



**MSD**

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

February 15, 2008

Ms. Kathy Thurman  
Environmental & Public Protection Cabinet  
Division of Water  
14 Reilly Road  
Frankfort, KY 40601

**Re: Morris Forman Wastewater Treatment Plant (MFWTP)  
KPDES Permit No. KY0022411**

Dear Ms. Thurman:

In accordance with the provisions of the KPDES Permit referenced above, the monthly operating report and the monthly Discharge Monitoring Report (DMR) for the reporting period January 1 to January 31, 2008 are enclosed. Due to operator error, no effluent DO sample was collected on January 6<sup>th</sup>. We have taken appropriate actions to assure that this will not occur again. All permit requirements were met for the month of January, 2008.

Should you have any questions, please contact me at (502) 540-6793.

Sincerely,

Alex E. Novak  
Operations Manager

paw

MFDMR0108.doc

Enclosures

cc: C. Roth, DOW-Louisville  
G. Harrison, EPPC  
A. Freeman, EPA, Region IV  
R. Shaw, MSD  
A. Vicory, ORSANCO



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

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

MAJOR  
(SUBR LV)  
F - FINAL

JEFFE

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

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

KY0022411  
PERMIT NUMBER

001  
DISCHARGE NUMBER

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

MUNICIPAL DISCHARGE  
EFFLUENT

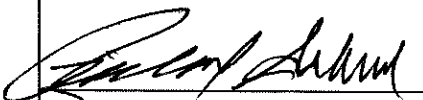
\*\*\* NO DISCHARGE 1-1 \*\*\*

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	00300 1 0 0	*****	*****		5.7	*****	*****	( 19)	1		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	INST MIN	*****	*****	MG/L		DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	00310 E 0 0	20,959	25,416	( 26)	*****	23	26	( 19)	0		
SEC/BIOLOGICAL PROC COMPLT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	30	45	MG/L		DAILY	COMPOS
BOD, 5-DAY (20 DEG. C)	00310 S 0 0	301,338	356,029	( 26)	*****	307	391	( 19)	0		
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		DAILY	COMPOS
PH	00400 1 0 0	*****	*****		6.6	*****	7.1	( 12)	0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	7.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	00530 E 0 0	17,492	18,351	( 26)	*****	19	20	( 19)	0		
SEC/BIOLOGICAL PROC COMPLT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	30	45	MG/L		DAILY	COMPOS
SOLIDS, TOTAL SUSPENDED	00530 S 0 0	253,434	325,097	( 26)	*****	255	320	( 19)	0		
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		DAILY	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	00610 E 0 0	8,855	10,413	( 26)	*****	10	14	( 19)	0		
SEC/BIOLOGICAL PROC COMPLT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	20	30	MG/L		DAILY	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
H. J. SCHARDEIN, JR.  
EXECUTIVE 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 502 540-6000  
DATE 08 02 15  
AREA CODE NUMBER YEAR MO DAY

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

0 - INFLUENT  
E - SECONDARY EFFLUENT  
1 - FINAL EFFLUENT

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

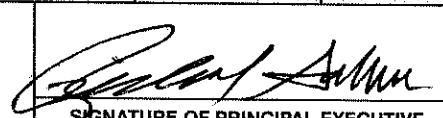
PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME MSD MORRIS FORMAN STP  
ADDRESS C/O LOUISVILLE/JEFF CU MSD  
4522 ALGONQUIN PKWY  
LOUISVILLE KY 40211-2497  
FACILITY MSD MORRIS FORM STP  
LOCATION LOUISVILLE KY 40211  
ATTN: ALEX E NOVAK, OPER MGR

KY0022411		0011			
PERMIT NUMBER		DISCHARGE NUMBER			
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
05	01	01	05	01	31

