

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

December 18, 2008

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

Re: MSD Metro Operations

Lake Forest WTP (aka Chenoweth Run WTP)

KPDES No.: KY0042226

Discharge Monitoring Reports - November 2008

Dear Ms. Bentley:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Lake Forest WTP (aka Chenoweth Run WTP), KPDES No.: KY0042226 for the month of November 2008. There was one violation for the month for exceeding daily ammonia limits. Field tests taken the day of sampling yielded results lower than 1.0. We have been unable to determine the cause of the violation. We will continue to operate the plant in accordance of KPDES limits and notify the KDOW of any future findings in this incident.

There are no Discharge Reports as there were no discharges for the month.

If you have any questions concerning the attached DMR's, please contact me at (502) 239-7695.

Sincerely,

Kevin D. Ries

Process Supervisor Central Region

Kew D. Res

KDR/ Lake Forest 1108

Enclosures

cc: C. Roth (DOW Louisville)

T. Singleton

R. Shaw



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

MONITORING PERIOD

TO

YEAR

DAY

Form Approved. OMB No. 2040-0004

E LAKE FOREST MSD

ADDRESS C/O CEDAR CREEK STP

8405 CEDAR CREEK RD LOUISVILLE

KY 40211

FACILITY LAWE FOREST MSD LOCATION LOUISVILLE

ATTN. DENNIS THOMASSON, SR METRO OF 8

KYOO42226
PERMIT NUMBER

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YEAR

FROM

OO1 2 DISCHARGE NUMBER

DAY

MO.

(SUBR LV) F - FINAL

JEFFS

SANITARY WASTEWATER

EFFLUENT

MIMOR

*** NO DISCHARGE 1___ 1 **

NOTE: Read Instructions before completing this form

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				110.	FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	TYPE
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00810 1 2 0	MEASUREMENT	9.4	32.6			3	3%		1	107	CP
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NAME/TITLE PRINCIPAL EXECUTIVE		under penalty of law that thi	s document and all attaches				WATER LINE				
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H.I. Schanlen	that qualified personnel pro d. Based on my inquiry of th	e person or persons who ma	nage the system	12	es o o						
Exec. Director	persons directly responsible d is, to the best of my knowle	for gathering the information	on, the information				ماریسریم		08 12	, _, _	
TYPED OR PRINTED	are that there are significant g the possibility of fine and in	penalties for submitting fals	e information.	SIGNATURE OF PRINCIPAL EXECUTIVE 502 54t - 6000					$\frac{2}{z}$		
OMMENTS AND EXPLANATION OF	ANY VIOLATIONS	/Defending of the fille in	aprasonment for knowing vi	omuons.	OFFICER OR AUTHORIZED AGENT AREA CODE NUME					YEAR MO	DAY

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

See over letter fis explication of Daily Max NHz violation.

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

MONITORING PERIOD

TO

YEAR

DAY

Form Approved. OMB No. 2040-0004

NAME LAKE FUREST MSD

ADDRESS C/O CEDAR CREEK STP

SACE CEDAN CREEK AD LOUISVILLE

KY 40211

FACILITY LAKE FUREST MED

LOCATION LOUISVILLE MY 40223 ATTN: DENNIS THOMASSON, SR METRO OPS KY0042226 PERMIT NUMBER

MO

YEAR

FROM

001 2 DISCHARGE NUMBER

DAY.

MO.

MINOR

(SUBR LV) F - FINAL

SANITARY WASTEWATER EFFLUENT

*** NO DISCHARGE I

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING QUALITY OR CONCENTRATION			ENTRATION			FREQUENCY			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	TYPE
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80082 1 0 0 Effluent gross value	PERMIT REQUIREMENT	37. Ž 300A AVG		LH5/DY	本家食食食	JO JODA AVG	DAILY M	l .	, , , , , , , , , , , , , , , , , , ,	WEEKLY	LUMPO
	SAMPLE MEASUREMENT				***************************************						
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•	PERMIT REQUIREMENT		***************************************						-		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER H.J. Schooles Exec. Director TYPED OR PRINTED COMMENTS AND EXPLANATION OF ANY VIOLATION		by under penalty of law that this document and all attachments were red under my direction or supervision in accordance with a system designed are that qualified personnel properly gather and evaluate the information tied. Based on my inquiry of the person or persons who manage the system, se persons directly responsible for gathering the information, the information tied is, to the best of my knowledge and belief, true, accurate, and complete, ware that there are significant penalties for submitting false information, ing the possibility of fine and imprisonment for knowing violations.			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHON	IE	DA'	<u>re</u>
								2 540-6	(0 <u>(</u>)	08 17	2 22
								EA NUMBER	3	YEAR M	O DAY

LAKE FOREST Tot. Flow= 9.93		Report for	Nov-08 Concentrations		Tot. Exc.=		Violation		
Date	Flow	TSS			-	700	Pounds		Conc.
11/1/08	0.27	100	BOD	NH3	Fecal	TSS	BOD	инз	T Phos
11/2/08	0.306								
11/3/08	0.447	6	3	0.67	4	00.000	44.464		
11/4/08	0.345	U	3	0.07	1	22.368	11.184	2.498	4.89
11/5/08	0.286								
11/6/08	0.265								
11/7/08	0.265								
11/8/08	0.345								
11/9/08	0.357								
11/10/08	0.335	7	3	0.67	1	19.557	0 202	4.070	4.00
11/11/08	0.276	•	Ū	0.07	•	19.557	8.382	1.872	4.88
11/12/08	0.296			•					
11/13/08	0.301								
11/14/08	0.277								
11/15/08	0.38								
11/16/08	0.433								
11/17/08	0.333	7	5	0.22	1	19.441	13.886	0.611	4.5
11/18/08	0.527				•	10,441	10.000	0.011	4.5
11/19/08	0.352								
11/20/08	0.282								
11/21/08	0.278								
11/22/08	0.337								
11/23/08	0.332								
11/24/08	0.355	12	3	11	1	35.528	8.882	32.568	4.49
11/25/08	0.334						0.002	02.000	T. T O
11/26/08	0.329								
11/27/08	0.422								
11/28/08	0.313								
11/29/08	0.23								
11/30/08	0.322								
12/1/08									
Average	0.331	8.00	3.50	3.14	1.00	24.22	10.58	9.39	4.69
Maximum	0.527	12.00	5.00	11.00	1.00	35.53	13.89	32.57	4.89
Exceed.	30	0	0	1	0	0	0	1	0
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