



700 West Liberty Street
Louisville Kentucky 40203-1911
502-540-6000
www.msdlouky.org

February 12, 2010

Carolena Bentley
Division of Water
Surface Water Permits Branch
200 Fair Oaks Lane 4th 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 January 1 to January 31 are enclosed. All permit requirements were met for the month of January, 2010.

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

Sincerely,

A handwritten signature in cursive script that reads "Alex E. Novak".

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

paw

MFDMR0110.doc

Enclosures

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



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

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

Form Approved.
OMB No. 2040-0004

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	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	01	01		10	01	31

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	*****	*****	****	6.9	*****	*****	(19)	0	31/31	GRAB
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	****	2.0 INST MIN	*****	*****	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	19,814	22,913	(26)	*****	25	35	(19)	0	31/31	COMPOS
00310 E 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	30 MO AVG	45 MX WK AV	MG/L		DAILY	COMPOS
SEC/BIOLOGICAL PRCS CMPLT											
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	286,197	358,793	(26)	*****	310	434	(19)	0	31/31	COMPOS
00310 G 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		DAILY	COMPOS
RAW SEW/INFLUENT											
PH	SAMPLE MEASUREMENT	*****	*****	****	6.6	*****	7.0	(12)	0	31/31	GRAB
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DAILY	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	19,652	21,192	(26)	*****	24	32	(19)	0	31/31	COMPOS
00530 E 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	30 MO AVG	45 MX WK AV	MG/L		DAILY	COMPOS
SEC/BIOLOGICAL PRCS CMPLT											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	290,052	407,023	(26)	*****	304	416	(19)	0	31/31	COMPOS
00530 G 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	MG/L		DAILY	COMPOS
RAW SEW/INFLUENT											
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	8,009	9,422	(26)	*****	10.2	14.4	(19)	0	31/31	COMPOS
00610 E 0 0	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	20 MO AVG	30 MX WK AV	MG/L		DAILY	COMPOS
SEC/BIOLOGICAL PRCS CMPLT											
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	10-02-10
	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)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004

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

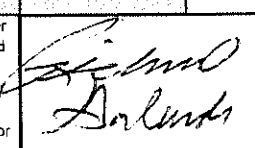
NAME MSD MORRIS FORMAN WQTC
ADDRESS C/O LOUISVILLE/JEFF CO MSD
4522 ALGONQUIN PKWY
LOUISVILLE, KY 40211-2497
FACILITY MSD MORRIS FORM WQTC
LOCATION LOUISVILLE, KY 40211

KY0022411	001 1
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
10	01	01	10	01	31

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	SAMPLE MEASUREMENT	8860	10345	(26)	*****	11.3	15.7	(19)	0	31/31	COMPOS
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
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 E 0 0	SAMPLE MEASUREMENT	101.9	169.4	(03)	*****	*****	*****	****	0	31/31	CONTIN
SEC/BIOLOGICAL COMPLIANCE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	0.010	0.010	(19)	0	31/31	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.019 MO AVG	0.019 DAILY MX	MG/L		DAILY	GRAB
COLIFORM, FECAL GENERAL 74055 1 1 0	SAMPLE MEASUREMENT	*****	*****	****	*****	149	386	(13)	0	31/31	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	1000 30DA GEO	2000 7 DA GEO	#/100ML		DAILY	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	SAMPLE MEASUREMENT	*****	*****	****	92	*****	*****	(23)	0	ONCE/MONTH	CALCTD
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	85 MO MIN	*****	*****	PERCENT		ONCE/MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0	SAMPLE MEASUREMENT	*****	*****	****	93	*****	*****	(23)	0	ONCE/MONTH	CALCTD
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	85 MO MIN	*****	*****	PERCENT		ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL 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	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT								502	10-02-10	
									540-6000	YEAR - MO - DAY	

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)
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 B
PERMIT NUMBER	DISCHARGE NUMBER

