
Considerations for Form C	ompletion																				
Principal Executive Officer																					
First Name:	James A.			Title:			Execut	ive Dire	ctor				Tele	ohone:		5	502-540-6	000			
Last Name:	Parrott												-								
No Data Indicator (NODI)																					
Form NODI:																					
Parameter	Monitoring Locatio	n Season	# Param. NO				ty or Loadi							ncentratio				t of Ex.	Frequency of Anal	ysis San	nple Type
Code Name				-	Qualifier 1	1 Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2			Value 3		Units		01/00 Quartarly	24	COMP24
61406 Toxicity, final conc toxicity un	its 1 - Effluent Gross	0		Sample Permit Req.									<		I 1 MAXIMUN		tox acute tox acute 0		01/90 - Quarterly 01/90 - Quarterly		COMP24 COMP24
				Value NODI																	
Submission Note																					
If a parameter row does not o	contain any values fo	or the Sar	mple nor Eff	luent Trading	g, then no	one of tl	he followir	ng fields	s will	be submi	tted for	that row:	Units, N	umber of	Excursion	ns, Fr	requency	of Ana	alysis, and Samp	le Type	
Edit Check Errors																					
No errors.																					
Comments																					
Attachments																					
No attachments.																					
Report Last Saved By																					
Derek R Guthrie WQTC MS	D																				
User:		kevin.the	ompson@lo	uisvillemsd.	org																
Name:		Kevin	Thompson																		
E-Mail:		kevin.the	ompson@lo	uisvillemsd.	org																
Date/Time:		2018-10	-24 14:28	(Time Zone	: -04:00)																
Report Last Signed By																					
User:		WRIGH	TDUANE																		
Name:		Duane	Wright																		
E-Mail:		duane.w	right@louis/	villemsd.org																	
Date/Time:		2018-10	-25 13:54	(Time Zone	: -04:00)																



KPDES #	Facility ID		Water Qu	ality Treaten	nent Center	Rece	iving Strea	m of Treatment Center	Regio	n
KY0078956	MSD0277		DEREK R.	GUTHRIE		OHIO R	IVER		WEST	
Facility Type SMH Sewer Manhole	Facility ID 25484		Facility Address		If Pump Station, Nam	e of Pump Static	on:	Receiving Stream PENNSYLVANIA RUN	Discha ST	rge to REAM
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Ref No</u> 2984772	<u>Initiated</u> 09/24/2018	Initiated By CATALANO JR	<u>Assigned To</u> REYNOLDS	<u>Disch Status</u> DOCUMENTED	<u>Event Date</u> 01/13/2013	<u>Problem</u> LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/24/18 09:31 PM	Condition

Discharge Reporting:

18,400 GAL
LACK OF SYSTEM CAPACITY. HEAVY RAIN.
MSD PERSONNEL CLEANED AND SANITIZED THE IMPACTED AREA.
PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.
SEWAGE/WATER DISCHARGING FROM MANHOLE.
SOLUTION LOCATED IN THE IOAP.
PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.

9/24/18 1:00 pm	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
9/24/18 1:00 pm	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION



KPDES #	Facility ID	Water C	Quality Treatement C	Center	Receiv	ing Stream of	Treatment Center	Region	
KY0078956 (Cont'd)	MSD0277	DEREK R	R. GUTHRIE		OHIO RIV	ER		WEST	
Activity Code / Description : DISREVRAIN EVENT DISCHARGE	<u>WO #</u> <u>Ref No</u> 2985604	InitiatedInitiated By9/26/2018MORRIS5:21:00AM	<u>Assigned To</u> CATALANO JR	<u>Disch Status</u> DOCUMENTED	<u>Event Date</u> 01/13/2013	<u>Problem</u> LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/26/18 07:45 AM	<u>Condition</u>

Discharge Reporting:

Discharge Amount:	3,600 GAL
Cause:	LACK OF SYSTEM CAPACITY. HEAVY RAIN.
Clean Up:	NONE POSSIBLE DUE TO MAGNITUDE OF STORM.
Control Zone:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.
Impact:	SEWAGE/WATER DISCHARGING FROM MANHOLE.
Repair:	SOLUTION IS IN THE IOAP.
Public Notification:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.

