



**MSD**

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

September 11, 2007

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

RE: Hite Creek Wastewater Treatment Plant, KPDES No: KY0022420  
Discharge Monitoring Report for August 2007

Dear Ms. Thurman:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) report for the Hite Creek Wastewater Treatment Plant, for the month of August 2007.

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

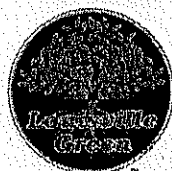
Sincerely,

John Kessel  
Process Supervisor, East Region

JMK/ Hite Creek. 0807

Enclosures

cc: M. Mudd (DOW Louisville)  
E. Brady  
T. Singleton  
P. Burgin  
R. Shaw



*Beneficial Use of Louisville's Biosolids*  
[www.louisvillegreen.com](http://www.louisvillegreen.com)

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

NAME MSD HITE CREEK STP  
 ADDRESS C/O LOUISVILLE/JEFF CO MSD  
 4522 ALGONQUIN PKWY  
 LOUISVILLE KY 40211-2497

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

KY0022420  
 PERMIT NUMBER

001 2  
 DISCHARGE NUMBER

MAJOR (SUBR LV)  
 F - FINAL  
 MUNICIPAL WASTEWATER  
 EFFLUENT

Form Approved  
 OMB No. 2040-0004

JEFFE

FACILITY MSD HITE CREEK STP  
 LOCATION LOUISVILLE KY 40201  
 ATTN: ALEX E NOVAK, OPER MGR

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	08	01		07	08	01

\*\*\* NO DISCHARGE 1 [ ] \*\*\*

NOTE: Read Instructions before completing this form.

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 (DO)	SAMPLE MEASUREMENT	*****	*****		7.1	*****	*****	( 17 )	0	3/7	Grab
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	INST MIN	*****	*****	MG/L		THREE / WEEK	
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.9	( 12 )	0	3/7	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM	50		THREE / WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	8086	13318	( 20 )	*****	310.17	505.67	( 17 )	0	3/7	Comp
00500 0 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT	MG/L		THREE / WEEK	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	93	104	( 20 )	*****	3.50	3.67	( 17 )	0	3/7	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1501	2252		*****	30	45	MG/L		THREE / WEEK	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	569	614	( 20 )	*****	21.62	21.97	( 17 )	0	3/7	Comp
00610 0 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT	MG/L		THREE / WEEK	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	16	16	( 20 )	*****	0.37	0.54	( 17 )	0	3/7	Comp
00610 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	100	150		*****	2	3	MG/L		THREE / WEEK	COMPOS
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	3.89	5.02	( 17 )	0	3/7	Comp
00665 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	MG/L		THREE / WEEK	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 H.J. Schauder  
 Exec Director  
 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 502 241 9093  
 DATE 07 09 11  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 USE MD AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
**NAME** MBD HITE CREEK STP  
**ADDRESS** C70 LOUISVILLE/JEFF CO MSD  
 4522 ALONGQUIN PKWY  
 LOUISVILLE KY 40211-2497  
**FACILITY** MSD HITE CREEK STP  
**LOCATION** LOUISVILLE KY 40201  
**ATTN:** ALEX E NOVAK, OPER MGR

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

KY0022420  
**PERMIT NUMBER**  
 001 2  
**DISCHARGE NUMBER**

MAJOR (SUBR LV)  
 F - FINAL  
 MUNICIPAL WASTEWATER  
 EFFLUENT

JEFFE

**MONITORING PERIOD**

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


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

NOTE: Read Instructions before completing this form.

