



**MSD**

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

October 27, 2008

Ms. Vickie L. Prather  
Kentucky Division of Water  
14 Reilly Road  
Frankfort, Kentucky 40601

**Re: MSD Metro Operations  
Bancroft WTP; KPDES No.: KY0039021  
Discharge Monitoring Reports – September 2008**

Dear Ms. Prather

Attached is the Discharge Monitoring Reports (DMRs) for the Bancroft WTP; KPDES No.: KY0039021 for the month of September 2008.

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

Sincerely,

  
John Kessel  
Process Supervisor, East Region

JMK/Bancroft 0908

Enclosures

cc: C. Roth (DOW Louisville)  
T. Singleton  
P. Burgin  
R. Shaw



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

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

NAME **BANCROFT STP MSD**  
 ADDRESS **C/O CEDAR CREEK STP**  
**6405 CEDAR CREEK RD**  
**LOUISVILLE KY 40211**  
 FACILITY **BANCROFT STP MSD**  
 LOCATION **LOUISVILLE KY**  
 ATTN: **DENNIS THOMASSON, SR METRO OPS**

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

**KY00039021**  
**PERMIT NUMBER**

**001 1**  
**DISCHARGE NUMBER**

MINOR  
 (SUBR LV)  
 F - FINAL

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
08	09	01		08	09	30

SANITARY WASTEWATER  
EFFLUENT

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

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	*****	*****		7.3	*****	*****	( 19)	0	1/30	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	INST MIN	*****	*****	MG/L		ONCE/ MONTH	GRAB
PH	00400 1 0 0	*****	*****		6.4	*****	6.4	( 12)	0	1/30	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	MAXIMUM	BU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	00530 1 0 0	*****	*****	( 26)	*****	8.0	8.0	( 19)	0	1/30	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	NO WK AV	LB/0Y	*****	NO AVG	NO WK AV	MG/L		ONCE/ MONTH	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	00610 1 1 0	*****	*****	( 26)	*****	0.31	0.31	( 19)	0	1/30	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	NO WK AV	LB/0Y	*****	NO AVG	NO WK AV	MG/L		ONCE/ MONTH	COMPOS
PHOSPHORUS, TOTAL (AS P)	00665 1 0 0	*****	*****		*****	3.0	3.0	( 19)	0	1/30	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT	MG/L		ONCE/ MONTH	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	00050 1 0 0	*****	*****	( 02)	*****	*****	*****		0	1/30	1/2
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	ASD	*****	*****	*****	*****		ONCE/ MONTH	CONTINUED IN UOUS
CHLORINE, TOTAL RESIDUAL	00060 1 0 0	*****	*****		*****	<0.010	<0.010	( 19)	0	1/30	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	0.018	0.018	MG/L		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Eric Dir  
 H J Sch...  
 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  
 500 241-9193  
 AREA CODE NUMBER  
 DATE  
 08 10 27  
 YEAR MO DAY

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

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

NAME BANCROFT STP MSD  
ADDRESS C/O CEDAR CREEK STP  
3405 CEDAR CREEK RD  
LOUISVILLE KY 40211  
FACILITY BANCROFT STP MSD  
LOCATION LOUISVILLE KY  
ATTN: DENNIS THOMASSEN, SR METRO OPS

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

KY0009021  
PERMIT NUMBER

001 1  
DISCHARGE NUMBER

MINOR  
(SUBR LV)  
F - FINAL

JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
08	09	01		08	09	30

SANITARY WASTEWATER  
EFFLUENT

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

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	11.0	11.0	( 13)	0	1/30	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	100ML		ONCE / MONTH	GRAB
BOD, CARBONACEOUS 5 DAY, 20C 30082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.80	0.80	( 26)	*****	4.0	4.0	( 19)	0	1/30	Comp
	PERMIT REQUIREMENT	16.7 MG AVG	33.4 MG MK AV	LBS/DY	*****	25 MG AVG	50 MG MK AV	MG/L		ONCE / MONTH	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Exec Dir  
H.J. Schenck Jr  
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 241-9693  
DATE 08 15 27  
AREA CODE NUMBER YEAR MO DAY

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



Report Selections: Excluding PPI, CSO, Prob Code: BYPAS, Result: WUS, Act Code: DISDW, DISREV, DISSUS