MAJOR (SUBR LV)  
F - FINAL  
MUNICIPAL DISCHARGE 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			
NITROGEN, AMMONIA TOTAL (AS N) 00610 0 0 0		9153	10535	( 26 )	*****	10.5	13.3	( 19 )	0		
RAW SEW/INFLUENT		REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		DAILY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 E 0 0		108.1	163.1	( 03 )	*****	*****	*****	*****	0		
SEC/BIOLOGICAL PROC COMPLT		REPORT MD AVG	REPORT DAILY MX	MGD	*****	*****	*****	*****		CONTIN	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0 0		*****	*****	*****	*****	0.010	0.010	( 19 )	0		
EFFLUENT GROSS VALUE		*****	*****	*****	*****	0.019 MD AVG	0.019 DAILY MX	MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL 74055 1 2 0		*****	*****	*****	*****	162	720	( 13 )	4		
EFFLUENT GROSS VALUE		*****	*****	*****	*****	1000 30DA GEO	2000 7 DA GEO	#/ 100ML		DAILY	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0		*****	*****	*****	93	85	*****	( 23 )	0		
PERCENT REMOVAL		*****	*****	*****	MD MIN	85	*****	PER-CENT		ONCE/	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0		*****	*****	*****	93	85	*****	( 23 )	0		
PERCENT REMOVAL		*****	*****	*****	MD MIN	85	*****	PER-CENT		ONCE/	CALCTD
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER H. J. SCHARDEIN, JR. EXECUTIVE DIRECTOR	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		
			502	540-6000	08	02	15

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
G - INFLUENT  
E - SECONDARY EFFLUENT  
F - FINAL EFFLUENT

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

NAME MSD MORRIS FORMAN STP  
ADDRESS C/O LOUISVILLE/JEFF CO MSD  
4522 ALCONQUIN PKWY  
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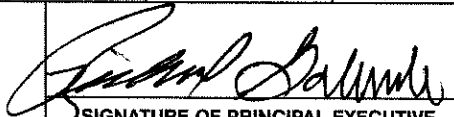
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

KY0022411 PERMIT NUMBER  
001 B DISCHARGE NUMBER

MAJOR (SUBR LV)  
F - FINAL JEFFE  
SECONDARY BYPASS  
EFFLUENT  
\*\*\* NO DISCHARGE 1 1 \*\*\*  
NOTE: Read instructions before completing this form.

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

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C)	00310 F 0 0	*****	*****		*****	181	224	( 19)	0		
PRI/PRLM PRCS CMPLT		*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
BOD, 5-DAY (20 DEG. C)	00310 I 0 0	*****	*****		*****	36	38	( 19)	0		
EFFLUENT GROSS VALUE		*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
SOLIDS, TOTAL SUSPENDED	00530 F 0 0	*****	*****		*****	112	123	( 19)	0		
PRI/PRLM PRCS CMPLT		*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
SOLIDS, TOTAL SUSPENDED	00530 I 0 0	*****	*****		*****	36	39	( 19)	0		
EFFLUENT GROSS VALUE		*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	00610 F 0 0	*****	*****		*****	11.4	13.7	( 19)	0		
PRI/PRLM PRCS CMPLT		*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	00610 I 0 0	*****	*****		*****	9.6	11.0	( 19)	0		
EFFLUENT GROSS VALUE		*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	50050 F 0 0	26.06	38.90	( 03)	*****	*****	*****		0		
PRI/PRLM PRCS CMPLT		REPORT MD AVG	REPORT MX WK AV	MGD	*****	*****	*****	****		WHEN DISCHG	CONTIN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER H. J. SCHARDEIN, JR. EXECUTIVE DIRECTOR	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		
			502	540-6000	08	02	15

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
MONITORING DURING PERIODS OF SECONDARY BYPASS IN ADDITION TO REGULAR MONITORING.  
1 - FINAL EFFLUENT

