



700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
[www.msdlouky.org](http://www.msdlouky.org)

July 23, 2010

Carolena Bentley  
Division of Water  
Surface Water Permits Branch  
200 Fair Oaks Lane 4<sup>th</sup> Floor  
Frankfort, KY 40601

Re: **Morris Forman Water Quality Treatment Center**  
**KPDES Permit No. KY0022411**

Dear Ms. Bentley:

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 June 1 to June 30<sup>th</sup> are enclosed. All permit requirements were met for the month of June, 2010 with the exception of the maximum daily chlorine total residual (TRC). The TRC result was 0.989 mg/l which is above the permit limit of 0.019 mg/l. This exceedance occurred on June 12.

We attribute this exceedance to a potential mixing problem with the sodium hypochlorite and the chlorine neutralizing chemical (sodium bisulfite). We continued to monitor the situation for other potential causes. A similar one day exceedance occurred in early July and it was determined that one of the two hoses which mix the sodium hypochlorite with the plant effluent had been damaged, which prevented the uniform mixing of the sodium hypochlorite with the effluent. This may have been the cause of the problem. We replaced the hose and the problem has not recurred.

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

Sincerely,

Alex E. Novak, P.E.  
Director of Operations

paw

MFDMR0510.doc

Enclosures

cc: C. Roth, DOW-Louisville  
A. Vicory, ORSANCO



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

## NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved.  
OMB No. 2040-0004

## DISCHARGE MONITORING REPORT (DMR)

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

NAME MSD MORRIS FORMAN WQTC  
 ADDRESS C/O LOUISVILLE/JEFF CO MSD  
 4522 ALGONQUIN PKWY  
 LOUISVILLE, KY 40211-2497  
 FACILITY MSD MORRIS FORM WQTC  
 LOCATION LOUISVILLE, KY 40211

KY0022411	0011
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR  
 (SUBR LV)  
 F - FINAL JEFFE  
 MUNICIPAL DISCHARGE  
 EFFLUENT  
 \*\*\* NO DISCHARGE \*\*\* ☐

MONITORING PERIOD						
YEAR	MONTH	DAY	TO	YEAR	MONTH	DAY
10	06	01		10	06	30

ATTN: ALEX E NOVAK, OPER DIR

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	*****	*****	****	5.4	*****	*****	(19)	0	30/30	GRAB
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	2.0 INST MIN	*****	*****	MG/L		DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	10,915	11,716	(26)	*****	14	16	(19)	0	30/30	COMPOS
00310 E 0 0 SEC/BIOLOGICAL COMPLIANCE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	30 MO AVG	45 MX WK AV	MG/L		DAILY	COMPOS
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	322,901	358,273	(26)	*****	380	449	(19)	0	30/30	COMPOS
00310 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		DAILY	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****	****	6.5	*****	6.8	(12)	0	30/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	10,097	12,516	(26)	*****	13	18	(19)	0	30/30	COMPOS
00530 E 0 0 SEC/BIOLOGICAL COMPLIANCE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	30 MO AVG	45 MX WK AV	MG/L		DAILY	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	340,339	444,705	(26)	*****	390	469	(19)	0	30/30	COMPOS
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		DAILY	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	9,701	10,411	(26)	*****	12.4	15.0	(19)	0	30/30	COMPOS
00610 E 0 0 SEC/BIOLOGICAL COMPLIANCE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	20 MO AVG	30 MX WK AV	MG/L		DAILY	COMPOS
NAME/TITLE PRINCIPLE EXECUTIVE OFFICER	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.								Telephone		DATE
H. J. SCHARDEIN, JR. EXECUTIVE DIRECTOR									502   540-6000		10-07-21
								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA NUMBER YEAR - MO - DAY	

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

G - INFLUENT

E - SECONDARY EFFLUENT

1 - FINAL EFFLUENT

## NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved.  
OMB No. 2040-0004

## DISCHARGE MONITORING REPORT (DMR)

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 4522 ALGONQUIN PKWY  
 LOUISVILLE, KY 40211-2497  
 FACILITY MSD MORRIS FORM WQTC  
 LOCATION LOUISVILLE, KY 40211

