



**MSD**

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

September 25, 2008

Charlie Roth, District Supervisor  
Kentucky Division of Water  
9116 Leesgate Road  
Louisville, Ky 40222

RE: Floyds Fork Wastewater Treatment Plant, KPDES No: KY0102784  
Discharge Monitoring Report for August 2008.

Dear Mr. Roth:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Floyds Fork Wastewater Treatment Plant, for the month of August 2008.

If you have any questions concerning the attached DMR's, please contact me at (502)241-9093.

Sincerely,

John Kessel  
Process Supervisor, East Region

JMK/ Floyds Fork 0808

Enclosures

cc: V. Prather (DOW)  
T. Singleton  
P. Burgin  
R. Shaw



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

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME MSD FLOYDS FORK STP  
 ADDRESS C/O CEDAR CREEK STP  
 8403 CEDAR CREEK RD  
 LOUISVILLE KY 40211  
 FACILITY MSD FLOYDS FORK STP  
 LOCATION LOUISVILLE KY 40245  
 ATTN: DENNIS THOMASSON, SR METRO OPS

KY0102784  
 PERMIT NUMBER

001 1  
 DISCHARGE NUMBER


MAJOR (SUBR LV)  
 F - FINAL  
 MUNICIPAL DISCHARGE  
 EFFLUENT  
 \*\*\* NO DISCHARGE \*\*\*  
 NOTE: Read Instructions before completing this form.

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
08	08	01		08	08	31

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DD) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.1	*****	*****	( 19 )	0	3/2	Grab
	PERMIT REQUIREMENT	*****	*****	*** ***	7 INST MIN	*****	*****	MG/L		THREE/ WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		8.2	*****	8.4	( 12 )	0	3/2	Grab
	PERMIT REQUIREMENT	*****	*****	*** ***	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED 00530 9 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	3825	6877	( 26 )	*****	296	494	( 19 )	0	3/2	Comp
	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		THREE/ WEEK	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	26	28	( 26 )	*****	2.0	2.0	( 19 )	0	3/2	Comp
	PERMIT REQUIREMENT	813 MD AVG	1220 MX WK AV	LBS/DY	*****	30 MD AVG	45 MX WK AV	MG/L		THREE/ WEEK	COMPOS
NITROGEN, AMMONIA TOTAL (AS N) 00610 9 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	257	340	( 26 )	*****	20.8	24.0	( 19 )	0	3/2	Comp
	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		THREE/ WEEK	COMPOS
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.0	5.3	( 26 )	*****	0.13	0.32	( 19 )	0	3/2	Comp
	PERMIT REQUIREMENT	54 MD AVG	81 MX WK AV	LBS/DY	*****	2 MD AVG	3 MX WK AV	MG/L		THREE/ WEEK	COMPOS
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.14	0.33	( 19 )	0	3/2	Comp
	PERMIT REQUIREMENT	*****	*****	*** ***	*****	1.0 MD AVG	1.5 MX WK AV	MG/L		THREE/ WEEK	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Exec Director  
 H J Schuler, Jr  
 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  
 502 546 1000  
 AREA CODE NUMBER  
 DATE  
 08 19 06  
 YEAR MO DAY

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

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

MAJOR  
(SUBR LV)  
F - FINAL

JEFFE

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MONITORING PERIOD						
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MUNICIPAL DISCHARGE  
EFFLUENT

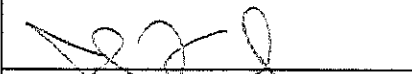
\*\*\* NO DISCHARGE 1 1 \*\*\*

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PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	1.50	1.65	( 03 )	*****	*****	*****		0	1/2	1/2	
50050 1 0 0 EFFLUENT GROSS VALUE	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTIN	CONTIN	
COLIFORM, FECAL GENERAL	*****	*****		*****	3	3	( 13 )	0	3/7	Grab	
74055 1 0 0 EFFLUENT GROSS VALUE	*****	*****	****	*****	200	400	#/		THREE/	GRAB	
BOD, CARBONACEOUS 05 DAY, 20C	2368	3968	( 26 )	*****	185	291	( 19 )	0	3/7	Cont	
00082 0 0 0 RAW SEW/INFLUENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		THREE/	COMPOS	
BOD, CARBONACEOUS 05 DAY, 20C	39	42	( 26 )	*****	3.0	3.0	( 19 )	0	3/7	Cont	
00082 1 0 0 EFFLUENT GROSS VALUE	271	407		*****	10	15			THREE/	COMPOS	
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL	*****	*****		98 %	*****	*****	( 23 )	0	3/31	Cal	
00091 0 0 0 PERCENT REMOVAL	*****	*****	****	85	*****	*****	PER-		ONCE/	CALC'D	
SOLIDS, SUSPENDED PERCENT REMOVAL	*****	*****		99 %	*****	*****	( 23 )	0	1/31	Cal	
61011 0 0 0 PERCENT REMOVAL	*****	*****	****	85	*****	*****	PER-		ONCE/	CALC'D	

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Exec Director  
H. J. Schodde Jr  
TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 502 541 6100  
DATE 07 29 2008  
AREA CODE NUMBER YEAR MO DAY

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