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

JEFFE

MONITORING PERIOD						
YEAR	MONTH	DAY	TO	YEAR	MONTH	DAY
10	01	01		10	01	31

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	*****	*****	****	*****	171	208	(19)	0	13/31	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	*****	*****	****	*****	44	62	(19)	0	13/31	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	*****	*****	****	*****	120	141	(19)	0	13/31	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	*****	*****	****	*****	39	62	(19)	0	13/31	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	*****	*****	****	*****	9.5	11.8	(19)	0	13/31	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	*****	*****	****	*****	7.6	10.5	(19)	0	13/31	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	53.90	70.50	(03)	*****	*****	*****	****	0	13/31	CONTIN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	MGD	*****	*****	*****	****		WHEN DISCHG	CONTIN
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		10-02-10	
								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA	NUMBER

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

MONITORING DURING PERIODS OF SECONDARY BYPASS IN ADDITION TO REGULAR MONITORING.

1 - FINAL EFFLUENT

F - SECONDARY BYPASS AFTER PRIMARY TREATMENT.

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 TSS TVSS				AERATION BASIN D.O MLSS MLVSS SET SVI				ACTIVE Sludge Wasted Primary Sludge		CHLORINATION Chlorine Dosage Resid Fecal Coliform			FINAL EFFLUENT NH3-N Pump	
	Final	Sec.	Bypass	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final			
	Effluent	Effluent	Bypass	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final	raw	final			
1/1	78.2	78.2	0.0	51	53	7.4	6.8	18.0	0.1	208	12	8.0	147	96	11	28.9	9.7	8.5	13.9	3.3	2.9	212	68	0.88	0.20	0.89	0.010	128	11	3.00				
1/2	77.4	77.4	0.0	50	51	7.5	6.9	12.0	0.1	188	8	8.8	180	125	9	28.1	7.7	6.5	14.8	2.4	2.2	177	78	0.88	0.19	0.88	0.010	144	15	0.00				
1/3	75.1	75.1	0.0	51	52	7.5	7.0	5.3	0.1	158	20	8.7	166	121	14	25.8	7.3	6.5	19.7	2.4	2.1	184	83	0.87	0.20	0.85	0.010	192	14	0.00				
1/4	76.1	78.1	0.0	50	49	7.3	7.0	13.5	0.1	250	21	8.6	272	180	22	26.6	5.2	4.6	19.8	2.6	2.3	134	85	0.82	0.17	0.92	0.010	243	16	0.00				
1/5	78.9	78.9	0.0	50	51	7.4	6.8	16.5	0.1	352	32	8.7	373	185	34	26.6	5.6	4.8	20.0	2.3	2.0	99	59	0.73	0.17	1.04	0.010	1250	17	0.00				
1/6	79.3	79.3	0.0	50	50	7.3	7.0	11.0	0.1	268	39	8.6	324	210	40	26.3	6.7	6.1	20.0	1.8	1.5	91	68	0.72	0.11	1.10	0.010	2300	15	0.00				
1/7	81.0	81.0	0.0	54	55	7.4	6.8	10.5	0.1	204	32	8.4	232	184	34	26.1	8.8	7.8	20.0	2.2	2.0	178	82	0.82	0.09	1.23	0.010	520	14	0.00				
1/8	78.0	78.0	0.0	58	52	7.3	6.8	17.0	0.1	338	32	8.2	449	292	49	25.7	9.9	8.7	19.5	3.0	2.7	236	64	0.78	0.19	1.50	0.010	200	12	0.00				
1/9	75.8	75.8	0.0	50	53	7.2	6.8	18.0	0.1	368	40	8.9	413	258	53	25.3	11.9	10.8	17.8	2.9	2.6	240	71	0.75	0.23	1.85	0.010	465	11	0.00				
1/10	73.8	73.8	0.0	48	51	7.3	6.8	13.5	0.1	308	34	11.0	387	266	35	25.2	8.3	7.3	15.9	3.3	2.9	287	82	0.79	0.16	1.74	0.010	88	10	0.00				