KY0022411	001 1
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR  
 (SUBR LV)  
 F - FINAL JEFFE  
 MUNICIPAL DISCHARGE  
 EFFLUENT  
 \*\*\* NO DISCHARGE \*\*\* ☐

MONITORING PERIOD						
YEAR	MONTH	DAY	TO	YEAR	MONTH	DAY
10	06	01		10	06	30

ATTN: ALEX E NOVAK, OPER DIR

Parameter		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 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	8515	9158	( 26 )	*****	10.9	13.1	( 19 )	0	30/30	COMPOS
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		DAILY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 E 0 0 SEC/BIOL PRCS CMPLT	SAMPLE MEASUREMENT	97.5	356.9	( 03 )	*****	*****	*****	****	0	30/30	CONTIN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTIN UOUS	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	0.989	( 19 )	1	30/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	0.019 MO AVG	0.019 DAILY MX	MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL 74055 1 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	65	108	( 13 )	0	30/30	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	200 30DA GEO	400 7 DA GEO	#/ 100ML		DAILY	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	96	*****	*****	( 23 )	0	ONCE/ MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	85 MO MIN	*****	*****	PER- CENT		ONCE/ MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	****	97	*****	*****	( 23 )	0	ONCE/ MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	85 MO MIN	*****	*****	PER- CENT		ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPLE EXECUTIVE OFFICER	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.								Telephone		DATE
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

G - INFLUENT

E - SECONDARY EFFLUENT

F - SECONDARY BYPASS AFTER PRIMARY TREATMENT.

## NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES)

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LOUISVILLE, KY 40211-2497  
FACILITY MSD MORRIS FORM WQTC  
LOCATION LOUISVILLE, KY 40211

KY0022411	001 B
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR  
(SUBR LV)  
F - FINAL JEFFE  
SECONDARY BYPASS  
EFFLUENT  
\*\*\* NO DISCHARGE \*\*\* ☐

MONITORING PERIOD						
YEAR	MONTH	DAY	TO	YEAR	MONTH	DAY
10	06	01		10	06	30

ATTN: ALEX E NOVAK, OPER DIR

Parameter		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 PRI/PRLM PRCS CMPLT	SAMPLE MEASUREMENT	*****	*****	****	*****	152	187	( 19 )	0	10/30	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	24	27	( 19 )	0	10/30	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 F 0 0 PRI/PRLM PRCS CMPLT	SAMPLE MEASUREMENT	*****	*****	****	*****	107	111	( 19 )	0	10/30	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	30	33	( 19 )	0	10/30	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
NITROGEN, AMMONIA TOTAL (AS N) 00610 F 0 0 PRI/PRLM PRCS CMPLT	SAMPLE MEASUREMENT	*****	*****	****	*****	11.5	16.0	( 19 )	0	10/30	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	10.5	15.0	( 19 )	0	10/30	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		WHEN DISCHG	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 F 0 0 PRI/PRLM PRCS CMPLT	SAMPLE MEASUREMENT	30.10	38.50	( 03 )	*****	*****	*****	****	0	10/30	CONTIN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	MGD	*****	*****	*****	****		WHEN DISCHG	CONTIN
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							AREA	NUMBER	YEAR - MO - DAY

MONITORING DURING PERIODS OF SECONDARY BYPASS IN ADDITION TO REGULAR MONITORING.  
1 - FINAL EFFLUENT

F - SECONDARY BYPASS AFTER PRIMARY TREATMENT.

## NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES)

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 FACILITY MSD MORRIS FORM WQTC  
 LOCATION LOUISVILLE, KY 40211

KY0022411	001 Y
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR (SUBR LV)  
 F - FINAL JEFFE  
 BIOMONITORING/ONCE PER QUARTE  
 EFFLUENT  
 \*\*\* NO DISCHARGE \*\*\* ☐

MONITORING PERIOD						
YEAR	MONTH	DAY	TO	YEAR	MONTH	DAY
10	04	01		10	06	30

ATTN: ALEX E NOVAK, OPER DIR

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 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	375	383	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
CADMIUM, DISSOLVED (AS CD) 01025 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.003	0.003	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
COPPER, DISSOLVED (AS CU) 01040 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.010	0.010	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
LEAD, DISSOLVED (AS PB) 01049 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.005	0.005	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
ZINC, DISSOLVED (AS ZN) 01090 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.060	0.060	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
ZINC TOTAL RECOVERABLE 01094 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.060	0.060	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
CADMIUM TOTAL RECOVERABLE 01113 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.003	0.003	( 19 )	0	QTRLY	GRAB-2	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		QTRLY	COMPOS	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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MONITORING PERIOD						
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LEAD	SAMPLE MEASUREMENT	*****	*****	****	*****	0.005	0.005	( 19 )	0	QTRLY	GRAB-2
TOTAL RECOVERABLE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		QTRLY	COMPOS
01114 1 0 2											
EFFLUENT GROSS VALUE											
COPPER	SAMPLE MEASUREMENT	*****	*****	****	*****	0.014	0.015	( 19 )	0	QTRLY	GRAB-2
TOTAL RECOVERABLE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		QTRLY	COMPOS
01119 1 0 2											
EFFLUENT GROSS VALUE											
TOXICITY, FINAL CONC	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	<1.00	( 2F )	0	QTRLY	GRAB-2
TOXICITY UNITS	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.00 DAILY MAX	ACUTE TOXCTY		QTRLY	GRAB-2
61406 1 0 1											
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA	NUMBER	YEAR - MO - DAY	

DATE	WASTEWATER FLOWS (Million Gallons)				TEMP (DEGF)		pH		SETS (M/L)		TSS (mg/L)		TS (mg/L)		D.O. (mg/L)		5-DAY BOD (mg/L)				RETURN SLUDGE FLOW TSS TVSS				AERATION BASIN D.O MLSS MLVSS SET SVI				ACTIVE Sludge Wasted Primary Sludge		CHLORINATION Chlorine Dosage Resid Coliform			FINAL EFFLUENT NH3-N Pump.																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
	Final Effluent	Sec. Effluent	Bypass		raw	final	raw	final	raw	final	raw	final	raw	final	raw	prim. final	raw	final	raw	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	g/L	

SEWER CONNECTIONS

134984 TIMES 4 = 539456 SEWER POPULATION

IND. WASTER POPULATION EQ  
 CUSTOMERS 327  
 FLOW 484988  
 BOD 1483553  
 TSS 1128028

Authorized Agent

Certification No. 4663



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

Report Selections: Treatment Plant: MSO0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES # KY0022411	Facility ID MSD0278	Water Quality Treatment Center MORRIS FORMAN			Receiving Stream of Treatment Center OHIO RIVER			Region WEST			
Facility Type		Facility ID		Facility Address		If Pump Station, Name of Pump Station:		Receiving Stream		Discharge to	
SMH Sewer Manhole		02933		7900 SHELBYVILLE RD				MIDDLE FORK BEARGRASS CREEK		STREAM	
<u>Activity Code / Description</u>		<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISSUS: SUSPECTED OVERFLOW EVID. FOUND		1093985	06/09/10 05:00 PM	FIELDS	GRIFFITH	DOCUMENTED	03/04/08	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 05:05 PM	

**Spot Inspections:**

Discharge Amount	5 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	NONE NEEDED- NO VISUAL DEBRIS OR SOLIDS
Control Zone:	NONE NEEDED
Impact:	NO VISUAL IMPACT OBSERVED
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED ON DECEMBER 31, 2008