9	/26/18 1:00 pm	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG,
			SAYRE.DENNIS@EPAMAIL.EPA.GOV



KPDES #	Facility ID		Water Q	uality Treatem	nent Center	Rece	iving Strea	m of Treatment Center	Regio	n
KY0078956	MSD0277		DEREK R	. GUTHRIE		OHIO R	IVER		WEST	
Facility Type SMH Sewer Manhole	Facility ID 60679		Facility Addres		If Pump Station, Nam	ne of Pump Static	n:	Receiving Stream FISHPOOL CREEK	Discha D	rge to NTCH
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Ref No</u> 2984951	<u>Initiated</u> 09/24/2018	<u>Initiated By</u> ROTTET JR	<u>Assigned To</u> PEDRO JR	<u>Disch Status</u> DOCUMENTED	<u>Event Date</u> 12/15/2007	Problem LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/24/18 11:25 PM	<u>Condition</u>

Discharge Reporting:

Discharge Amount:	9,600 GAL
Cause:	LACK OF SYSTEM CAPACITY. HEAVY RAIN.
Clean Up:	MSD CREW CLEANED AND SANITIZED AREA.
Control Zone:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.
Impact:	SEWAGE/DEBRIS FOUND AROUND MANHOLE.
Repair:	CONTRACTOR HAULED STATION UNTIL STATION COULD MAINTAIN ON ITS OWN.
Public Notification:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.

9/25/18 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
9/25/18 1:00 am	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION



KPDES #	Facility ID	Water C	auality Treatement Center	Receiving Stream o	of Treatment Center	Region	
KY0078956 (Cont'd)	MSD0277	DEREK F	R. GUTHRIE	OHIO RIVER		WEST	
Activity Code / Description : DISREVRAIN EVENT DISCHARGE	<u>WO #</u> <u>Ref No</u> 2985601	InitiatedInitiated By9/26/2018MORRIS5:08:00AM	Assigned To Disch Statu CATALANO JR DOCUMEN		<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/27/18 12:06 AM	<u>Condition</u>

Discharge Reporting:

Discharge Amount:	22,500 GAL
Cause:	LACK OF SYSTEM CAPACITY. HEAVY RAIN.
Clean Up:	CLEANUP NOT POSSIBLE DUE TO MAGNITUDE OF STORM.
Control Zone:	TEMPORARY SIGNS HAVE BEEN POSTED.
Impact:	SEWAGE/WATER DISCHARGING FROM MANHOLE.
Repair:	SITE FOUND DURING RAIN EVENT RECON. WILL BE MONITORED AND EVALUATED FOR REPAIR.
Public Notification:	TEMPORARY SIGNS HAVE BEEN POSTED.

9/26/18 1:00 pm	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
9/26/18 1:00 pm	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION



KPDES #	Facility ID		Water Qu	Water Quality Treatement Center Rec			iving Strea	m of Treatment Center	Regio	Region	
KY0078956	MSD0277 DEREK R. GUTHRIE		GUTHRIE	OHIO RIVER				WEST			
Facility Type SMH Sewer Manhole	Facility IDFacility Address81443420 ECHAPPE LN			If Pump Station, Name of Pump Station:			Receiving Stream BEE LICK CREEK		Discharge to DITCH		
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Ref No</u> 2977438	<u>Initiated</u> 09/09/2018	Initiated By CATALANO JR	<u>Assigned To</u> CATALANO JR	Disch Status DOCUMENTED	<u>Event Date</u> 09/09/2018	<u>Problem</u> LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/09/18 02:45 AM	<u>Condition</u>	

Discharge Reporting:

Discharge Amount:	1,500 GAL
Cause:	LACK OF SYSTEM CAPACITY.
Clean Up:	MAGNITUDE OF STORM RESULTED IN NO DEBRIS REMAINING.
Control Zone:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.
Impact:	SEWAGE/WATER DISCHARGING FROM MANHOLE.
Repair:	INVESTIGATION INDICATED THAT ADDITIONAL REPAIRS WERE NOT REQUIRED BY MSD.
Public Notification:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.

