MSD

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

March 26, 2008

Ms. Kathy Thurman
Kentucky Division of Water
14 Reilly Road
Frankfort, Kentucky 40601

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

Dear Ms. Thurman:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operator Report (MOR) For the Floyds Fork wastewater treatment plant for the month of February 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 0208

Enclosures

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

Form Approved.
OMB No. 2040-0004

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

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

KY0102784	001 1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	08	02	01	TO	08	02	29

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

JEFFE

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	******	******		7.8	******	******	(19)	0	3/7	Grab
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	7 INST MIN	******	******	MG/L		THREE/WEEK	GRAB
PH	SAMPLE MEASUREMENT	******	******		8.0	******	8.2	(12)	0	3/7	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		THREE/WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	4	1	(26)	******	123	132	(19)	0	3/7	Comp
00530 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	******	REPORT MO AVG	REPORT MX WK AV	MG/L		THREE/WEEK	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	69	84	(26)	******	3	4	(19)	0	3/7	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	813 MO AVG	1220 MX WK AV	LBS/DY	******	30 MO AVG	45 MX WK AV	MG/L		THREE/WEEK	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	233	259	(26)	******	11	12	(19)	0	3/7	Comp
00610 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	******	REPORT MO AVG	REPORT MX WK AV	MG/L		THREE/WEEK	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	1.3	1.5	(26)	******	0.06	0.06	(19)	0	3/7	Comp
00610 1 2 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	136 MO AVG	203 MX WK AV	LBS/DY	******	5 MO AVG	7.5 MX WK AV	MG/L		THREE/WEEK	COMPOS
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	******	******		******	0.49	0.53	(19)	0	3/7	Comp
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	*****	******	1.0 MO AVG	1.5 MX WK AV	MG/L		THREE/WEEK	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Exec Director H.J. Schadein Jr	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	502 / 841-9693	08	03	25
TYPED OR PRINTED			AREA CODE / NUMBER	YEAR	MO	DAY

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

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
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LOCATION LOUISVILLE KY 40245
ATTN: DENNIS THOMASSON, SR METRO OPS

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

Form Approved.
OMB No. 2040-0004

KY0102784 — PERMIT NUMBER
001 1 — DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	08	02	01	TO	08	02	27

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

JEFFE

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PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	2.64	3.05	(03)	******	******	******		0	C/N	C/N
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	CONTIN
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	******	******		******	5	7	(13)	0	3/7	Grab
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	****** **** ****		******	200 30DA GEO	400 #/ 7 DA GEO 100ML			THREE/ WEEK	GRAB
BOD, CARBONACEOUS 05 DAY, 20C 80082 6 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	1528	1886	(26)	******	71	89	(19)	0	3/7	Comp
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	******	REPORT MO AVG	REPORT MX WK AV	MG/L		THREE/ WEEK	COMPOS
BOD, CARBONACEOUS 05 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	60	80	(26)	******	3	3	(19)	0	3/7	Comp
	PERMIT REQUIREMENT	271 MO AVG	407 MX WK AV	LBS/DY	******	10 MO AVG	15 MX WK AV	MG/L		THREE/ WEEK	COMPOS
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL 80091 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******		95.5%	******	******	(23)	0	1/29	Cal
	PERMIT REQUIREMENT	******	****** **** ****		85 MO MIN	******	******	PER-CENT		ONCE/ MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******		97.5%	******	******	(23)	0	1/29	Cal
	PERMIT REQUIREMENT	******	****** **** ****		85 MO MIN	******	******	PER-CENT		ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Exec Director
W.J. Schaedle 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