**Notifications:**

06/10/10 07:38 AM	DISPUB	PUBLIC NOTIFIED THROUGH PERMANENT SIGNS PLACE AROUND DISCHARGE LOCATION
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Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES # KY0022411 (Cont'd)	Facility ID MSD0278	Water Quality Treatment Center MORRIS FORMAN	Receiving Stream of Treatment Center OHIO RIVER	Region WEST
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Facility Type SMH Sewer Manhole	Facility ID 16649	Facility Address 1726 FRASER DR	If Pump Station, Name of Pump Station:	Receiving Stream SOUTH FORK BEARGRASS CREEK	Discharge to DITCH
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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 Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISREV: RAIN EVENT DISCHARGE	1093670	06/09/10 05:30 AM	MITCHELL	GRIFFITH	DOCUMENTED	01/24/02	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 02:45 PM	

**Spot Inspections:**

Discharge Amount	46,884 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	DISCLN WO# 1094413
Control Zone:	NONE NEEDED PIPE SUBMERGED-DID PLACE DOOR HANGERS TO SURROUNDING CUSTOMERS
Impact:	LIGHT DEBRIS OBSERVED
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED ON DECEMBER 31, 2008

**Notifications:**

06/09/10 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
06/11/10 07:22 AM	DISPUB	PUBLIC NOTIFIED THROUGH DOOR HANGERS AND PERMANENT SIGNS TO AVOID CONTACT WITH DISCHARGE
06/09/10 01:00 AM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES # KY0022411 (Cont'd)	Facility ID MSD0278	Water Quality Treatment Center MORRIS FORMAN			Receiving Stream of Treatment Center OHIO RIVER			Region WEST			
Facility Type		Facility ID	Facility Address		If Pump Station, Name of Pump Station:		Receiving Stream		Discharge to		
SMH Sewer Manhole		27005	1012 ALTA CIR				MIDDLE FORK BEARGRASS CREEK		GROUND		
<u>Activity Code / Description</u>		<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISSUS: SUSPECTED OVERFLOW EVID. FOUND		1094013	06/09/10 05:40 PM	FIELDS	GRIFFITH	DOCUMENTED	09/02/03	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 05:45 PM	

**Spot Inspections:**

Discharge Amount:	50 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	DISCLN WO# 1094024
Control Zone:	NONE NEEDED
Impact:	VERY LIGHT DEBRIS OBSERVED AROUND DISCHARGE SITE
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED ON DECEMBER 31, 2008

**Notifications:**

06/10/10 07:44 AM	DISPUB	PUBLIC NOTIFIED THROUGH PERMANENT SIGNS AROUND DISCHARGE LOCATION TO AVOID DISCHARGE CONTENT
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Report Selections: Treatment Plant: MSD0278 MORRIS FORMAN, Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES # KY0022411 (Cont'd)	Facility ID MSD0278	Water Quality Treatment Center MORRIS FORMAN				Receiving Stream of Treatment Center OHIO RIVER			Region WEST	
Facility Type	Facility ID	Facility Address		If Pump Station, Name of Pump Station:			Receiving Stream		Discharge to	
SMN Sewer Main	32519	5508 HEMPSTEAD RD					LONGVIEW CREEK		STREAM	
<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISDW: DRY WEATHER DISCHARGE	1101797	06/30/10 01:30 PM	BRIGHT	KAUFMAN	REPAIRED - ISSUE RESOLVED	06/30/10	STRUCTURAL FAILURE	UNAUTHORIZED DISCHARGE - WATERS	06/30/10 03:00 PM	MAIN

**Spot Inspections:**

Discharge Amount	90 GAL
Cause:	STRUCTURAL FAILURE OF MAIN SEWER
Clean Up:	NO CLEAN UP PERFORMED- PIPE DISCHARGING UNDERWATER, DIRECTLY INTO STREAM
Control Zone:	PLACED TEMPORARY SIGNS AROUND IMPACTED AREA AND APROX 100' DOWNSTREAM ALONG STREAM
Impact:	DISCOLORATION OF STREAM
Repair:	TEMPORARY REPAIRS (SEALED LEAKING SPOTS WITH HYDRAULIC CEMENT) UNTIL CONTRACTOR CAN REPLACE LEAKING SECTIONS OF SEWER

**Notifications:**

06/30/10 01:58 PM	DISPUB	ADVISED ALL POSSIBLE IMPACTED PROPERTIES IN SURROUNDING AREA BY DOOR CARD
06/30/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