PARAMETER	X	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		3.228	4.170	(03)	*****	*****	*****			0	C/W	C/W
50050 1 0 0 EFFLUENT GROSS VALUE		REPORT	REPORT		*****	*****	*****	***			CONT INCONTIN	
PERMIT REQUIREMENT		NO AVG	DAILY MX	MGD				****			DUOS	
COLIFORM, FECAL GENERAL		*****	*****		*****	4	9	(13)		0	3/7	Grab
74055 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	200	400	\$/			FREE/STAD	
PERMIT REQUIREMENT				****		300A GED	7 DA GED	100ML			WEEK	
BOD, CARBONACEOUS 5 DAY, 20C		4795	5964	(25)	*****	181.92	220.67	(17)		0	3/7	Comp
80082 6 0 0 RAW SEW/INFLUENT		REPORT	REPORT		*****	REPORT	REPORT				FREE/COMPS	
PERMIT REQUIREMENT		NO AVG	MX WK AV	LBS/DY		NO AVG	MX WK AV	MG/L			WEEK	
BOD, CARBONACEOUS 5 DAY, 20C		58	67	(25)	*****	2.17	2.33	(17)		0	3/7	Comp
80082 1 0 0 EFFLUENT GROSS VALUE		500	751		*****	10	15				FREE/COMPS	
PERMIT REQUIREMENT		NO AVG	MX WK AV	LBS/DY		NO AVG	MX WK AV	MG/L			WEEK	
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL		*****	*****		98.7	*****	*****	(25)		0	1/31	Cl
80091 4 0 0 PERCENT REMOVAL		*****	*****	***	85	*****	*****	PER-			ONCE/	SELECTD
PERMIT REQUIREMENT				****	NO AVG			CENT			MONTH	
SOLIDS, SUSPENDED PERCENT REMOVAL		*****	*****		98.6	*****	*****	(25)		0	1/31	Cl
81011 4 0 0 PERCENT REMOVAL		*****	*****	***	85	*****	*****	PER-			ONCE/	SELECTD
PERMIT REQUIREMENT				****	NO MIN			CENT			MONTH	
		SAMPLE MEASUREMENT										
		PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 H.S. Schardain  
 Exec Director  
 TYPED OR PRINTED

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 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
562	241-9053	07	09	11
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 USE NO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

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

NAME MSD HITE CREEK STP  
 ADDRESS C/O LOUISVILLE/JEFF CO MSD  
 4522 ALGONQUIN PKWY  
 LOUISVILLE KY 40211-2497  
 FACILITY MSD HITE CREEK STP  
 LOCATION LOUISVILLE KY 40201  
 ATTN: ALEX E NOVAK, OPER MGR

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

KY0022420  
 PERMIT NUMBER

001 R  
 DISCHARGE NUMBER

MAJOR (SUBR LV)  
 F - FINAL

Form Approved  
 OMB No. 2040-0004

JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	08	01		07	08	31

REASONABLE POTENTIAL  
 EFFLUENT

\*\*\* NO DISCHARGE [ ] \*\*\*

NOTE: Read Instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CYANIDE, FREE (AMEN. TO CHLORINATION) 00722 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	0.01	0.01	(19)	0	1/31	Coop
	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/MONTH	COMPOS
HARDNESS, TOTAL (AS CaCO3) 00900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	183	183	(19)	0	1/31	Coop
	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/MONTH	COMPOS
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	0.01	0.01	(19)	0	1/31	Coop
	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/MONTH	COMPOS
CADMIUM TOTAL RECOVERABLE 01113 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	0.002	0.002	(19)	0	1/31	Coop
	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/MONTH	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 H.J. Schaefer  
 Exec Director  
 TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
502	241-9673	07	09	11

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

NAME OF TREATMENT PLANT HITE CREEK WTP COUNTY JEFFERSON MONTH OF: August 2007  
 KPDES PERMIT NUMBER KY022420 PLANT CAPACITY 4.4 MGD RECEIVING STREAM HITE CREEK