9/9/18 1:00 pm	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG,
		SAYRE.DENNIS@EPAMAIL.EPA.GOV



KPDES #	Facility ID Water Quality Treatem			nent Center	Rece	iving Strea	m of Treatment Center	Region		
KY0078956	MSD0277	MSD0277 DEREK R. GUTHRIE		OHIO RIVER				WEST		
Facility Type SMH Sewer Manhole	Facility IDFacility Address937058800 ADMIRAL DR			If Pump Station, Name of Pump Station:			Receiving Stream PENNSYLVANIA RUN	Discha ST	rge to REAM	
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Ref No</u> 2985026	<u>Initiated</u> 09/24/2018	Initiated By CATALANO JR	<u>Assigned To</u> DENZIK	<u>Disch Status</u> DOCUMENTED	<u>Event Date</u> 09/24/2018	<u>Problem</u> LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/24/18 11:55 PM	<u>Condition</u>

Discharge Reporting:

Discharge Amount:	71,500 GAL
Cause:	LACK OF SYSTEM CAPACITY DUE TO HEAVY RAIN.
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE IMPACTED AREA.
Control Zone:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.
Impact:	SEWAGE/DEBRIS/SOLIDS/PERSONAL HYGIENE PRODUCTS FOUND AROUND MANHOLE.
Repair:	SOLUTION IN THE IOAP.
Public Notification:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.

9/25/18 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
9/25/18 1:00 am	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION



KPDES # Facility ID			Water C	Quality Treaten	Treatement Center Receiving Stream of Treatment Center			n of Treatment Center	Region WEST	
Y0078956 MSD0277		7	DEREK R. GUTHRIE			OHIO R	RIVER			
Facility Type	Facility I	ט	Facility Addre	SS	If Pump Station, Nan	ne of Pump Static	on:	Receiving Stream	Discha	rge to
SLS Sewer Lift Station	SLS Sewer Lift Station MSD0101-PS		9317 LANTANA DR		LANTANA DRIVE #1			PENNSYLVANIA RUN	DITCH	
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO # Re</u> 2984572	<u>f No</u> <u>Initiated</u> 09/23/2018	Initiated By RAYMER	<u>Assigned To</u> BRAZEL	<u>Disch Status</u> DOCUMENTED	<u>Event Date</u> 03/18/2013	<u>Problem</u> LACK OF SYSTEM CAPACITY	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/23/18 01:18 PM	<u>Condition</u>

Discharge Reporting:

Discharge Amount:	5,880 GAL
Cause:	LACK OF SYSTEM CAPACITY.
Clean Up:	AREA DISINFECTED WITH LIME.
Control Zone:	PERMANENT SIGNS SUPPLEMENTED WITH TEMPORARY SIGNS.
Impact:	SEWAGE FOUND AROUND MANHOLE.
Repair:	SITE FOUND DURING RAIN EVENT RECON - WILL BE MONITORED AND EVALUATED FOR REPAIR.
Public Notification:	PERMANENT SIGNS SUPPLEMENTED WITH TEMPORARY SIGNS.

9/23/18 1:00 pm	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
9/23/18 1:00 pm	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION



KPDES #	Facility ID			Water Quality Treatement Center			Receiv	Receiving Stream of Treatment Center			Region	
KY0078956	MSD0277			DEREK R	. GUTHRIE	OHIO RIVER			WEST			
Facility Type SLS Sewer Lift Station	Facility ID MSD1051-PS		Facility Address 8800 ADMIRAL DR		If Pump Station, Name of Pump Station: ADMIRAL		: Receiving Stream PENNSYLVANIA RUN		Discharge to STREAM			
Activity Code / Description : DISREV: RAIN EVENT DISCHARGE	<u>WO #</u> 2985906	<u>Ref No</u>	<u>Initiated</u> 09/26/2018	<u>Initiated By</u> GRAY JR	<u>Assigned To</u> MULLINS	Disch Status REPAIRED - ISSUE RESOLVED	<u>Event Date</u> 09/26/2018	<u>Problem</u> MECHANICAL FAILURE	<u>Result</u> UNAUTHORIZED DISCHAGE - WATERS	<u>Completed</u> 09/26/18 03:21 PM	<u>Condition</u>	

Discharge Reporting:

Discharge Amount:	4,000 GAL
Cause:	ELECTRICAL PROBLEM WITH MSD EQUIPMENT. MOTOR STARTER FAILED.
Clean Up:	CLEANED AND SANITIZED THE IMPACTED AREA.
Control Zone:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA.
Impact:	SEWAGE/DEBRIS/SOLIDS/PERSONAL HYGIENE PRODUCTS FOUND AROUND MANHOLE.
Repair:	PUMP TAKEN OUT OF OPERATIONAL SEQUENCE SO LAG PUMP COULD RUN.
Public Notification:	NOTIFIED ON PROJECT WIN WEB SITE , GIVEN BY VOLUNTARY EMAIL NOTIFICATION SYSTEM.

Notifications:

9/27/18 1:00 am	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
9/27/18 1:00 am	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION

Total Facilities Printed: 6

Total Work Orders Printed:

8