IMSAST0004

Overflow Report

Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Water Quality Treatment Center</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Center</b> OHIO RIVER	<b>Region</b> WEST
<b>Facility Type</b> SMH Sewer Manhole	<b>Facility ID</b> 45800	<b>Facility Address</b> 2413 SPRING VALLEY LN	<b>If Pump Station, Name of Pump Station:</b>	<b>Receiving Stream</b> MIDDLE FORK BEARGRASS CREEK
<b>Discharge to</b> STREAM				
<b>Activity Code / Description</b> DISSUS: SUSPECTED OVERFLOW EVID. FOUND	<b>WO #</b> 1097900	<b>Initiated</b> 06/22/10 02:55 PM	<b>Initiated By</b> FRENCH	<b>Assigned To</b> LEVITZ
			<b>Disch Status</b> REPAIRED - ISSUE RESOLVED	<b>Event Date</b> 06/22/10
			<b>Problem</b> STRUCTURAL FAILURE	<b>Result</b> UNAUTHORIZED DISCHARGE - WATERS
			<b>Completed</b> 06/22/10 03:00 PM	<b>Condition</b> MAIN

**Spot Inspections:**

Discharge Amount:	5 GAL
Cause:	STRUCTURAL FAILURE OF DOWNSTREAM MAIN SEWER LINE (SMN 45800 27012-LH)
Clean Up:	I&FP PERFORMING REPAIRS AND CLEANUP
Control Zone:	NO CONTROL ZONE SETUP
Impact:	DEBRIS OBSERVED AROUND MANHOLE AND EXPOSED SEWER LINE
Repair:	MAIN SEWER REPAIR UNDERWAY

**Notifications:**

06/23/10 11:30 AM	DISPUB	No public notification was made.
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Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES #	Facility ID	Water Quality Treatment Center				Receiving Stream of Treatment Center			Region		
KY0022411 (Cont'd)	MSD0278	MORRIS FORMAN				OHIO RIVER			WEST		
<hr/>											
<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>	
DISSUS: SUSPECTED OVERFLOW EVID. FOUND	1097904	06/22/10 02:55 PM	FRENCH	LEVITZ	REPAIRED - ISSUE RESOLVED	06/22/10	STRUCTURAL FAILURE	UNAUTHORIZED DISCHARGE - WATERS	06/22/10 03:00 PM	MAIN	

**Spot Inspections:**

Discharge Amount	5 GAL
Cause:	STRUCTURAL FAILURE OF MAIN SEWER LINE
Clean Up:	I&FP PERFORMING REPAIRS AND CLEANUP
Control Zone:	NO CONTROL ZONE SETUP
Impact:	DEBRIS OBSERVED AROUND MANHOLE AND EXPOSED SEWER LINE
Repair:	WORK ORDER 1097867 - REPAIRED MAIN SEWER

**Notifications:**

06/23/10 11:34 AM	DISPUB	No public notification was made.
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Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES # KY0022411 (Cont'd)	Facility ID MSD0278	Water Quality Treatment Center MORRIS FORMAN	Receiving Stream of Treatment Center OHIO RIVER	Region WEST
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Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SMH Sewer Manhole	45829	2002 MILLVALE RD		MIDDLE FORK BEARGRASS CREEK	GROUND

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISREV: RAIN EVENT DISCHARGE	1094356	06/09/10 12:35 PM	FRENCH	GITTINGS	DOCUMENTED	06/09/10	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 02:12 PM	

**Spot Inspections:**

Discharge Amount:	2,425 GAL
Cause:	LACK OF SYSTEM CAPACITY - RAIN EVENT.
Clean Up:	NO CLEAN UP REQUIRED.
Control Zone:	NO CONTROL ZONE SET UP.
Impact:	OVERFLOW OBSERVED AT MANHOLE PICKHOLES, ABOUT 25GPM. NO SOLIDS OR DEBRIS OBSERVED.
Repair:	A SOLUTION FOR THIS LOCATION IS INCLUDED IN THE IOAP.