DATE	TOTAL FLOW (MILLION GALLONS)	RAW SEWAGE		pH			SETTLABLE 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	GAL/DAY X 1000	MLSS X 1000	MLVSS X 1000	DISSOLVED OXYGEN (mg/L)	MLSS (mg/L) X 1000	MLVSS (mg/L) X 1000	SETTLED SLUDGE VOLUME		RAW			HAULED			NH3-N (mg/L)	FECAL COLIFORM (COLONIES/100ML)	Phosphorus mg/L	Cadmium, Total Recoverable	Hardness as CaCO3	Chromium, Hexavalent	Cyanide, Free (Amenable)	Mercury, Total Recoverable			
																								30 MIN.	60 MIN.	GALLONS X 1000	% DRY SOLIDS	% VOLATILE SOLIDS	% DRY SOLIDS	% VOLATILE SOLIDS	WITHDRAWN GALLONS X 1000											
1	3.2			7.6		14.0		0.0			244		3	127	2	1.01	6.64	65.7	3	2.655		150											75.6	0.1	3	5.02	0.2	183	0.01	0.005		
2	3.22	36	36	7.4	7.9	15.0		0.0	7.7		254		3	169	2	0.991	11.28	65.7	3.8	2.35		140											69.3	0.5	3							
3	3.18			7.6	7.8	15.0		0.0	7.3							0.937	11.28	65.7	3.6	2.475		150												69.3								
4	3.09			7.4		16.0		0.0								0.984	7.17	65.7	3.2	2.835		130											100.8									
5	2.8			7.6		10.0		0.0			270		3	165	2	0.97	7.92	65.7	3.2	2.585		120											0.1	3								
6	2.81			7.5	7.8	15.0		0.0	7.1							0.988	4.33	65.7	3.2	2.7	2.03	130					0.65	70					94.5									
7	2.71	36	36	8.2		18.0		0.0								0.975	10.95	49.3	4.2	2.59		120											94.5									
8	2.9			7.8		16.0		0.0			257		4	161	2	0.975	5.52	65.7	4.6	2.575		140										88.2	0.5	3	2.48							
9	2.81			7.5	7.7	14.0		0.0	7.8		240		4	178	3	0.938	9.03	65.7	3.9	2.595	1.935	140					0.74	70			88.2	0.62	1									
10	2.71	36	36	7.6	7.6	14.0		0.0	8.0							894	4.66	65.7	5.2	2.98		140										88.2										
11	2.7			7.6		14.0		0.0								0.845	6.17	65.7	4.9	2.43		130																				
12	2.86			7.4		15.0		0.0			254		3	153	2	0.919	5.18	65.7	4.7	3.175		150										0.1	3									
13	2.93			7.5	7.5			0.0	7.4							0.849	9.87	65.7	3.8	2.835		150										88.2										
14	3.19	36	36	7.3		15.0		0.0								1.131	10.1	65.7	4.2	2.33		130										88.2										
15	2.96			8.0		16.0		0.0			1010		3	341	2	1.01	4.72	65.7	2.1	2.61	2.05	150				0.59	70			88.2	0.39	17	3.8									
16	4.02			7.5	7.5	15.0		0.0	8.2		252		4	155	3	0.966	10.83	65.7	3.2	2.42		150									88.2	0.84	15									
17	4.05	36	36	7.5	7.5	10.0		0.0	7.8							1.03	8.05	65.7	4.2	2.64		170									25.2											
18	3.43			7.4		13.0		0.0								1.02	9.86	65.7	5.1	2.54		150									69.3											
19	3.09			7.4		13.0		0.0			255		4	166	2	0.992	3.11	72.3	4.5	3.395		200								50.4	0.39	3										
20	4.17			7.4	7.5	18.0		0.0	7.8							0.94	5.79	72.3	3.1	2.47		150									88.2											
21	3.67	36	36	7.0		13.0		0.0								0.891	8.17	65.7	3.8	2.22		140									88.2											
22	3.5			7.1		15.0		0.0			197		4	168	2	1.09	6.05	65.7	5.2	2.31	1.845	150				0.5	69			88.2	0.34	3	4.27									
23	3.55			8.2	7.1	14.0		0.0	7.4		247		3	191	2	1.12	9.94	65.7	6	2.43		140								81.9	0.5	3										
24	3.22	36	36	7.8	7.3	18.0		0.0	7.7							1.04	9.02	65.7	5.5	2.255		140								63												
25	3.34			7.7		13.0		0.0								1.04	7.15	65.7	5.3	2.805		140								75.6												
26	3.21			7.7		15.0		0.0			242		4	209	2	1.17	3.49	65.7	5.3	2.22		180								0.1	17											
27	3.16			7.9	7.5	16.0		0.0	8.1							1.11	5.8	65.7	4.9	2.265		150								88.2												
28	3.14	36	36	7.3		15.0		0.0								1.09	7.97	65.7	2.7	2.605		150									88.2											
29	3.63			8.5		17.0		0.0								1.05	10.31	65.7	4	2.245		140								88.2												
30	3.55			7.1		12.0		0.0								0.891	9.54	65.7	4.6	2.29		150									88.2											
31	3.28	36	36	7.4		15.0		0.0								1.08	4.09	65.7	4.4	2.25		140									88.2											
Tot	100.1	324	324													924															2192											
Avg	3.228	36	36	7.8	7.6	14.6			7.7		310		4	182	2	29.81	7.548	65.6	4.168	2.551	1.965	145.5				0.62	69.75	81.2	0.37	4	3.89	0.20	####	0.01	0.01							

RESIDENTIAL		INDUSTRIAL WASTE POPULATION EQUIVALENT		OPERATOR		CERT. NO.	
COMMERCIAL	30740	28806	39759	EARL DUNN		7624	
INDUSTRIAL				PLANT TELEPHONE		502-241-9310	
TOTAL NUMBER OF SEWER CONNECTIONS		SEWERED POPULATION					
SEWER CONNECTIONS	0	X	4	=	0		