<b>KPDES #</b> KY0039021	<b>Facility ID</b> MSD0290	<b>Treatment Plant Name</b> BANCROFT	<b>Receiving Stream of Treatment Plant</b> GOOSE CREEK	<b>Region</b> EAST	
<b>Facility Type</b> SPL Sewer Treatment Plant	<b>Facility ID</b> MSD0290	<b>Facility Address</b> 7610 OLD ORCHARD CIR	<b>If Pump Station, Name of Pump Station:</b>	<b>Receiving Stream</b> GOOSE 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 Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISDW: DRY WEATHER DISCHARGE	821512	09/04/08 09:00 AM	MARKS JR	BROWN	REPAIRED - ISSUE RESOLVED	09/19/08	BYPASS AT TREATMENT PLANT	DISCHARGE TO WATERS OF THE US	09/04/08 09:20 AM	

**Spot Inspections:**

Discharge Amount:	400 GAL
Cause:	CLARIFIER OVER LOADED
Clean Up:	NO DEBRIS OBSERVED MSD PERSONEL CLEANED AND SANITIZED AREA
Control Zone:	TEMPORARY SIGNS POSTED
Impact:	DISCOLORATION IN STREAM
Repair:	IN FUTURE START COLLECTOR AND START WASTEING DURING REFILLING OF CLARIFIER

**Notifications:**

09/04/08 01:29 PM	DISPUB	temporary signs posted around area of discharge
09/04/08 12:57 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov



Report Selections: Excluding PPI, CSO, Prob Code: BYPAS, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES #	Facility ID	Treatment Plant Name	Receiving Stream of Treatment Plant	Region
KY0039021 (Cont'd)	MSD0290	BANCROFT	GOOSE CREEK	EAST

  

Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISDW: DRY WEATHER DISCHARGE	824503	09/19/08 04:10 PM	MARKS JR	BROWN	REPAIRED - ISSUE RESOLVED	09/19/08	BYPASS AT TREATMENT PLANT	DISCHARGE TO WATERS OF THE US	09/19/08 05:00 PM	

**Spot Inspections:**

Discharge Amount:	900 GAL
Cause:	COLLECTOR DRIVE MALFUNCTIONED
Clean Up:	NO CLEAN UP REQUIRED
Control Zone:	TEMP SIGNS POSTED
Impact:	DISCOLORATION OF STREAM
Repair:	REPAIRED COLLECTOR DRIVE AND CLEANED OUT CHLORINE CONTACT CHAMBER

**Notifications:**

09/19/08 08:12 PM	DISPUB	public notified by temporary signs
09/19/08 12:57 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Total Facilities Printed: 4  
Total Work Orders Printed: 5



**MSD**

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

September 5, 2008

Mr. Charlie Roth, District Supervisor  
KY Division of Water  
Louisville Regional Office  
9116 Leesgate Road  
Louisville, KY 40222-5084

**Re: Bypass Report for the Bancroft – KPDES Permit KY0039021**

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 AM on September 05, 2008, referencing Work Order 821512 as a Bypass. This letter serves as a written report of the bypass as required by 401 KAR 5:065.

Provided below are the details of the bypass event:

- Description of the noncompliance and its cause: Solids where bypassed to creek due to bottom sludge collector not operating.
- Period of noncompliance: Starting 09:00 AM on September 04, 2008 and stopping 09:20 AM on September 04, 2008.
- Steps taken or planned to reduce, eliminate and prevent recurrence: Start bottom sludge collector during the startup of the clarifier.

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-241-9093, my cell phone at (502)-648-5984 or via email at [Kessel@msdlouky.org](mailto:Kessel@msdlouky.org).

Sincerely,

John Kessel  
Process Supervisor-Operations

cc: Gary Levy, KDEP  
Sean Ireland, EPA

eB File  
Paula Purifoy, MSD





**MSD**

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

September 22, 2008

Mr. Charlie Roth, District Supervisor  
KY Division of Water  
Louisville Regional Office  
9116 Leesgate Road  
Louisville, KY 40222-5084

**Re: Bypass Report for the Bancroft – KPDES Permit KY0039021**

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 AM on September 20, 2008, referencing Work Order 824503 as a Bypass. This letter serves as a written report of the bypass as required by 401 KAR 5:065.

Provided below are the details of the bypass event:

- Description of the noncompliance and its cause: Solids were bypassed to the creek due to electrical issues with the sludge collector.
- Period of noncompliance: Starting 04:10 PM on September 19, 2008 and stopping 05:00 PM on September 19, 2008.
- Steps taken or planned to reduce, eliminate and prevent recurrence: Had electrician reset the overloads on the electrical bucket.

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-241-9093, my cell phone at (502)-648-5984 or via email at [Kessel@msdlouky.org](mailto:Kessel@msdlouky.org).

Sincerely,

John Kessel  
Process Supervisor-Operations

cc: Gary Levy, KDEP  
Sean Ireland, EPA

eB File  
Paula Purifoy, MSD

