



MSD

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

October 27, 2008

Ms Vickie L. Prather
Kentucky Division of Water
14 Reilly Road
Frankfort, Kentucky 40601

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

Dear Ms Prather

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operator Report (MOR)
For the Floyds Fork wastewater treatment plant for the month of September 2008.

Also included are the 3rd quarter Bio results.

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 0908

Enclosures

cc: C. Roth (DOW Louisville)
T. Singleton
P. Burgin
R. Shaw



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

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

NAME MSD FLOYDS FORK STP
 ADDRESS C/O CEDAR CREEK STP
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY MSD FLOYDS FORK STP
 LOCATION LOUISVILLE KY 40245
 ATTN: DENNIS THOMASSON, SR METRO OPS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 KY0102734
 PERMIT NUMBER

 001 1
 DISCHARGE NUMBER

 MAJOR
 (SUBR LV)
 F - FINAL

JETTE

 MUNICIPAL DISCHARGE
 EFFLUENT

*** NO DISCHARGE 1 1 ***

NOTE: Read Instructions before completing this form.

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	08	09	01		08	09	30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****		7.0	*****	*****	(19)	0	3/7	Grab
DO300 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	7	*****	*****	MG/L		THREE/GRAB	WEEK
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.9	*****	8.4	(12)	0	3/7	Grab
PH	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	BU		THREE/GRAB	WEEK
DO400 1 0 0	SAMPLE MEASUREMENT	*****	*****	(26)	*****	438.0	483.0	(19)	0	3/7	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	REPORT	REPORT	MG/L		THREE/COMPOS	WEEK
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	5977	6471	(26)	*****	2.0	2.0	(19)	0	3/7	Grab
DO530 0 0 0	PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	REPORT	REPORT	MG/L		THREE/COMPOS	WEEK
RAW SEW/INFLUENT	SAMPLE MEASUREMENT	27	28	(26)	*****	2.0	2.0	(19)	0	3/7	Grab
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	813	1220	*****	*****	30	45	MG/L		THREE/COMPOS	WEEK
DO630 1 0 0	SAMPLE MEASUREMENT	360	435	(26)	*****	26.0	31.0	(19)	0	3/7	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	REPORT	REPORT	MG/L		THREE/COMPOS	WEEK
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	6.0	10.0	(26)	*****	0.47	0.67	(19)	0	3/7	Comp
DO610 0 0 0	PERMIT REQUIREMENT	54	81	*****	*****	2	3	MG/L		THREE/COMPOS	WEEK
RAW SEW/INFLUENT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.47	0.67	(19)	0	3/7	Comp
NITROGEN, AMMONIA TOTAL (AS N)	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.5	MG/L		THREE/COMPOS	WEEK
DO610 1 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.47	0.67	(19)	0	3/7	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.5	MG/L		THREE/COMPOS	WEEK
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.47	0.67	(19)	0	3/7	Comp
DO665 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.5	MG/L		THREE/COMPOS	WEEK
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

 Exec Dir
 H.J. Schade 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

DATE

 458
 AREA
 CODE

 540-6000
 NUMBER

 08
 YEAR

 10
 MO

 24
 DAY

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

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

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

MAJOR
(SUBR LV)
F - FINAL
MUNICIPAL
EFFLUENT

1997

NAME MSB FLOYDS FORK STP
ADDRESS C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
ACTIVITY MSB FLOYDS FORK STP
LOCATION LOUISVILLE KY 40245
ATTN: DENNIS THOMASSON, SR METRO DFG

KY0102784
PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	08	07	01		08	07	31

NOTE: Read Instructions before completing this form.

[illegible]

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE _____

AREA
CODE

NUMBER	
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68

10

21

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

JEFF

QUARTERLY METALS/BIO-MONITORING
EFFLUENT

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

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

NAME MSD FLOYDS FORK STP
ADDRESS C/O CEDAR CREEK STP
8405 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 Y
DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 08 MO 07 DAY 01 TO YEAR 08 MO 07 DAY 30

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	*****	*****		*****	327	327	(19)	0	1/92	Comp
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MD AVG	REPORT DAILY MX	MG/L		ONCE / MONTH	COMPOS
ZINC TOTAL RECOVERABLE 01094 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.0290	0.0290	(19)	0	1/92	Comp
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MD AVG	REPORT DAILY MX	MG/L		QTRLY COMPOS	
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.001	<0.001	(19)	0	1/92	Comp
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MD AVG	REPORT DAILY MX	MG/L		QTRLY COMPOS	
LEAD TOTAL RECOVERABLE 01114 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.005	<0.005	(19)	0	1/92	Comp
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MD AVG	REPORT DAILY MX	MG/L		ONCE / MONTH	COMPOS
COPPER TOTAL RECOVERABLE 01117 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.010	0.010	(19)	0	1/92	Comp
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MD AVG	REPORT DAILY MX	MG/L		QTRLY COMPOS	
TOXICITY, FINAL CONC TOXICITY UNITS 61406 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	< 1.0	< 1.0	(20)	0	1/92	Comp
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.00 CHRONIC DAILY MX TOXCTY				QTRLY COMPOS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Exec Dir.

