



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

June 23, 2009

Carolena Bentley, DMR Coordinator
Kentucky Division of Water
200 Fair Oaks Lane, 4th Floor
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Chenoweth Hills WTP; KPDES No.: KY0029459
Discharge Monitoring Reports – May 2009**

Dear Ms. Bentley:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Chenoweth Hills WTP, KPDES No.: KY0029459 for the month of May 2009.

Also included is a copy of the Bypass letter and the Discharge Report.

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

Sincerely,

Duane V. Wright
Process Supervisor Central Region

DVW/Chenoweth Hills 0509

Enclosures

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



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



700 West Liberty Street
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May 12, 2009

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

Re: Bypass Report for the Chenoweth Hills STP – KPDES Permit KY0029459

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 07:45 AM on May 08, 2009, referencing Work Order 905614 as a rain event discharge. 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: Increased wet weather flow exceeded plant capacity. An estimated 21454 gallons biosolids washed through plant secondary system and entered plant chlorine contact channel. Peak plant flow rate for this time period was 0.686MGD. No negative visual impact of the plant effluent receiving stream was noticed.
- Period of noncompliance: Starting 07:44 AM on May 08, 2009 and stopping 08:46 AM on May 08, 2009.
- Steps taken or planned to reduce, eliminate and prevent recurrence: Reduce plant aeration timers during elevated plant flow situations.

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-239-7475, my cell phone at (502)-396-9142 or via email at wrightd@msdlouky.org.

Sincerely,

Duane V. Wright
Process Supervisor-Operations

cc: Gary Levy, KDEP
Paula Purifoy, MSD
eB File



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

NAME CHENOWETH HILLS STP MSD
ADDRESS 670 CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY CHENOWETH HILLS STP MSD
LOCATION JEFFERSONTOWN KY 40299
ATTN: DENNIS THOMASSON SR METRO OPS

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

KY0029457 PERMIT NUMBER
0011 DISCHARGE NUMBER

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	05	01		07	05	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)		*****	*****		7	*****	*****		0	1/17	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	INST MIN	*****	*****	MG/L			WEEKLY GRAB
PH		*****	*****		6.7	*****	7.0		0	1/17	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	MAXIMUM	PU			WEEKLY GRAB
POLYDISP. TOTAL SUSPENDED		*****	*****		*****	*****	*****		0	1/17	CO
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L			WEEKLY COMPOS
NITROGEN, AMMONIA TOTAL (AS N)		*****	*****		*****	*****	*****		0	1/17	CO
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L			WEEKLY COMPOS
PHOSPHORUS, TOTAL (AS P)		*****	*****		*****	*****	*****		0	1/17	CO
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L			WEEKLY COMPOS
FLOW IN CONDUIT OR THRU TREATMENT PLANT		*****	*****		*****	*****	*****		0	1/17	CO
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD	*****	*****	*****	*****			CONTINUOUS
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	*****	*****		0	1/17	CO
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	0.011 30DA AVG	0.019 DAILY MX	MG/L			WEEKLY GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Dennis Thomasson Sr
EXECUTIVE DIRECTOR
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
Dennis Thomasson Sr

TELEPHONE 502 540 1600
DATE 01/17/07
AREA CODE NUMBER YEAR MO DAY

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

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME **SPRINGWATER HILLS STP MSD**
ADDRESS **C/O CEDAR CREEK STP
6401 CEDAR CREEK RD
LOUISVILLE KY 40211**
FACILITY **SPRINGWATER HILLS STP MSD**
LOCATION **JEFFERSONTOWN KY 40279**
ATTN **DENNIS THOMASSEN SR METRO OPS**

PERMIT NUMBER **KY0029459**
DISCHARGE NUMBER **0001**

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

MONITORING PERIOD
FROM **07 05 01** TO **07 05 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			
GENERAL EFFLUENT GROSS VALUE		*****	*****		*****	1	1	4 LB	0	01/07	C-R
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	#/30DA GEG		WEEKLY	GRAB
5 DAY BOD EFFLUENT GROSS VALUE		3	6	1.35	*****	45	5	1.19	0	01/07	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	50	100		*****	30	60	30DA AVG		WEEKLY	COMPOS
	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. SHURDICK JR.
EXECUTIVE DIRECTOR
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
Dennis Thomassen Sr

TELEPHONE **502 574-1010**
DATE **07 06 26**
AREA CODE NUMBER YEAR MO DAY

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

Chenoweth Hills		Report for	May-09			Tot. Exc.= 0				
Tot. Flow=	3.704		Concentrations				Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	
5/1/09	0.122									
5/2/09	0.151									
5/3/09	0.145									
5/4/09	0.134	13	5	0.06	1	14.52828	5.5878	0.067054	0.871	
5/5/09	0.11									
5/6/09	0.146									
5/7/09	0.156									
5/8/09	0.242									
5/9/09	0.256									
5/10/09	0.15									
5/11/09	0.111	5	3	0.055	1	4.6287	2.77722	0.050916	0.28	
5/12/09	0.09									
5/13/09	0.1									
5/14/09	0.124									
5/15/09	0.102									
5/16/09	0.128									
5/17/09	0.122									
5/18/09	0.101	11	3	0.11	1	9.26574	2.52702	0.092657	0.989	
5/19/09	0.092									
5/20/09	0.088									
5/21/09	0.083									
5/22/09	0.084									
5/23/09	0.096									
5/24/09	0.095									
5/25/09	0.117									
5/26/09	0.085									
5/27/09	0.095	7	3	0.9	1	5.5461	2.3769	0.71307	0.831	
5/28/09	0.088									
5/29/09	0.087									
5/30/09	0.099									
5/31/09	0.105									
Average	0.119	9.00	3.50	0.28	1.00	8.49	3.32	0.23	0.74	
Maximum	0.256	13.00	5.00	0.90	1.00	14.53	5.59	0.71	0.99	



Metropolitan Sewer District

IMSAST0004
Overflow Report

Initiated May 01, 2009 12:00 AM thru May 31, 2009 11:59 PM

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

KPDES # KY0029459	Facility ID MSD0263	Water Quality Treatment Center CHENOWETH HILLS	Receiving Stream of Treatment Center CHENOWETH RUN	Region CENT
Facility Type SPL Sewer Treatment Plant	Facility ID MSD0263	Facility Address 4305 ST RENE CT	If Pump Station, Name of Pump Station: CHENOWETH RUN	Discharge to STREAM

<u>Activity Code / Description</u>	<u>WQ #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Status Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISREV: RAIN EVENT DISCHARGE	905814	05/08/09 07:44 AM	SINGLETON	TUTTLE	DOCUMENTED	09/27/02	BYPASS AT WQTC	UNAUTHORIZED DISCHARGE - WATERS	05/08/09 08:46 AM	

Spot Inspections:

Discharge Amount:	21,454 GAL
Cause:	LACK OF SYSTEM CAPACITY
Clean Up:	MSD PERSONNEL CLEANED & SANITIZED THE AREA.
Control Zone:	TEMPORARY SIGNS PLACED AROUND THE AREA.
Impact:	SOLIDS OBSERVED.
Repair:	STORM FLOW RECEDED

Notifications:

05/08/09 07:44 AM	DISPUB	Temporary signs placed around the area.
05/08/09 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to Ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov