



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

October 10, 2012

Ms. Cheryl Edwards
Kentucky Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

Re: MSD Metro Operations
Berrytown WQTC; KPDES No.: KY0036501
Discharge Monitoring Reports – September 2012

Dear Ms. Edwards:

Attached are the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Berrytown WQTC, KPDES No.: KY0036501 for the month of September 2012.

There were no exceedences, bypass or overflow reports.

If you have any questions concerning the attached DMRs, please contact me at (502) 239-7574.

Sincerely,

A handwritten signature in cursive script that reads "Duane V. Wright".

Duane V. Wright
Process Supervisor Central Region

DVW/Berrytown 9.12

Enclosures

cc: T. Singleton
R. Shaw



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

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

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

NAME: CEDAR CREEK WQTC
 ADDRESS: 8405 CEDAR CREEK RD
 LOUISVILLE, KY 40211

FACILITY: BERRYTOWN WQTC MSD

LOCATION: HEAFER RD
 LOUISVILLE, KY 40222

ATTN: DENNIS THOMASSON, SR METRO OPS

KY0036501

PERMIT NUMBER

001-2

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 40211

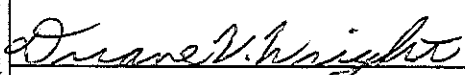
MINOR

(SUBR LV) JEFFE
 SANITARY WASTEWATER
 External Outfall

No Discharge ☐

MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM 09/01/2012		TO 09/30/2012	

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	*****	*****	*****	7	*****	*****		0	1/1	GR
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	7 INST MIN	*****	*****	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	*****	*****	*****	6	*****	7		0	1/1	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6 MINIMUM	*****	9 MAXIMUM	SU		Weekly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	1.4	3.3		*****	3	4		0	1/7	CP
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	18.8 30DA AVG	37.6 DAILY MX	lb/d	*****	30 30DA AVG	60 DAILY MX	mg/L		Weekly	COMPOS
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	0.3	0.7		*****	0.5	0.6		0	1/7	CP
00610 1 1 Effluent Gross	PERMIT REQUIREMENT	2.5 30DA AVG	5 DAILY MX	lb/d	*****	4 30DA AVG	8 DAILY MX	mg/L		Weekly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.069	0.206		*****	*****	*****	*****	0	CN	CN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. INST MAX	MGD	*****	*****	*****	*****		Continuous	CONTIN
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.010	<0.010		0	1/1	GR
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	.011 MO AVG	.019 DAILY MX	mg/L		Weekly	GRAB
Coliform, fecal general	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	2		0	1/7	GR
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30DA GEO	400 7 DA GEO	#/100mL		Weekly	GRAB

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 ensure 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
GREG L. HETZMAN INTERIM EXEC DIR. TYPED OR PRINTED			502 540 6000
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code NUMBER MM/DD/YYYY

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

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MINOR
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SANITARY WASTEWATER
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MONITORING PERIOD			
MM/DD/YYYY		MM/DD/YYYY	
FROM	09/01/2012	TO	09/30/2012

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
BOD, carbonaceous, 05 day, 20 C	SAMPLE MEASUREMENT	3.6	8.3		*****	6	8		0	1/2	CP
80082 1 0 Effluent Gross	PERMIT REQUIREMENT	18.8 30DA AVG	37.6 DAILY MX	lb/d	*****	30 30DA AVG	60 DAILY MX	mg/L		Weekly	COMPOS

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GREG C. HEITZMAN INTERIM EXEC. DIR.			502 5406000	10/19/2012	
TYPED OR PRINTED			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code

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

Berrytown		Report for		Sep-12		Tot. Exc.=		0			
Tot. Flow=		2.0582		Concentrations				Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.		
9/1/12	0.205										
9/2/12	0.206										
9/3/12	0.198	2	5	0.39		3.31	8.28	0.65	3.54		
9/4/12	0.172				2						
9/5/12	0.191										
9/6/12	0.088										
9/7/12	0.013										
9/8/12	0.000										
9/9/12	0.001	3	5	0.62		0.02	0.03	0.00	1.6		
9/10/12	0.001				2						
9/11/12	0.001										
9/12/12	0.001										
9/13/12	0.045										
9/14/12	0.046										
9/15/12	0.045										
9/16/12	0.049	4	7	0.39		1.65	2.89	0.16	2.84		
9/17/12	0.040				2						
9/18/12	0.048										
9/19/12	0.045										
9/20/12	0.046										
9/21/12	0.042										
9/22/12	0.043										
9/23/12	0.048	2	8	0.5		0.80	3.20	0.20	2.68		
9/24/12	0.038				2						
9/25/12	0.049										
9/26/12	0.065										
9/27/12	0.130										
9/28/12	0.079										
9/29/12	0.065										
9/30/12	0.058										
10/1/12											
Average	0.069	2.75	6.25	0.48	2.00	1.44	3.60	0.25	2.67		
Maximum	0.206	4.00	8.00	0.62	2.00	3.31	8.28	0.65	3.54		