H. J. Schaefer Jr

TYPED OR PRINTED

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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)

NAME OF TREATMENT PLANT FLOYDS FORKCOUNTY JEFFERSONMONTH OF: September 2008KPDES PERMIT NUMBER KY0102784PLANT CAPACITY 3.5 MGDRECEIVING STREAM FLOYDS FORK

PDES PERMIT NUMBER				K10102764				PLANT CAPACITY				3.3 MGD				RECEIVING STREAM				FLOYDS CRT															
DATE	TOTAL FLOW (MILLION GALLONS)	RAW SEWAGE		pH		SETTLEABLE SOLIDS (mg/L)		DISSOLVED OXYGEN (mg/L)		SUSPENDED SOLIDS (mg/L)		5 DAY CBOD (mg/L)		ACTIVATED SLUDGE			AERATION BASIN				SLUDGE HANDLING				FINAL										
		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	RETURN		WASTED	DISSOLVED OXYGEN (mg/L)	MLSS (mg/L) x 1000	MLVSS (mg/L) x 1000	SETTLED SLUDGE VOLUME		RAW		HAULED		PHOSPHORUS, TOTAL (mg/L)	NH3-N (mg/L)	FECAL COLIFORM (COLONIES/100ML)			
																		GAL/DAY x 1000	MLSS x1000					30 MIN.	60 MIN.	GALLONS x 1000	% DRY SOLIDS	% VOLATILE SOLIDS	% DRY SOLIDS				% VOLATILE SOLIDS	WITHDRAWN GALLONS x 1000	
1	1.736										398		2	399		3	1.646														441	0.83	0.06	3	
2	1.571			7.5	8.3					7.1		472		2	267		3	1.62	7170	44	3.6	3640	2510	410							50.4	0.86	0.06	3	
3	1.614			7.5	8.4					7.0		363		2	218		3	1.81	8120		3.6	3770	2630	420							50.4	0.79	0.50	3	
4	1.568			7.5	8.3					7.1								1.77	6250	40	3.5	4010	2770	360					0.751		50.4	0.60			
5	1.103			7.5														1.85	5620	40	3.6	3540	2610	380							50.4				
6	1.251																	1.88																	
7	1.810											532		2	149		3	1.97														0.26	0.06	3	
8	1.575			7.4	8.4					7.0		674		2	155		3	1.83	5490	41	4.6	3570	2520	400							31.5	0.33	0.50	3	
9	1.806			7.4	8.4					7.0		544		2	195		3	1.88	6210	42	4.8	3580	2470	400							50.4	0.25	0.39	3	
10	1.729			7.3	8.3					7.4								1.72	8490	44	5.2	3710	2540	400							44.1				
11	1.576			7.2														1.9	5200	49	5.6	3650	2550	400					1.05		44.1				
12	1.619			7.3														1.74	5770		5.4	3570	2520	400							93.7				
13	1.720			7.4														2.12																	
14	1.610											89		2	66		3	1.61														0.41	0.06	3	
15	1.575			7.4	7.9					7.3		514		2	255		3	1.53	4620	40	4.7	4150	2900	350							6.3	0.37	0.06	3	
16	1.490			7.4	8.4					8.0		519		2	250		3	1.61	6100	41	5.6	3680	2480	380							50.4	0.38	0.06	3	
17	1.546			7.4	8.3					7.5								1.5	7330	44	5.2	3060	2130	380							69.3				
18	1.519			7.6														1.53	7580	37	3.6	3560	2410	370					1.04		56.7				
19	1.520			7.6														2.04	4830	42	4.6	3160	2140	370							25.2				
20	1.747																	1.76																	
21	1.786											417		2	175		3	1.9														0.35	1.90	3	
22	1.517			7.9	8.3					7.1		432		2	277		3	1.7	6280	31	2.6	3470	2440	400							12.6	0.39	2.00	3	
23	1.470			7.6	8.3					7.6		304		2	214		3	1.99	4760	32	1.9	3690	2540	430							31.5	0.32	0.06	3	
24	1.456			7.4	8.3					7.2								1.78	7680	41	4.6	3440	2350	440							44.1				
25	1.471			7.4														1.89	6800	37	4.9	3750	2540	440					1.02		56.7				
26	1.422			7.4														1.62	7170	37	5.6	3610	2450	420							107.1				
27	1.567																	2.22														88.2			
28	1.600																	1.53																	
29	1.381			7.4														1.7	6850	48	5.7	3760	2550	460							44.1				
30	1.691			7.4														1.73	6090	44	5.8	3700	2480	440							37.8				
31																																			
Tot.	47.05																	53.38														1536			
Avg.	1.568			7.5	8.3					7.3		438		2	218		3	1.779	6400	40.74	4.51	3622	2501	402.4					0.965		66.8	0.47	0.47	3	

RESIDENTIAL
COMMERCIAL
INDUSTRIALINDUSTRIAL WASTE POPULATION EQUIVALENT
14935
FLOW16797
CBOD27289
TSS

OPERATOR

CERT. NO.

TOTAL NUMBER OF SEWER CONNECTIONS

0

SEWER CONNECTIONS 0 X 4 = 0 SEWERED POPULATION

PLANT TELEPHONE