DATE	WASTEWATER FLOWS (Million Gallons)			TEMP (DEGF)		pH		SETS (ML)		TSS (mg/L)		TS (mg/L)		D.O. (mg/L)		5-DAY BOD (mg/L)			RETURN SLUDGE FLOW			AERATION BASIN					ACTIVE		CHLORINATION			FINAL EFFLUENT			
	Effluent	Effluent	Bypass	raw	final	raw	final	raw	final	raw	final	raw	final	final	raw	final	final	prfm.	mg	g/L	g/L	D.O.	MLSS	MLVSS	SET	SVI	Sludge Wasted MG	Primary Sludge MG	Chlorine Dosage KLBS	Resid mg/L	Coliform #/100 ml	NH3-N mg/L	Pump. Hours		
																																		raw	final
1/1	103.3	100.8	2.5	49	62	7.5	7.0	11.0	0.1	184	16			13.1	197	74	12	17.0	8.0	6.8	20.0	2.0	1.8	172	85	0.79	0.17	2.87	0.010	12	12	0.00			
1/2	94.4	94.4	0.0	51	59	7.5	7.1	15.0	0.1	240	16			14.3	280	156	12	16.4	7.4	6.3	19.7	2.8	2.4	156	60	0.76	0.10	2.05	0.010	5120	14	0.00			
1/3	91.1	91.1	0.0	50	62	7.5	7.0	12.0	0.1	216	7			9.4	266	169	16	15.9	7.1	5.9	19.3	1.7	1.5	137	84	0.77	0.16	1.71	0.010	42	13	0.00			
1/4	95.4	95.4	0.0	51	58	7.4	6.9	15.0	0.2	388	20			9.5	404	244	23	15.7	12.8	10.9	19.3	2.8	2.3	126	43	0.71	0.19	1.72	0.010	370	13	0.00			
1/5	141.6	95.5	46.1	47	48	7.4	6.9	17.0	0.4	322	72			8.1	308	243	75	15.1	12.3	10.6	18.2	3.8	3.0	173	49	0.67	0.28	3.47	0.010	192	12	0.00			
1/6	106.3	102.4	3.9	50	57	7.4	6.8	8.5	0.3	182	29				235	178	25	14.9	10.8	9.0	19.5	3.0	2.5	172	58	0.66	0.19	3.01	0.010	48	9	0.00			
1/7	101.5	101.5	0.0	47	59	7.4	6.8	1.5	0.1	70	22			10.1	229	246	31	15.4	10.4	8.8	18.5	3.0	2.8	177	59	0.65	0.19	1.90	0.010	90	12	0.00			
1/8	119.5	105.1	14.4	50	62	7.5	6.8	7.5	0.2	194	50			8.2	296	275	44	16.7	10.5	8.9	12.4	2.8	2.3	182	71	0.38	0.30	3.00	0.010	310	13	0.00			
1/9	184.6	122.0	42.5	47	60	7.4	6.7	9.5	0.3	242	34			8.5	312	211	41	17.2	12.3	10.3	15.9	3.1	2.3	232	78	0.79	0.33	3.89	0.010	2480	9	0.00			
1/10	175.8	128.5	47.3	50	60	7.4	6.8	12.0	0.5	486	42			6.4	399	94	42	17.2	12.9	10.7	14.5	2.1	1.9	238	113	0.96	0.37	3.89	0.010	106	7	8.50			
1/11	194.1	129.6	64.5	48	60	7.3	6.8	4.5	0.5	146	38			9.2	157	130	50	17.2	16.4	13.1	18.0	2.8	2.2	209	85	1.00	0.37	3.57	0.010	11200	6	24.00			
1/12	177.6	132.8	44.8	47	58	7.4	6.9	3.5	0.1	166	24			8.8	159	133	34	17.0	13.4	10.7	18.9	3.1	2.5	202	68	0.89	0.23	2.90	0.010	2750	8	24.00			
1/13	181.6	137.3	44.3	48	58	7.4	6.9	33.0	0.3	210	16			9.1	202	134	34	16.9	12.4	10.2	19.7	3.0	2.5	191	68	0.73	0.23	2.92	0.010	1600	9	24.00			
1/14	155.3	140.8	14.5	48	56	7.5	7.0	13.0	0.1	206	26			10.8	300	153	23	16.9	11.2	9.3	19.4	2.7	2.3	180	75	0.72	0.28	2.92	0.010	35	9	24.00			
