



MSD

*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

KDR/ Lake Forest 1108

Enclosures

cc: C. Roth (DOW Louisville)
T. Singleton
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 C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211

FACILITY LAKE FOREST MSD
LOCATION LOUISVILLE KY 40223

ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0042226
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL

Form Approved
OMB No. 2040-0004

JEFFS

SANITARY WASTEWATER
EFFLUENT

*** 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 | | | |
| OXYGEN, DISSOLVED (DO) | SAMPLE MEASUREMENT | ***** | ***** | | 9 | ***** | ***** | (19) | 0 | 0 1/2 | CR |
| 00300 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | INST MIN | ***** | ***** | MG/L | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | | | | | | | |
| PH | SAMPLE MEASUREMENT | ***** | ***** | | 6.6 | ***** | 6.7 | (12) | 0 | 0 1/2 | CR |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 | ***** | 7.0 | BU | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | | | | |
| SOLIDS, TOTAL SUSPENDED | SAMPLE MEASUREMENT | 24 | 36 | (26) | ***** | 8 | 12 | (19) | 0 | 0 1/2 | CP |
| 00530 1 0 0 | PERMIT REQUIREMENT | 118 | 200 | | ***** | 30 | 50 | MG/L | | WEEKLY | COMPOS |
| EFFLUENT GROSS VALUE | | 30DA AVG | DAILY MX | LBS/DY | | 30DA AVG | DAILY MX | | | | |
| NITROGEN, AMMONIA TOTAL (AS N) | SAMPLE MEASUREMENT | 9.4 | 32.6 | (26) | ***** | 3 | 11 | (19) | 1 | 0 1/2 | CP |
| 00610 1 2 0 | PERMIT REQUIREMENT | 19.6 | 39.2 | | ***** | 5 | 10 | MG/L | | WEEKLY | COMPOS |
| EFFLUENT GROSS VALUE | | 30DA AVG | DAILY MX | LBS/DY | | 30DA AVG | DAILY MX | | | | |
| PHOSPHORUS, TOTAL (AS P) | SAMPLE MEASUREMENT | ***** | ***** | | ***** | 5 | 5 | (19) | 0 | 0 1/2 | CP |
| 00665 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | REPORT | REPORT | MG/L | | WEEKLY | COMPOS |
| EFFLUENT GROSS VALUE | | | | **** | | 30DA AVG | DAILY MX | | | | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT | SAMPLE MEASUREMENT | 0.331 | 0.527 | (06) | ***** | ***** | ***** | | 0 | CN | CN |
| 00050 1 0 0 | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | ***** | ***** | **** | | CONTINUOUS | |
| EFFLUENT GROSS VALUE | | 30DA AVG | INST MAX | MGD | | | | **** | | VOUS | |
| CHLORINE, TOTAL RESIDUAL | SAMPLE MEASUREMENT | ***** | ***** | | ***** | <0.010 | <0.010 | (19) | 0 | 0 1/2 | GR |
| 00060 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 0.011 | 0.014 | MG/L | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | | 30DA AVG | DAILY MX | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

H.J. Scharden
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

502 541-6000
AREA CODE NUMBER

08 12 22
YEAR MO DAY

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

See cover letter for explanation of Daily Max NH3 violation.

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

NAME LAKE FOREST MSD
ADDRESS C/O CEDAR CREEK STP
8403 CEDAR CREEK RD
LOUISVILLE KY 40211

FACILITY LAKE FOREST MSD
LOCATION LOUISVILLE KY 40223

ATTN: DANNIS THOMASSON, SR METRO OPS

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

KY0042226
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL

SANITARY WASTEWATER
EFFLUENT

*** NO DISCHARGE () ***

NOTE: Read Instructions before completing this form.

JEFF

| 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 | 1 | (13) | | 0/7 | GR |
| 74055 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | 200 | 400 | */ | | WEEKLY | WABS |
| 800, CARBONACEOUS 05 DAY, 20C | SAMPLE MEASUREMENT | 10.6 | 13.9 | (26) | ***** | 4 | 5 | (19) | | 0/7 | CP |
| 80082 1 0 0 EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | 39.2 | 76.4 | | ***** | 10 | 20 | | | 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. Schindler
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: D. Schindler

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

502 540-6000

AREA CODE NUMBER

DATE

08 12 22

YEAR MO DAY

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

| LAKE FOREST | | Report for | Nov-08 | | Tot. Exc.= | 2 | Violation | | |
|-------------|-------|------------|----------------|-------|------------|--------|-----------|--------|--------|
| Tot. Flow= | 9.93 | | Concentrations | | | | Pounds | | Conc. |
| Date | Flow | TSS | BOD | NH3 | Fecal | TSS | BOD | NH3 | T Phos |
| 11/1/08 | 0.27 | | | | | | | | |
| 11/2/08 | 0.306 | | | | | | | | |
| 11/3/08 | 0.447 | 6 | 3 | 0.67 | 1 | 22.368 | 11.184 | 2.498 | 4.89 |
| 11/4/08 | 0.345 | | | | | | | | |
| 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 | 8.382 | 1.872 | 4.88 |
| 11/11/08 | 0.276 | | | | | | | | |
| 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 | | | | | | | | |
| 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 | | | | | | | | |
| 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 |