1/11	81.5	81.5	0.0	50	51	7.2	6.7	20.0	0.1	440	34	7.9	428	281	31	23.6	11.3	10.2	13.8	3.1	2.9	279	90	0.86	0.13	2.93	0.010	3	12	0.00				
1/12	80.2	80.2	0.0	49	51	7.3	6.7	24.0	0.1	444	32	7.9	458	273	29	24.0	11.2	9.8	13.2	3.5	3.0	250	75	0.88	0.19	2.49	0.010	26	13	0.00				
1/13	79.9	79.9	0.0	48	51	7.3	6.7	24.5	0.1	672	30	7.9	500	285	29	24.6	12.2	10.6	13.0	3.5	3.1	254	73	0.95	0.27	2.12	0.010	29	13	0.00				
1/14	82.9	82.9	0.0	54	55	7.3	6.8	12.5	0.1	314	23	8.2	407	260	23	24.4	12.6	10.6	12.9	3.8	3.2	248	68	0.97	0.34	1.97	0.010	14	15	0.00				
1/15	84.5	84.5	0.0	58	58	7.4	6.7	9.5	0.1	404	24	8.6	430	252	35	24.4	11.8	9.8	13.1	3.1	2.5	292	85	1.00	0.34	1.91	0.010	13	8	0.00				
1/16	79.6	79.6	0.0	58	57	7.2	6.6	14.0	0.1	392	10	9.3	471	290	18	25.4	11.9	10.9	12.6	2.9	2.4	263	92	1.05	0.35	1.80	0.010	21	13	0.00				
1/17	125.8	102.0	23.8	55	56	7.3	6.7	20.0	0.1	570	52	7.2	438	286	67	24.8	13.8	12.0	11.6	3.9	3.5	253	67	0.96	0.28	3.54	0.010	2700	12	0.00				
1/18	96.8	96.8	0.0	54	55	7.5	6.8	15.0	0.1	332	28	10.0	317	204	19	25.4	12.0	10.5	11.9	3.6	3.2	258	73	0.94	0.21	1.89	0.010	64	9	0.00				
1/19	89.7	89.7	0.0	55	56	7.2	6.8	18.0	0.1	394	27	7.9	413	298	26	25.3	14.7	12.8	11.1	4.2	3.7	300	75	0.99	0.31	1.66	0.010	1450	13	0.00				
1/20	182.1	118.6	63.5	54	55	7.4	6.7	8.2	0.3	298	71	7.9	342	216	63	25.3	15.2	13.3	12.3	3.8	3.4	287	77	1.03	0.26	5.37	0.010	107	13	16.00				
1/21	263.6	139.6	124.2	49	50	7.5	7.0	8.0	0.6	314	64	8.7	180	122	55	25.8	15.1	13.0	16.9	3.4	3.0	230	69	1.05	0.26	4.88	0.010	182	6	24.00				
1/22	217.7	139.9	77.8	49	51	7.8	6.9	8.0	0.4	166	44	10.1	160	102	34	25.2	13.9	11.4	14.8	3.3	2.8	218	66	0.99	0.26	2.99	0.010	470	6	24.00				
1/23	189.1	143.3	45.8	54	53	7.6	6.9	9.5	0.1	212	28	8.8	196	130	27	25.8	14.7	12.2	14.4	3.5	3.0	222	66	0.94	0.31	1.89	0.010	580	7	24.00				
1/24	280.0	142.7	117.3	52	53	7.5	6.9	4.5	0.5	144	56	9.2	89	83	40	25.6	13.5	11.3	13.8	3.3	2.8	222	70	0.98	0.14	2.70	0.010	900	5	24.00				
1/25	225.6	137.3	88.3	50	51	7.5	7.0	6.0	0.2	114	36	10.1	135	118	54	25.5	14.2	11.7	13.7	3.4	2.8	202	81	0.99	0.12	4.07	0.010	154	6	24.00				
1/26	203.4	134.9	68.5	50	51	7.4	7.0	7.0	0.1	166	29	9.1	190	144	39	24.1	14.8	12.2	13.7	3.3	2.7	223	70	0.98	0.19	3.81	0.010	480	7	24.00				
1/27	166.6	127.8	40.8	50	51	7.5	6.8	17.0	0.1	230	28	9.6	231	143	36	24.5	14.1	11.5	17.8	3.6	2.9	216	81	0.95	0.16	2.47	0.010	481	8	24.00				
1/28	158.1	134.1	22.0	51	54	7.6	6.8	15.5	0.1	280	26	12.6	311	158	25	25.0	14.1	11.8	18.3	3.2	2.7	218	70	0.95	0.23	2.16	0.010	98	9	24.00				
1/29	148.0	139.0	7.0	50	50	7.8	6.9	14.0	0.1	300	18	9.9	273	215	30	25.0	13.7	12.8	17.5	3.3	2.8	198	61	0.88	0.22	2.30	0.010	10	9	24.00				
1/30	140.2	129.0	11.2	50	51	7.4	6.7	14.0	0.1	348	20	9.6	383	270	58	25.3	13.4	12.6	13.5	3.2	2.7	212	67	0.82	0.18	2.22	0.010	42	8	24.00				
1/31	131.3	121.2	10.1	48	49	7.4	6.8	11.5	0.1	246	37	8.9	328	234	48	25.3	14.9	12.3	15.4	3.8	3.2	217	58	0.85	0.18	2.32	0.010	147	4	24.00				
Total	3880.2	3159.9	700.3													784.7									28.010	6.620					283.00			
Average	124.5	101.9	22.6	51	52	7.4	6.8	13.4	0.1	304	32	8.9	310	201	35	25.3	11.7	10.1	15.4	3.2	2.8	221	71	0.90	0.21	2.23	0.010	149	11	0.00				