**Notifications:**

06/10/10 04:46 PM	DISPUB	Permanent overflow warning signs are posted warning the public to avoid the stream.
06/11/10 11:13 AM	DISNOT	Manual email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES # KY0022411 (Cont'd)	Facility ID MSD0278	Water Quality Treatment Center MORRIS FORMAN	Receiving Stream of Treatment Center OHIO RIVER	Region WEST
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Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SMH Sewer Manhole	45832	2167 MILLVALE RD		MIDDLE FORK BEARGRASS CREEK	GROUND

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISREV: RAIN EVENT DISCHARGE	1094352	06/09/10 12:35 PM	FRENCH	GITTINGS	DOCUMENTED	06/09/10	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 02:12 PM	

**Spot Inspections:**

Discharge Amount	2,425 GAL
Cause:	LACK OF SYSTEM CAPACITY - RAIN EVENT
Clean Up:	NO CLEAN UP REQUIRED
Control Zone:	NO CONTROL ZONE SET UP
Impact:	OVERFLOW OBSERVED AT PICKHOLES IN MANHOLE - NO SOLIDS OR DEBRIS OBSERVED
Repair:	A SOLUTION FOR THIS LOCATION IS INCLUDED IN THE IOAP

**Notifications:**

06/10/10 04:40 PM	DISPUB	Permanent overflow signs posted warning the public to avoid the stream.
06/11/10 11:17 AM	DISNOT	Manual email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES #	Facility ID	Water Quality Treatment Center	Receiving Stream of Treatment Center	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	45835	1132 ROSTREVOR CIR		MIDDLE FORK BEARGRASS CREEK	GROUND

  

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISREV: RAIN EVENT DISCHARGE	1094346	06/09/10 12:35 PM	FRENCH	GITTINGS	DOCUMENTED	09/02/03	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 02:12 PM	

**Spot Inspections:**

Discharge Amount:	9,700 GAL
Cause:	LACK OF SYSTEM CAPACITY - RAIN EVENT
Clean Up:	NO CLEAN UP REQUIRED
Control Zone:	NO CONTROL ZONE SET
Impact:	OVERFLOW OBSERVED AT MANHOLE, NO SOLIDS OR DEBRIS OBSERVED
Repair:	A SOLUTION FOR THIS LOCATION IS INCLUDED IN THE IOAP

**Notifications:**

06/10/10 04:36 PM	DISPUB	Permanent overflow warning signs posted to warn the public to avoid the stream.
06/11/10 11:15 AM	DISNOT	Manual email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

<b>KPDES #</b> KY0022411 (Cont'd)	<b>Facility ID</b> MSD0278	<b>Water Quality Treatment Center</b> MORRIS FORMAN	<b>Receiving Stream of Treatment Center</b> OHIO RIVER	<b>Region</b> 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				
<b>Activity Code / Description</b> DISREV: RAIN EVENT DISCHARGE	<b>WO #</b> 1093859	<b>Initiated</b> 06/09/10 02:00 PM	<b>Initiated By</b> GRIFFITH	<b>Assigned To</b> GRIFFITH
<b>Disch Status</b> DOCUMENTED	<b>Event Date</b> 11/29/01	<b>Problem</b> LACK OF SYSTEM CAPACITY	<b>Result</b> UNAUTHORIZED DISCHARGE - WATERS	<b>Completed</b> 06/10/10 12:54 AM
<b>Condition</b>				

**Spot Inspections:**

Discharge Amount	349,912 GAL
Cause:	LACK OF SYSTEM CAPACITY - RAIN EVENT.
Clean Up:	NO CLEANUP REQUIRED - PIPE DISCHARGES DIRECTLY TO STREAM, UNDERWATER.
Control Zone:	NO CONTROL ZONE SETUP, NO PUBLIC ACCESS. PERMANENT OVERFLOW WARNING SIGNS POSTED.
Impact:	DISCOLORATION OF STREAM.
Repair:	A SOLUTION FOR THIS LOCATION IS INCLUDED IN THE ISSDP.

