



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

January 14, 2010

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

Re: **MSD Metro Operations**
Bancroft WQTC; KPDES No.: KY0039021
Discharge Monitoring Reports – December 2009

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Bancroft WQTC; KPDES No.: KY0039021 for the month of December 2009.

There were no exceedences, overflow reports or Bypass reports to report this month.

If you have any questions concerning the attached DMRs, please contact me at (502)587-5856.

Sincerely,

D.J. Rheinlaender
Process Supervisor, East Region

DJR/Bancroft 0110

Enclosures

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



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

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

NAME BANCROFT WGTG MSD
 ADDRESS C/O CEDAR CREEK WGTG
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY BANCROFT WGTG MSD
 LOCATION LOUISVILLE KY
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

PERMIT NUMBER KY0009021
 DISCHARGE NUMBER 0011

MINOR (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER EFFLUENT
 *** NO DISCHARGE 1 1 ***

Form Approved.
 OMB No. 2040-0004

JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	12	01		07	12	01

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 EFFLUENT GROSS VALUE	*****	*****	*****	*****	9	*****	*****	MG/L	0	1/31	GR
PH	*****	*****	*****	*****	6.3	*****	*****	MG/L	0	1/31	GR
SOLIDS, TOTAL SUSPENDED 00500 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	7	*****	*****	MG/L	0	1/31	CP
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 2 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	0.2	*****	*****	MG/L	0	1/31	CP
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	3.6	*****	*****	MG/L	0	1/31	CP
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	50.010	*****	*****	MG/L	0	1/31	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Exec. Dir.
 H. J. Thomasson, Sr.
 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 502 544 1000
 DATE 10 / 1 / 14
 AREA CODE NUMBER YEAR MO DAY

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

NAME **BANCROFT WQTC MSD**
ADDRESS **C/O CEDAR CREEK WQTC**
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY **BANCROFT WQTC MSD**
LOCATION **LOUISVILLE KY**
ATTN: **DENNIS THOMASSON, SR METRO DPS**

KY0039021
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL
SANITARY WASTEWATER
EFFLUENT
*** NO DISCHARGE 1 1 ***

JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	10	01		07	10	01

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			
COLIFORM, FECAL GENERAL 74053 1 0 0 EFFLUENT GROSS VALUE		*****	*****		*****	1	1	100ML	0	1/31	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	#/100ML		ONCE/MONTH	GRAB
BOD, CARBONACEOUS 05 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE		0.5	0.5	(LB)	*****	3	3	100ML	0	1/31	CP
	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY	*****	MO AVG	MX WK AV	MG/L		ONCE/MONTH	COMPLS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. J. Slade
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
[Signature]

TELEPHONE: 502 546 6000
DATE: 10 / 1 / 14

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

Bancroft		Report for	Dec-09		Tot. Exc.=		0				
Tot. Flow=	0.753	Concentrations				Pounds					
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.		
12/1/09	0.02										
12/2/09	0.016										
12/3/09	0.02	7	3	0.22	1	1.168	0.500	0.037	3.59		
12/4/09	0.019										
12/5/09	0.022										
12/6/09	0.024										
12/7/09	0.023										
12/8/09	0.037										
12/9/09	0.026										
12/10/09	0.02										
12/11/09	0.02										
12/12/09	0.024										
12/13/09	0.028										
12/14/09	0.025										
12/15/09	0.021										
12/16/09	0.021										
12/17/09	0.021										
12/18/09	0.022										
12/19/09	0.026										
12/20/09	0.026										
12/21/09	0.026										
12/22/09	0.026										
12/23/09	0.026										
12/24/09	0.03										
12/25/09	0.028										
12/26/09	0.029										
12/27/09	0.027										
12/28/09	0.025										
12/29/09	0.024										
12/30/09	0.024										
12/31/09	0.027										
Average	0.024	7.00	3.00	0.22	1.00	1.17	0.50	0.04	3.59		
Maximum	0.037	7.00	3.00	0.22	1.00	1.17	0.50	0.04	3.59		
Exceed.	0	0	0	0	0	0	0	0	0		

BANCROFT STP MSC
C/O ERIC G. BRADY
4522 ALGONQUIN PA
LOUISVILLE KY
BANCROFT STP MSC
LOUISVILLE KY
ATTN: H. J. SCHARDI

OXYGEN, DISSOLVEI
(DO)
00300 1 0 0
EFFLUENT GROSS V
PH

00400 1 0 0
EFFLUENT GROSS V
SOLIDS, TOTAL
SUSPENDED

00530 1 0 0
EFFLUENT GROSS V
NITROGEN, AMMONI.
TOTAL (AS N)

00610 1 1 0
EFFLUENT GROSS V
FLOW, IN CONDUIT C
THRU TREATMENT F

50050 1 0 0
EFFLUENT GROSS V
CHLORINE, TOTAL
RESIDUAL

50060 1 0 0
EFFLUENT GROSS V
COLIFORM, FECAL
GENERAL

74055 1 0 0
EFFLUENT GROSS V
BOD, CARBONACEOI