SEWER CONNECTIONS

134646 TIMES 4 = 538584 SEWER POPULATION

IND. WASTER POPULATION EO
 CUSTOMERS 326
 FLOW 647345
 BOD 1355382
 TSS 964795

Authorized Agent

Certification No. 4663



Report Selections: Treatment Plant: MSD0278 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	08935-SM	1001 BRECKENRIDGE LN					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>
DISREV: RAIN EVENT DISCHARGE	1003548	01/21/10 06:09 PM	GRIFFITH	GRIFFITH	DOCUMENTED	11/29/01	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 01:18 AM	

Spot Inspections:

Discharge Amount:	811,385 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	NONE NEEDED-MAGNITUDE OF STORM CLEARED DEBRIS
Control Zone:	PERMANENT SIGNS ARE PLACED AROUND IMPACTED AREA
Impact:	NO IMPACT OBSERVED DUE TO MAGNITUDE OF STORM
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED ON DECEMBER 31, 2008

Notifications:

01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/24/10 01:02 AM	DISPUB	PUBLIC NOTIFIED THROUGH DOOR HANGERS AND PERMANENT SIGNS TO AVOID DIRECT CONTACT WITH DISCHARGED CONTENT
01/21/10 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



IMSAST0004
Overflow Report
Initiated January 2010

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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<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	1004219	01/24/10 02:04 PM	GRIFFITH	GRIFFITH	DOCUMENTED	11/29/01	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/24/10 03:12 PM	

Spot Inspections:

Discharge Amount:	242 GAL
Cause:	LACK OF SYSTEM CAPACITY - HEAVY RAIN
Clean Up:	NONE NEEDED - MAGNITUDE OF STORM CLEARED DEBRIS
Control Zone:	PERMANENT SIGNS ARE PLACED AROUND THE IMPACTED AREA
Impact:	NO IMPACT OBSERVED DUE TO MAGNITUDE OF STORM
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED DECEMBER 2008