**Notifications:**

06/09/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
06/10/10 03:47 PM	DISPUB	Permanent overflow warning signs posted at this location warning the public to avoid the stream.
06/09/10 01:00 PM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES #	Facility ID	Water Quality Treatment Center	Receiving Stream of Treatment Center	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	CSO151	1316 CASTLEWOOD DELL		SOUTH FORK BEARGRASS CREEK	STREAM

  

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISDW: DRY WEATHER DISCHARGE	1094528	06/10/10 09:15 AM	FRENCH	GRIFFITH	REPAIRED - ISSUE RESOLVED	06/10/10	OBSTRUCTION-NOT GREASE / ROOTS	UNAUTHORIZED DISCHARGE - WATERS	06/10/10 09:15 AM	

**Spot Inspections:**

Discharge Amount:	15,396 GAL
Cause:	CAUSE OF OVERFLOW IS UNKNOWN, IT IS BELIEVED THAT A TEMPORARY OBSTRUCTION IN THE SIPHON COULD POSSIBLY HAVE CAUSED OVERFLOW
Clean Up:	NO CLEAN UP OCCURRED.
Control Zone:	NO CONTROL ZONE WAS SET UP.
Impact:	NO IMPACT WAS OBSERVED.
Repair:	NO REPAIR OR REMEDIAL ACTION TAKEN.

**Notifications:**

06/11/10 12:09 PM	DISPUB	No public notification occurred.
06/11/10 01:36 PM	DISNOT	Manual email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Initiated Jun 01, 2010 12:00 AM thru Jun 30, 2010 11:59 PM

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

KPDES #	Facility ID	Water Quality Treatment Center	Receiving Stream of Treatment Center	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	CSO153	1201 LEXINGTON RD		SOUTH FORK BEARGRASS CREEK	STREAM

  

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISDW: DRY WEATHER DISCHARGE	1088829	06/01/10 01:23 PM	BRIGHT	BRIGHT	REPAIRED - ISSUE RESOLVED	06/01/10	OBSTRUCTION-NOT GREASE / ROOTS	UNAUTHORIZED DISCHARGE - WATERS	06/01/10 01:54 PM	

**Spot Inspections:**

Discharge Amount:	150 GAL
Cause:	OBSTRUCTION IN SIPHON
Clean Up:	PIPE DISCHARGES DIRECTLY INTO BEARGRASS CREEK
Control Zone:	PERMANENT SIGNS ALREADY IN PLACE THROUGHOUT THE IMPROVED CHANNEL
Impact:	SEWAGE/WATER DISCHARGING FROM OVERFLOW FLAPGATE
Repair:	MSD PERSONNEL FLUSHED THE SIPHON TO RELIEVE OBSTRUCTION

**Notifications:**

06/01/10 01:23 PM	DISPUB	TEMPORARY SIGNS PLACED NEAR ENTRANCE TO CREEK
06/01/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



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

KPDES #	Facility ID	Water Quality Treatment Center	Receiving Stream of Treatment Center	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
SLS Sewer Lift Station	MSD0012-PS	3246 RADIANCE RD	HIGHGATE SPRINGS	SOUTH FORK BEARGRASS CREEK	STREAM

  

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISREV: RAIN EVENT DISCHARGE	1093789	06/09/10 12:12 PM	ELDER	WRIGHT	DOCUMENTED	12/16/00	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	06/09/10 04:47 PM	

**Spot Inspections:**

Discharge Amount:	11,313 GAL
Cause:	LACK OF SYSTEM CAPACITY DUE TO RAIN EVENT
Clean Up:	PIPE DISCHARGE SUBMERGED NO CLEAN UP
Control Zone:	PERMANENT SIGN POSTED
Impact:	NO IMPACT OBSERVED FACILITY UNDER ELEVATED CREEK LEVEL
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER PLAN

**Notifications:**

06/09/10 01:09 PM	DISPUB	Permanent signs posted
06/09/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
06/09/10 01:00 PM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Total Facilities Printed: 12  
Total Work Orders Printed: 13