1/15	160.3	143.1	17.2	47	57	7.5	6.8	6.0	0.1	124	22			8.7	253	211	22	17.0	6.9	5.8	17.1	2.2	1.9	187	89	0.76	0.32	2.52	0.010	10	10	24.00			
1/16	139.2	137.3	1.9	48	58	7.4	6.7	7.5	0.1	210	20			8.3	301	200	17	17.2	12.0	10.0	15.0	2.8	2.5	191	71	0.79	0.26	2.51	0.010	25	11	24.00			
1/17	138.5	132.3	6.2	45	58	7.4	6.7	20.0	0.2	258	21			7.1	351	260	24	17.0	12.5	10.2	13.1	3.1	2.8	208	69	0.83	0.34	2.48	0.010	80	11	24.00			
1/18	118.6	118.6	0.0	46	57	7.4	6.8	7.0	0.1	282	21			7.4	380	230	18	17.1	12.9	11.1	11.5	4.3	3.8	206	50	0.91	0.33	2.22	0.010	64	11	15.10			
1/19	95.3	95.3	0.0	45	57	7.4	6.8	7.5	0.1	210	21			7.8	318	216	17	17.1	11.9	10.5	14.5	3.6	3.2	229	64	0.95	0.33	2.15	0.010	118	13	0.00			
1/20	85.2	85.2	0.0	46	54	7.5	6.8	13.0	0.1	242	17			8.5	223	152	13	16.9	12.1	10.3	18.1	4.5	3.7	206	47	1.02	0.29	1.86	0.010	185	16	0.00			
1/21	89.6	89.6	0.0	46	55	7.4	6.9	12.0	0.1	230	23			8.8	312	207	16	16.9	11.8	9.8	19.3	3.0	2.5	198	68	0.96	0.01	1.72	0.010	78	16	0.00			
1/22	89.3	89.3	0.0	48	57	7.2	6.8	16.0	0.1	260	24			9.8	340	290	19	17.0	11.6	9.6	15.6	2.7	2.3	199	74	0.94	0.16	1.96	0.010	115	16	0.00			
1/23	87.2	87.2	0.0	44	57	7.3	6.7	11.0	0.1	262	27			6.5	355	235	22	17.1	12.8	10.9	13.5	3.0	2.6	203	70	0.95	0.29	1.75	0.010	530	14	0.00			
1/24	84.6	84.6	0.0	45	56	7.4	6.8	19.0	0.1	362	26			7.6	489	254	20	17.0	12.6	10.3	16.5	3.1	2.6	214	71	0.87	0.40	1.63	0.010	158	15	0.00			
1/25	84.0	84.0	0.0	44	57	7.3	6.6	9.5	0.1	304	30			5.7	420	278	25	16.3	15.0	12.6	15.6	3.0	2.8	230	76	0.86	0.27	1.80	0.010	33	16	0.00			
1/26	87.8	87.8	0.0	46	60	7.6	6.7	6.0	0.1	288	33			7.8	344	252	28	15.9	12.2	10.3	12.2	3.6	2.9	200	56	0.88	0.28	2.28	0.010	48	17	0.00			
1/27	81.8	81.8	0.0	44	55	7.3	6.6	14.0	0.1	258	28			6.0	414	209	45	15.7	11.0	9.6	12.6	3.1	2.8	209	68	0.85	0.29	2.01	0.010	268	16	0.00			
1/28	87.1	87.1	0.0	47	58	7.3	6.6	12.0	0.2	508	33			7.5	392	284	29	15.8	10.2	8.8	14.2	2.9	2.5	188	65	0.82	0.25	1.95	0.010	40	14	0.00			
1/29	183.0	126.6	56.4	44	59	7.3	6.6	12.0	0.9	280	70			6.3	285	212	67	15.7	10.8	9.3	13.7	2.8	2.3	204	80	0.80	0.30	4.18	0.010	260	11	0.00			
1/30	138.7	129.3	9.4	48	51	7.4	6.7	7.5	0.4	280	60			8.9	283	170	35	15.5	12.6	9.9	17.4	2.4	1.7	150	63	0.87	0.24	2.22	0.010	152	7	0.00			
1/31	106.9	105.8	1.1	45	58	7.4	6.7	19.0	0.2	308	40			9.9	348	222	28	15.7	9.5	7.8	17.5	2.6	2.3	171	63	0.82	0.25	2.01	0.010	251	10	0.00			
Total	3789.0	3352.0	417.0															510.4																	
Average	121.6	108.1	13.5	47	58	7.4	6.8	11.7	0.2	255	30			8.5	307	204	29	16.5	11.5	9.8	16.5	2.9	2.5	182	69	0.822	0.257	2.48	0.010	162	12	6.18			