Notifications:

01/24/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/24/10 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



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	16649	1726 FRASER DR		SOUTH FORK BEARGRASS CREEK	DITCH

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISREV: RAIN EVENT DISCHARGE	1003546	01/21/10 04:15 PM	GRIFFITH	GRIFFITH	DOCUMENTED	01/24/02	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 08:00 PM	

Spot Inspections:

Discharge Amount:	240,555 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	NONE NEEDED- PIPE SUBMERGED
Control Zone:	PERMANENT SIGNS ARE PLACED AROUND IMPACTED AREA
Impact:	NONE OBSERVED-MAGNITUDE OF STORM
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED ON DECEMBER 31, 2008

Notifications:

01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/24/10 01:25 AM	DISPUB	PUBLIC NOTIFIED THROUGH DOOR HANGERS AND PERMANENT SIGNS TO AVOID DIRECT CONTACT WITH DISCHARGED CONTENT
01/21/10 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



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

<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	1004217	01/24/10 07:30 AM	GRIFFITH	GRIFFITH	DOCUMENTED	01/24/02	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/26/10 07:45 AM	

Spot Inspections:

Discharge Amount:	269,068 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	A DISCHARGE CLEANUP WORK ORDER HAS BEEN CREATED FOR IFP TO COMPLETE THIS WORK. WO#1007406
Control Zone:	PERMANENT SIGNS ARE PLACED AROUND IMPACTED AREA
Impact:	NONE OBSERVED-MAGNITUDE OF STORM
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCAHRGE PLAN SUBMITTED ON DECEMBER 31,2008

Notifications:

01/24/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/27/10 01:30 PM	DISPUB	PUBLIC NOTIFIED THROUGH DOOR HANGERS AND PERMANENT SIGNS TO AVOID DIRECT CONTACT WITH DISCHARGED CONTENT
01/24/10 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



IMSAST0004
Overflow Report
Initiated January 2010

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		
SSL Sewer Service Line	167449	3101 BARDSTOWN RD					SOUTH 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	1005848	01/25/10 10:45 AM	RICHARDSON	RICHARDSON	REPAIRED - ISSUE RESOLVED	01/25/10	OBSTRUCTION-NOT GREASE / ROOTS	UNAUTHORIZED DISCHARGE - WATERS	01/25/10 11:50 AM	LAT

Spot Inspections:

Discharge Amount:	20 GAL
Cause:	OBSTRUCTION IN MSD'S PORTION OF THE PROPERTY SERVICE CONNECTION
Clean Up:	MSD PERSONNEL CLEANED AND SANITIZED THE IMPACTED AREA
Control Zone:	MSD PERSONNEL ADVISED CUSTOMER TO AVOID CONTACT WITH SEWAGE
Impact:	SEWAGE AROUND THE MSD CLEANOUT
Repair:	WORK ORDER 1005841 - FLUSHED OPEN THE MSD PROPERTY SERVICE CONNECTION

Notifications:

01/25/10 11:00 AM	DISPUB	ADVISED CUSTOMER ON SITE, DOORCARDS AND POSTED DISCHARGE SIGNS
01/25/10 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



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	27005	1012 ALTA 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	1003550	01/21/10 08:35 PM	CLARK	GRIFFITH	DOCUMENTED	09/02/03	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 11:30 AM	

Spot Inspections:

Discharge Amount	48,000 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	DISCLN W/O# 1003990
Control Zone:	BARRICADES AND CAUTION TAPE WERE PLACED AROUND IMPACTED AREA
Impact:	LIGHT SOLIDS AND DEBRIS AROUND DISCHARGE AREA
Repair:	THIS LOCATION IS INCLUDED IN THE SANITARY SEWER DISCHARGE PLAN SUBMITTED ON DECEMBER 31, 2008

Notifications:

