



MSD

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

July 25, 2007

Ms. Kathy Thurman
Kentucky Division of Water
14 Reilly Road
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Lake Forest WTP (aka Chenoweth Run WTP)
KPDES No.: KY0042226
Discharge Monitoring Reports – June 2007**

Dear Ms. Thurman:

Attached is the Discharge Monitoring Reports (DMRs) for the Lake Forest WTP (aka Chenoweth Run WTP), KPDES No.: KY0042226 for the month of June 2007.

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

Sincerely,

John Kessel
Process Supervisor, East Region

JMK/ Lake Forest 0607

Enclosures

cc: M. Mudd (DOW Louisville)
E. Brady
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 LAKE FOREST MSD
ADDRESS LOUISVILLE/JEFF MSD
LOUISVILLE KY 40203
FACILITY LAKE FOREST MSD
LOCATION LOUISVILLE KY 40223
ATTN: J. B. CHANDAIN JR. EXEC DIR

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

KY0042225
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUVER LV)
F - FINAL
SANITARY WASTEWATER

Form Approved.
OMB No. 2040-0004

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	07	08	01		07	08	30

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DISSOLVED (DO)	SAMPLE MEASUREMENT	***	***		8.0	***	***	(19)	0	1/3	Grab
PERMIT REQUIREMENT		***	***	***	INST MIN	***	***	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	***	***		6.8	***	7.0	(12)	0	1/3	Grab
PERMIT REQUIREMENT		***	***	***	MINIMUM	***	MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	13.81	20.22	(26)	***	4.50	6.00	(19)	0	1/3	Grab
PERMIT REQUIREMENT		118	236	***	***	30	50	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.75	1.27	(36)	***	0.25	0.39	(19)	0	1/3	Grab
PERMIT REQUIREMENT		7.84	15.7	***	***	2	4	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	***	***		***	4.77	5.38	(19)	0	1/3	Grab
PERMIT REQUIREMENT		***	***	***	***	REPORT	REPORT	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.329	0.537	(03)	***	***	***		0	C/N	C/N
PERMIT REQUIREMENT		REPORT	REPORT	***	***	***	***	***		CONTINUOUS	MON
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	***	***		***	20.010	20.010	(19)	0	1/3	Grab
PERMIT REQUIREMENT		***	***	***	***	0.011	0.019	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	***	***		***	***	***				
PERMIT REQUIREMENT		***	***	***	***	***	***				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

H.J. Shandain
Exec 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

TELEPHONE

DATE

509 241-9093 07 07 03
AREA CODE NUMBER YEAR MO DAY

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

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

NAME LAKE FOREST MSD
 ADDRESS LOUISVILLE/JEFF MSD
 200 W LIBERTY ST
 LOUISVILLE KY 40202
 FACILITY LAKE FOREST MSD
 LOCATION LOUISVILLE KY 40223
 ATTN H. SCHARDEIN JR. EXEC DIR

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

KY0042226
 PERMIT NUMBER
 001 2
 DISCHARGE NUMBER

MINOR
 (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER

JEFF

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
 07 06 01 07 06 30

*** NO DISCHARGE 1 1 ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	1.68	2.0	(13)	0	1/2	G.D
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	3000		WEEKLY	GRAB
EFFLUENT, GROSS VALUE 3000 LBS/DAY/1000	SAMPLE MEASUREMENT	7.67	10.64	(25)	*****	2.75	4.0	(19)	0	1/2	Comp
	PERMIT REQUIREMENT	39.2	78.4		*****	10	20	1000L		WEEKLY	COMPOUSE
EFFLUENT, GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

241 9093
 AREA CODE NUMBER
 07 07 23
 YEAR MO DAY

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



**MSD Louisville and Jefferson County
Metropolitan Sewer District**

IMSAST0004

Discharge Report

Jun 01, 2007 12:00 AM thru Jun 30, 2007 11:59 PM

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

KPDES #
KY0042226

Facility ID
MSD0403

Treatment Plant Name
LAKE FOREST

Receiving Stream of Treatment Plant
CHENOWETH RUN

Region
EAST

Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to
SMN Sewer Main	80581B-AG	611 WOODLAKE DR			

<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Problem</u>	<u>Resolution</u>	<u>Completed</u>
DISDW: DRY WEATHER DISCHARGE	678585	06/18/07 12:45 PM	NOBLE MARKS JR	STRUCTURAL FAILURE	DISCHARGE TO WATERS OF THE US	06/18/07 02:15 PM

Spot Inspections:

Discharge Amount:	450 GAL
Cause:	FORCE MAIN BREAK
Clean Up:	API CALLED TO ASSIST MSD PERSONEL IN CLEAN UP AT THE SITE OF DISCHARGE
Control Zone:	SIGNS POSTED AND AREA WAS TAPED OFF
Impact:	SOILDS AND DISCOLORATION OF STREAM
Repair:	MAC CONSTRUCTION CALLED TO REPAIR FORCE MAIN AND RETURN TO SERVICE

Notifications:

06/18/07 01:00 PM	Email notification of unauthorized discharge sent to Harkins.John@epamail.epa.gov and eppc.ert@ky.gov
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Total Facilities Printed: 4