

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

July 22, 2009

Ms. Carolena Bentley DMR Coordinator 200 Fair Oaks Lane Frankfort, Kentucky 40601

RE:

Hite Creek Wastewater Treatment Plant, KPDES No: KY0022420

Discharge Monitoring Report for June 2009.

Dear Ms. Bentley

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operator Report (MOR) for the Hite Creek Wastewater Treatment Plant, for the month of June 2009.

Also included is the 2nd quarter Biomonitoring DMR.

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

Sincerely

D.J.Rheinlaender

Process Supervisor, East Region

DJR/ Hite Creek.0609

Enclosures

cc:

C. Roth(DOW Louisville)

T. Singleton

R. Shaw

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

MSS WITE CREEK STP

ADDRESS C/O CEDAR CREEK SIP

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KY 40211 LOUISVILLE

FACILITY MED HOTE CREEK BIR

LOCATION LOWISVILLE DENNIE THOMASSOM. OR METRO OFS

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FROM

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

MONITORING PERIOD

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MAJOR (SUBR LV) F - FINAL OMB No. 2040-0004

Form Approved.

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MUNICIPAL WASTEWATER

EFFLUENT *** NO DISCHARGE ! ! ***

NOTE: Read Instructions before completing this form.

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LOUISVILLE FACILITY MUSE MOSTE CREEK STE

KY 40211

LOCATION LOUISVILLE

KY 40201

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YEAR

FROM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

TO

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OMB No. 2040-0004

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MUNICIPAL WASTEWATER

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Form Approved.

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LOUISVILLE

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

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Form Approved. OMB No. 2040-0004

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

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ADDRESS C/O OEDAR CREEK STP

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LOUISVILLE FACILITY MISS HITE CREEK STE 图 A 全型配工法

LOCATION LOUISVILLE

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MONITORING PERIOD

TO

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YEAR

FROM

DISCHARGE NUMBER

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MAJOR (SUBR LV)

F - FINAL

OMB No. 2040-0004

Form Approved.

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*** NO DISCHARGE ! ! ***

NOTE: Read Instructions before completing this form.

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5	3.63	38	36	7.2		8.0		0.0				164		2	119		6		10.12	98,6		4.085	 	200				\neg	$\neg \neg$		122.8	0.055	4			$\vdash \!$	-		┿
6	5.21			7.1	7.6	5,0		0.0		8.6		153		5	90		3	1.94	13,6	98.6	5	3.78		200							154.1	_		0.369		\vdash	+		十
7	5.21			7.4	7.5	5.0		0,0		8.5		143		2	100		3	2.26	13,69	65,7	4,8	3.595		180							126		4	0.000		 	 		+
8	9.52			7.0	7.4	5.0		0,0	ľ	8.6								1.78	7,79	65.7	4.8	_	 	180		$\neg \neg$			0.53	57	107.1	-,				· · · · · · · · · · · · · · · · · · ·	 		+
9	4,19	36	38	6.9		5,0		0.0										2.13	11	78,8	4.8	3.245		150							113.4								+
٥	3.09			7.0	7.2	8,0		0,0		8.8								2.07	7.44	65,7	4.7	3.29		170							63		·						+
1	2.81			7.0		6.0		0.0										2.02	11,22	85.7	4.8	4.425		180													1		†
2	3.23			7.2		5,0		0.0				159		3				2.08	7.67		3.8	3.97	2,7	200					1.2	61	68.2	0.055	4					$\overline{}$	+
3	2.85	36	36	7.4	7,4	10,0		0.0		7.5		175		2				1.81	14.36	85.7	4.1	5.055	<u> </u>	240								0.055		0.333		———	\vdash		t
4	2.55			7.2	7.4	10.0		0.0		7.5		176		2				1.7	9,1	105.1	2.9	3.69		200							85	0.055						·	†
5	2.38			7.3	7.4	12.0		0,0		7,5								2,05	8,38	105.1	4.7	3.43	<u> </u>	170	1						133,5								†
3	3.26	36	36	7.2		5.0		0,0										2,02	10,73	92	4.5	3,56	—	190							109.5								†
7	2.66			7.1		5.0		0.0										2,03	7.68	65.7	4.6	3,825		200		T					63				\Box		1		t
3	2.25			7.1		12.0		0.0]]							1.81	7.18	65,7	4.4	3.61		200											\Box				t
9	2.38			7.3		10.0		0.0										2.05	9.63	65.7	4	3.79		200		$\neg \uparrow$			- 1		94.5		\Box		·				T
D	2.39	36	36	7.1		10.0		0,0										1.95	10.42	65.7	3.2	4.245		200							94.2		\Box				+		T
1																														-									T
_	99.47	324	324															59.98								$\neg \uparrow$					2720		$\neg \uparrow$						t
بــــــــــــــــــــــــــــــــــــــ	3.316	36	36	7.2	7.5	8.8				8.2	Т	192		3	129		4	1.999	9.808	86.1	4 283	4 135	2.769	195.7	T i				0,82	50.25	104.6	0.06		0.32	0.20	179.00	0.01		T

	COMM		L		31578	20983	25228	EARL DUNN	7626
	INDUS	TRIAL			FLOW	CBOD	TSS	OPERATOR	CERT. NO.
OTAL NUMBER OF SEWER CONNECTION	NS			0 .				502-241-9310	
EWER CONNECTIONS 0	X 4		0	_SEWERED POP	ULATION			PLANT TELEPHON	IE