01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/23/10 04:37 PM	DISPUB	PUBLIC NOTIFIED THROUGH PERMANENT SIGNS TO AVOID DIRECT CONTACT WITH DISCHARGED CONTENT
01/21/10 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



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	40872	2105 INDIAN HILLS TRL		MUDDY 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	1003553	01/21/10 09:17 PM	ELDER	SPENCER	DOCUMENTED	12/15/07	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 12:03 AM	

Spot Inspections:

Discharge Amount	12,450 GAL
Cause:	LACK OF SYSTEM CAPACITY - HEAVY RAIN IN AREA
Clean Up:	CLEANED, SANITIZED & SPREAD LIME.
Control Zone:	PLACED BARRICADES AROUND THE IMPACTED AREA
Impact:	DEBRIS OBSERVED
Repair:	MANHOLE COVER REPLACED & BARRICADES REMOVED WHEN SAFE TO DO SO

Notifications:

01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/21/10 09:17 PM	DISPUB	BARRICADES PLACED AROUND AFFECTED AREA.
01/21/10 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



IMSAST0004
Overflow Report
Initiated January 2010

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	48897	3600 DOWNING WAY		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	1003551	01/21/10 10:30 PM	ELDER	WRIGHT	DOCUMENTED	04/04/08	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 02:00 AM	

Spot Inspections:

Discharge Amount:	1,050 GAL
Cause:	LACK OF SYSTEM CAPACITY - HEAVY RAIN IN AREA
Clean Up:	NO DEBRIS
Control Zone:	TEMPORARY SIGNS POSTED
Impact:	SEWAGE WATER OBSERVED
Repair:	CONTRACTOR REPAIRING MANHOLE

Notifications:

01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/21/10 10:30 PM	DISPUB	TEMPORARY SIGNS POSTED
01/21/10 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

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	72571-X	4600 CHAMPIONS TRACE LN		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	1003547	01/21/10 05:22 PM	GRIFFITH	GRIFFITH	DOCUMENTED	11/29/01	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 05:55 AM	

Spot Inspections:

Discharge Amount:	715,687 GAL
Cause:	LACK OF SYSTEM CAPACITY-HEAVY RAIN
Clean Up:	NONE NEEDED-PIPE SUBMERGED
Control Zone:	PERMANENT SIGNS ARE PLACED AROUND IMPACTED AREA
Impact:	NO IMPACTED OBSERVED-PIPE SUBMERGED
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGED PLAN

Notifications:

01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/24/10 01:13 AM	DISPUB	PUBLIC NOTIFIED THROUGH DOOR HANGERS TO AVOID DIRECT CONTACT WITH DISCHARGED CONTENT
01/21/10 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



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	1002128	01/15/10 12:15 PM	BRIGHT	BRIGHT	REPAIRED - ISSUE RESOLVED	01/15/10	OBSTRUCTION-NOT GREASE / ROOTS	UNAUTHORIZED DISCHARGE - WATERS	01/15/10 02:20 PM	

Spot Inspections:

Discharge Amount:	100 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:

01/15/10 02:19 PM	DISPUB	TEMPORARY SIGNS PLACED NEAR ENTRANCE TO CREEK
01/15/10 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 # 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		
SLS Sewer Lift Station	MSD0012-PS	3246 RADIANCE RD		HIGHGATE SPRINGS			SOUTH 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>
DISREV: RAIN EVENT DISCHARGE	1003538	01/21/10 05:41 PM	ELDER	WRIGHT	DOCUMENTED	12/16/00	PUMPED OVERFLOW	UNAUTHORIZED DISCHARGE - WATERS	01/22/10 08:24 AM	

Spot Inspections:

Discharge Amount:	171,600 GAL
Cause:	LACK OF CAPACITY DUE TO RAIN EVENT IN AREA
Clean Up:	NO CLEAN UP PERFORMED - PIPE DISCHARGING UNDERWATER, DIRECTLY INTO STREAM
Control Zone:	PERMANENT SIGN IN PLACE - NO ADDITIONAL CONTROL ZONE SET UP
Impact:	NONE OBSERVED - OUTLETS SUBMERGED
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

