



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

August 16, 2011

Ms. Cheryl Edwards
Kentucky Division of Water
200 Fair Oaks Lane, 4th Floor
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Chenoweth Hills WQTC; KPDES No.: KY0029459
Discharge Monitoring Reports – July 2011**

Dear Ms. Edwards:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Chenoweth Hills WQTC, KPDES No.: KY0029459 for the month of July 2011.

There were no exceedences, bypasses or overflows.

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 7.11

Enclosures

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



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

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

NAME CHENOWETH HILLS WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
3405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY CHENOWETH HILLS WQTC MSD
LOCATION JEFFERSONTOWN KY 40399
ATTN: DENNIS THOMASSEN, SR METRO EPS

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

KY0029454
PERMIT NUMBER

001 1
DISCHARGE NUMBER

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

JEFF

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

FROM

TO

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			
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7					0 1/1	GR
	PERMIT REQUIREMENT	*****	*****	****	INST MIN			MG/L			
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		6.2		7.0			0 1/1	GR
	PERMIT REQUIREMENT	*****	*****	****	MINIMUM		MAXIMUM	EU			
SOLIDS, TOTAL SUSPENDED 00500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	4	9	LBS/DY		5	10			0 1/7	CP
	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.34	0.5	LBS/DY		0.4	0.6			0 1/3	CP
	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L			
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	4.2	4.5	(19)		0 1/7	CP
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MD AVG	REPORT DAILY MX	MG/L		WEEKLY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00685 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.092	0.121	(G3)	*****	*****	*****			0	CN CN
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		CONTIN	CONTIN
		30DA AVG	INST MAX	MGD				****		UDUS	
CHLORINE, TOTAL RESIDUAL 00240 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.010	<0.010	(19)		0 1/1	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	0.011	0.019			WEEKLY	BRAS
		*****	*****	****	*****	30DA AVG	DAILY MX	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H.J. SCHARDEIN, JR.
FUEL DIR
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
DATE
502 540 6000 11 8 22
AREA CODE NUMBER YEAR MO DAY

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

NAME CHENOWETH HILLS WGTG MSD
 ADDRESS C/O CEDAR CREEK WGTG
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY CHENOWETH HILLS WGTG MSD
 LOCATION JEFFERSONTOWN KY 40299

PERMIT NUMBER
 KY0000458

DISCHARGE NUMBER
 003 1

MINOR (SUBR LV)
 F - FINAL

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
11	07	01		11	07	31

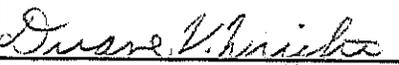
SANITARY WASTEWATER EFFLUENT

*** 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			
COLIFORM, FECAL GENERAL 10000 1 0 0 EFFLUENT CONC VALUE	SAMPLE MEASUREMENT	*****	*****		*****	24	98	(10)	0	1/7	GR
	PERMIT REQUIREMENT	*****	*****	***	*****	200	400	100PL		WEEKLY	GRAB
COD, CARBONACEOUS 50000 1 0 0 EFFLUENT CONC VALUE	SAMPLE MEASUREMENT	3	4	(26)	*****	4	5	(19)	0	1/7	LP
	PERMIT REQUIREMENT	50	100	100/DA	*****	30	60	MS/L		WEEKLY	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H. J. SCHARDLW, JR.
 EXEC. DIR.
 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 502 540 1000
 DATE 11 8 22
 AREA CODE NUMBER YEAR MO DAY

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

Chenoweth Hills		Report for	Jul-11		Tot. Exc.= 0				
Tot. Flow=	2.847	Concentrations							
Date	Flow	TSS	BOD	NH3	Fecal	TSS	Pounds BOD	NH3	Tot. Phos.
7/1/11	0.075								
7/2/11	0.091								
7/3/11	0.086								
7/4/11	0.085	3	4	0.45	44	2.1267	2.8356	0.319005	4.05
7/5/11	0.091								
7/6/11	0.083								
7/7/11	0.075								
7/8/11	0.087								
7/9/11	0.092								
7/10/11	0.093	3	4	0.34	1	2.32686	3.10248	0.263711	3.83
7/11/11	0.081								
7/12/11	0.103								
7/13/11	0.111								
7/14/11	0.087								
7/15/11	0.089								
7/16/11	0.097								
7/17/11	0.1	2	3	0.34	98	1.668	2.502	0.28356	4.28
7/18/11	0.092								
7/19/11	0.094								
7/20/11	0.121								
7/21/11	0.091								
7/22/11	0.086								
7/23/11	0.099								
7/24/11	0.104	10	5	0.56	71	8.6736	4.3368	0.485722	4.48
7/25/11	0.086								
7/26/11	0.087								
7/27/11	0.1								
7/28/11	0.086								
7/29/11	0.085								
7/30/11	0.094								
7/31/11	0.096								
Average	0.092	4.50	4.00	0.42	23.52	3.70	3.19	0.34	4.16
Maximum	0.121	10.00	5.00	0.56	98.00	8.67	4.34	0.49	4.48