SEWER CONNECTIONS      135802 TIMES 4 =      543206 SEWER POPULATION

IND. WASTER POPULATION EQ  
 CUSTOMERS      334  
 FLOW      814703  
 BOD      1280811  
 TSS      868212

Authorized Agent

Certification No. 4683

MORRIS FORMAN WASTEWATER TREATMENT PLANT

JEFFERSON COUNTY, KY

Month of Jan-08

Average Flow

SETTLING TANKS	Primary	Secondary		
		Battery A	Battery B	Battery C
Average Flow (MGD)	126.5	49.37	56.85	14.88
Tanks in Service	3.58	8.00	8.00	2.64
Surface Area (Ft.2)	68915.00	69200.00	69200.00	22836.00
Volume (MG)	7.46	7.09	7.09	2.34
Weir Length (Ft.)	2559.70	2868.00	2868.00	946.44
Avg. Weir Overflow (GPD/Ft)	49413.75	17214.13	19823.91	15725.36
Avg. Settling Rate (GPD/Ft2)	1835.37	981.21	926.63	670.98
Avg. Detention Time	1.41	3.45	2.99	3.77

**AERATION TANKS**

	Battery A	Battery B	Battery C
Volume (Gallons)	4200000	4200000	2100000
Avg. Flow (MGD)	56.10	64.12	17.36
Avg. Detention Time (Hours)	1.80	1.57	2.90

**CHLORINE CONTACT CHAMBERS**

Contact Chambers in Use	1.93
Volume (Gallons)	2258100
Avg. Detention Time (Hours)	0.44

Remarks: BY-PASS REPORTS (See Attached)



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 08935-SM	<b>Facility Address</b> 1001 BRECKENRIDGE LN	<b>If Pump Station, Name of Pump Station:</b> MIDDLE FORK BEARGRASS CREEK	<b>Discharge to</b> STREAM

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735798	01/10/08 04:32 PM	GRIFFITH	GRIFFITH	D	11/29/01	LACK OF SYSTEM CAPACITY	DISCHARGE TO WATERS OF THE US	01/11/08 03:40 AM

**Spot Inspections:**

Discharge Amount:	110,880 GAL
Cause:	LACK OF SYSTEM CAPACITY - HEAVY RAIN
Clean Up:	NONE POSSIBLE DUE TO THE MAGNITUDE OF THE STORM
Control Zone:	PERMANENT SIGNS ARE POSTED
Impact:	NO IMPACT OBSERVED
Repair:	THIS LOCATION WILL BE IN THE SANITARY SEWER DISCHARGE PLAN TO BE SUBMITTED BY DEC. 31, 2008

**Notifications:**

01/10/08 12:59 PM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov
01/10/08 04:32 PM	ADVISED CUSTOMERS WITH PERMANENT SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 17571	<b>Facility Address</b> 3035 CARSON WAY	<b>If Pump Station, Name of Pump Station:</b> SOUTH FORK BEARGRASS CREEK	<b>Discharge to</b> CATCH BASIN

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735844	01/10/08 07:22 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/10/08 09:59 PM

**Spot Inspections:**

Discharge Amount:	204,100 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 07:22 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov





Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 18471	<b>Facility Address</b> 3107 DELL BROOKE AVE	<b>If Pump Station, Name of Pump Station:</b> SOUTH FORK BEARGRASS CREEK	<b>Discharge to</b> CATCH BASIN

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735845	01/10/08 07:40 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/11/08 01:30 AM

**Spot Inspections:**

Discharge Amount:	420,000 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 12:59 PM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov
01/10/08 07:40 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
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<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 18483	<b>Facility Address</b> 3015 BOAIRES LN	<b>If Pump Station, Name of Pump Station:</b>	<b>Receiving Stream</b> SOUTH FORK BEARGRASS CREEK	<b>Discharge to</b> CATCH BASIN
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<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735847	01/10/08 06:21 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/10/08 10:11 PM

**Spot Inspections:**

Discharge Amount:	299,000 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 04:21 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 18595	<b>Facility Address</b> 3101 WEDGEWOOD WAY	<b>If Pump Station, Name of Pump Station:</b> WEDGEWOOD DITCH	<b>Discharge to</b> DITCH