Notifications:

01/21/10 07:20 PM	DISPUB	PERMANENT SIGNS POSTED IN AREA
01/21/10 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/21/10 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



IMSAST0004
Overflow Report
Initiated January 2010

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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<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	1004030	01/24/10 10:00 AM	ELDER	WRIGHT	DOCUMENTED	12/16/00	PUMPED OVERFLOW	UNAUTHORIZED DISCHARGE - WATERS	01/25/10 11:00 AM	

Spot Inspections:

Discharge Amount:	357,552 GAL
Cause:	LACK OF CAPACITY DUE TO RAIN EVENT IN AREA
Clean Up:	NO CLEAN UP PERFORMED - PIPE DISCHARGING UNDERWATER, DIRECTLY INTO STREAM
Control Zone:	PERMANENT SIGN IN PLACE - NO ADDITIONAL CONTROL ZONE SET UP
Impact:	NONE OBSERVED - OUTLETS SUBMERGED
Repair:	THIS LOCATION IS IN THE INTERIM SANITARY SEWER DISCHARGE PLAN

Notifications:

01/24/10 10:47 AM	DISPUB	PERMANENT SIGNS POSTED IN AREA
01/24/10 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
01/24/10 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



IMSAST0004
Overflow Report
Initiated January 2010

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 SLS Sewer Lift Station	Facility ID MSD0023-PS	Facility Address 501 MOCKINGBIRD VALLEY RD	If Pump Station, Name of Pump Station: MELLWOOD AVENUE		Receiving Stream MUDDY FORK BEARGRASS CREEK			Discharge to STREAM		
Activity Code / Description DISREV: RAIN EVENT DISCHARGE	WO # 1003597	Initiated 01/22/10 03:00 AM	Initiated By SINGLETON	Assigned To CARTER SR	Disch Status DOCUMENTED	Event Date 01/02/04	Problem LACK OF SYSTEM CAPACITY	Result UNAUTHORIZED DISCHARGE - WATERS	Completed 01/22/10 11:30 AM	Condition

Spot Inspections:

Discharge Amount:	12,750 GAL
Cause:	LACK OF SYSTEM CAPACITY
Clean Up:	PIPE DISCHARGED SUMERGED- NO DEBRIS
Control Zone:	TEMPORARY SIGNS POSTED AROUND AFFECTED AREA
Impact:	NO IMPACT OBSERVED
Repair:	HAULED TO PREVENT FURTHER DISCHARGE. HANSEN HAUL WORK ORDER #1003758

Notifications:

01/22/10 03:00 AM	DISPUB	TEMPORARY SIGNS POSTED AROUND AFFECTED AREA.
01/22/10 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov.



IMSAST0004
Overflow Report
Initiated January 2010

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

<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	1006088	01/25/10 10:25 AM	SINGLETON	HOWARD	DOCUMENTED	01/02/04	LACK OF SYSTEM CAPACITY	UNAUTHORIZED DISCHARGE - WATERS	01/25/10 12:30 PM	

Spot Inspections:

Discharge Amount:	1,800 GAL
Cause:	LACK OF SYSTEM CAPACITY
Clean Up:	NO CLEANUP REQUIRED, NO DEBRIS OBSERVED
Control Zone:	TEMPORARY SIGNS POSTED
Impact:	NO IMPACT OBSERVED- PIPE SUBMERGED
Repair:	THIS SITE FOUND DURING RAIN EVENT RECON- WILL BE MONITORED AND EVALUATED FOR REPAIR.

Notifications:

01/25/10 12:30 PM	DISPUB	TEMPORARY SIGNS POSTED
01/26/10 03:14 PM	DISNOT	Manual email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Total Facilities Printed: 10

Total Work Orders Printed: 14