AREA CODE	NUMBER
502	241-9093

DATE

YEAR	MO	DAY
08	03	25

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

NAME OF TREATMENT PLANT FLOYDS FORK COUNTY JEFFERSON MONTH OF: February 2008

KPDES PERMIT NUMBER KY0102784 PLANT CAPACITY 3.5 MGD RECEIVING STREAM FLOYDS FORK

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	GAL/DAY X 1000				30 MIN.	60 MIN.	GALLONS X 1000	% DRY SOLIDS	% VOLATILE SOLIDS	% DRY SOLIDS	% VOLATILE SOLIDS	WITHDRAWN GALLONS X 1000			
1	2.450			7.5														2.357	7.39		6.2	4600	3490	400							31.5			
2	1.786																	1.81													56.7			
3	2.267											142		2	85		3	2.12														0.48	0.06	22
4	2.552			7.6	8.2					7.8		126		2	89		3	2.07	9.08	37	4.2	4555	3310	400							44.1	0.53	0.06	3
5	4.820			7.6	8.1					9.6		109		3	48		3	2.06	10.7	45	5.2	4670	3560	400							56.7	0.59	0.06	5
6	4.492			7.5	8.0					9.8								2.02	12.7	19	5.4	3810	2780	300							81.9			
7	2.978			7.5														2.06	9.3	40	7	4760	3470	400							63			
8	2.696			7.7														2.36	9.28	31	6.2	4090	2970	400										
9	2.164																	2.07													6.3			
10	1.018											131		3	90		3	1.85													31.5	0.46	0.06	3
11	3.191			7.6	8.2					10.2		158		3	71		3	2.21	7.05	52	6.4	4470	3240	430							12.6	0.49	0.06	3
12	4.386			7.7	8.2					10.1		106		4	39		Scratch	1.78	9.36	45	6.1	3310	2820	410							6.3	0.54	0.06	7
13	2.957			7.6	8.1					10.2								1.74	10.1	33	6.2	3770	2760	360							50.4			
14	2.746			7.5														2.06	9.85	31	7.1	4320	3180	400							63			
15	2.992			7.5								81		4	43		3	2.2	7	35	8	4030	2950	390							37.8			
16	2.592																	2.26													6.3			
17	2.637											122		4	46		3	2													50.4	0.45	0.06	3
18	2.151			7.6	8.1					9.4		117		3	61		3	2.04	8.86	41	6.1	4440	3260	400							50.4	0.47	0.06	7
19	2.168			7.4	8.1					10.5		146		3	84		3	2.12	7.22	40	7	4120	3020	450							37.8	0.45	0.06	3
20	1.927			7.5	8.0					9.9								1.97	8.59	40	7.1	4250	3110	400							37.8			
21	2.578			7.5														2.19	7.1	40	7	4000	3000	360										
22	2.410			7.4														1.98	9.06	42	7.1	4020	3000	380							18.9			
23	2.944																	2.12													18.9			
24	2.565											114		3	132		3	1.98													50.4	0.51	0.06	3
25	2.335			7.4	8.0					9.2		118		2	76		3	2.07	9.39	56	6.1	3940	2960	410							113	0.51	0.06	3
26	2.708			7.8	8.2					10.0		126		2	60		3	2.16	7.64	52	5.7	3940	2860	380							31.5	0.37	0.06	10
27	2.017			7.5	8.0					9.9								1.79	6.51	36	6	3780	2810	380							56.7			
28	2.165			7.4														2.1	5.61	31	8.1	3750	2720	380							81.9			
29	1.963			7.4														2.75	4.88		8	3770	2740	400										
30																																		
31																																		
Tot.	76.66																	60.3													1096			
Avg.	2.643			7.5	8.1					9.7		123		3	71		3	2.079	8.413	39.26	6.486	4114	3048	391.9							43.83	0.49	0.06	5

RESIDENTIAL

COMMERCIAL

INDUSTRIAL 0

INDUSTRIAL WASTE POPULATION EQUIVALENT

25174	9217	12888
FLOW	CBOD	TSS

OPERATOR CERT. NO.

TOTAL NUMBER OF SEWER CONNECTIONS 0

SEWER CONNECTIONS 0 X 4 = 0 SEWERED POPULATION

PLANT TELEPHONE