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735848	01/10/08 07:35 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/10/08 10:07 PM

**Spot Inspections:**

Discharge Amount:	197,600 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 07:35 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SMH Sewer Manhole	21061	4432 CORDOVA RD		UPPER SINKING FORK	CATCH BASIN

KPDES #	Facility ID	Treatment Plant Name	Receiving Stream of Treatment Plant	Region
KY0022411 (Cont'd)	MSD0278	MORRIS FORMAN	OHIO RIVER	WEST

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Stat	Event Date	Problem	Resolution	Completed
DISREV: RAIN EVENT DISCHARGE	735850	01/10/08 06:55 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/10/08 10:15 PM

**Spot Inspections:**

Discharge Amount:	240,000 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 06:55 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

KPDES #	Facility ID	Treatment Plant Name	Receiving Stream of Treatment Plant	Region
KY0022411 (Cont'd)	MSD0278	MORRIS FORMAN	OHIO RIVER	WEST

Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SMH Sewer Manhole	21153	4522 CORDOVA RD		UPPER SINKING FORK	CATCH BASIN

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Stat	Event Date	Problem	Resolution	Completed
DISREV: RAIN EVENT DISCHARGE	735853	01/10/08 07:09 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/11/08 01:11 AM

**Spot Inspections:**

Discharge Amount:	470,600 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 12:59 PM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov
01/10/08 07:09 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 21156	<b>Facility Address</b> 4601 STONEHENGE DR	<b>If Pump Station, Name of Pump Station:</b> UPPER SINKING FORK	<b>Discharge to</b> CATCH BASIN

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735852	01/10/08 06:37 PM	BRIGHT	BRIGHT	D	02/17/00	PUMPED OVERFLOW	DISCHARGE TO WATERS OF THE US	01/11/08 01:16 AM

**Spot Inspections:**

Discharge Amount:	518,700 GAL
Cause:	SET PUMPS TO ALLEVIATE PROPERTY DAMAGE AND FLOODING DURING A SIGNIFICANT RAIN EVENT
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE OVERFLOW SITE ONCE THE RAIN SUBSIDED
Control Zone:	MSD PERSONNEL SET OUT BARRICADES AND TEMPORARY SIGNS ON THE PUMPS
Impact:	SEWAGE VISIBLE AROUND PUMPED DISCHARGE SITE
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 12:59 PM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov
01/10/08 06:37 PM	MSD PERSONNEL PLACED SIGNS
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 27005	<b>Facility Address</b> 1012 ALTA CIR	<b>If Pump Station, Name of Pump Station:</b>	<b>Receiving Stream</b> MIDDLE FORK BEARGRASS CREEK
				<b>Discharge to</b> GROUND

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735876	01/10/08 06:00 PM	MITCHELL	GRIFFITH	D	09/02/03	LACK OF SYSTEM CAPACITY	DISCHARGE TO WATERS OF THE US	01/10/08 07:15 PM

**Spot Inspections:**

Discharge Amount:	31,050 GAL
Cause:	LACK OF SYSTEM CAPACITY - HEAVY RAIN
Clean Up:	REFERRED TO IFP FOR CLEAN UP AFTER RAIN EVENT
Control Zone:	POSTED TAPE, CONES, BARRICADES AND TEMPORARY SIGNS
Impact:	PERMANENT SIGNS ARE POSTED, SETUP BARRICADES WITH TEMPORARY SIGNS, CONES AND CAUTION TAPE
Repair:	THIS LOCATION WILL BE IN THE SANITARY SEWER DISCHARGE PLAN TO BE SUBMITTED BY DEC. 31, 2008

**Notifications:**

01/11/08 12:59 AM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov
01/10/08 06:00 PM	ADVISED CUSTOMERS WITH CONE, TAPE, BARRICADES AND TEMPORARY SIGNS
01/11/08 12:59 AM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

**KPDES #** KY0022411 (Cont'd)      **Facility ID** MSD0278      **Treatment Plant Name** MORRIS FORMAN      **Receiving Stream of Treatment Plant** OHIO RIVER      **Region** WEST

<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 72571-X	<b>Facility Address</b> 4600 CHAMPIONS TRACE LN	<b>If Pump Station, Name of Pump Station:</b>	<b>Receiving Stream</b> SOUTH FORK BEARGRASS CREEK	<b>Discharge to</b> STREAM
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<b>Activity Code / Description</b> DISREV: RAIN EVENT DISCHARGE	<b>WO #</b> 735941	<b>Initiated</b> 01/10/08 07:40 PM	<b>Initiated By</b> GRIFFITH	<b>Assigned To</b> GRIFFITH	<b>Disch Stat</b> D	<b>Event Date</b> 11/29/01	<b>Problem</b> LACK OF SYSTEM CAPACITY	<b>Resolution</b> DISCHARGE TO WATERS OF THE US	<b>Completed</b> 01/11/08 12:21 PM
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**Spot Inspections:**

Discharge Amount:	140,940 GAL
Cause:	LACK OF SYSTEM CAPACITY - HEAVY RAIN
Clean Up:	NONE POSSIBLE DUE TO THE MAGNITUDE OF STORM
Control Zone:	PERMANENT SIGNS ARE POSTED
Impact:	NO IMPACT OBSERVED
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/11/08 12:59 AM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/10/08 07:40 PM	ADVISED CUSTOMERS WITH PERMANENT SIGNS
01/11/08 12:59 AM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov





Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST	
<b>Facility Type</b> SLS Sewer Lift Station	<b>Facility ID</b> MSD0012-PS	<b>Facility Address</b> 3246 RADIANCE RD	<b>If Pump Station, Name of Pump Station:</b> HIGHGATE SPRINGS	<b>Receiving Stream</b> SOUTH FORK BEARGRASS CREEK	<b>Discharge to</b> STREAM

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	735863	01/10/08 04:40 PM	ELDER	PORTER JR	D	12/16/00	LACK OF SYSTEM CAPACITY	DISCHARGE TO WATERS OF THE US	01/11/08 03:00 PM

**Spot Inspections:**

Discharge Amount:	1,134,600 GAL
Cause:	LACK OF CAPACITY
Clean Up:	CLEANUP NOT POSSIBLE DUE TO ELEVATED CREEK LEVEL
Control Zone:	PERMANENT SIGN, NO ADDITIONAL CONTROL ZONE SET UP
Impact:	NONE OBSERVED BY MSD PERSONNEL, ELEVATED CREEK LEVEL
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

**Notifications:**

01/10/08 12:59 PM	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov
01/10/08 12:59 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov



Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Treatment Plant Name</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Plant</b> OHIO RIVER	<b>Region</b> WEST	
<b>Facility Type</b> SLS Sewer Lift Station	<b>Facility ID</b> MSD1044-PS	<b>Facility Address</b> 2630 PHOENIX HILL DR	<b>If Pump Station, Name of Pump Station:</b> PHOENIX HILL	<b>Receiving Stream</b> MUDDY FORK BEARGRASS CREEK	<b>Discharge to</b> GROUND

<u>Activity Code / Description</u>	<u>WQ #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Stat</u>	<u>Event Date</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISREV: RAIN EVENT DISCHARGE	738931	01/30/08 04:30 PM	MARKS JR	HOWARD	D	03/20/02	GREASE BLOCKAGE	DISCHARGE TO WATERS OF THE US	01/30/08 05:30 PM

**Spot Inspections:**

Discharge Amount:	3,000 GAL
Cause:	GREASE BLOCKAGE OF CONTROL TILT BULBS
Clean Up:	AREA RAKED AND DEBRI HAULED AREA WAS SCRUBBED AND SANITIZED BY MSD PERSONNEL
Control Zone:	TEMPORARY SIGNS POSTED AND AREA TAPED OFF
Impact:	PERSONAL HYGIENE PRODUCTS FOUND IN STREAM AND REMOVED
Repair:	GREASE BLOCKAGE REMOVED AND STATION CONTROLS BACK IN SERVICE . REINFORCE PUBLIC KNOWLEDGE OF MSD FOG PROGRAM

**Notifications:**

01/30/08 06:52 PM	
01/30/08 12:58 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and bradley.kouns@ky.gov

Total Facilities Printed: 12