



MSD

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

November 26, 2007

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

**Re: MSD Metro Operations
Glenview Bluff WTP
KPDES No.: KY0044261
Discharge Monitoring Reports – October 2007**

Dear Ms. Thurman:

Attached is the Discharge Monitoring Reports (DMRs) for the Glenview Bluff WTP, KPDES No.: KY0044261 for the Fourth quarter of 2007.

If you have any questions concerning the attached DMRs, please contact me at (502)540-6035.

Sincerely,

John Kessel
Process Supervisor, East Region

JMK/Glenview Bluff 1007

Enclosures

cc: C. Roth (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

ADDRESS C/O CEDAR CREEK STP
4515 CEDAR CREEK RD

LOUISVILLE KY 40211

FACILITY C/O CEDAR CREEK STP MSD

LOCATION LOUISVILLE KY 40222

DATE 01/12/01

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

PERMIT NUMBER KY00042241

DISCHARGE NUMBER 001 1

MINOR
(SUBR LV)
F - FINAL

SANITARY WASTEWATER
EFFLUENT

*** 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			
DISSOLVED (DB)	SAMPLE MEASUREMENT	*****	*****		8.8	*****	*****	(19)	0	1/2	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	7 INST MIN	*****	*****	MG/L		DIRTY GRAB	
	SAMPLE MEASUREMENT	*****	*****		6.7	*****	6.7	(12)	0	1/2	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		DIRTY GRAB	
POLYMER TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.20	0.20	(26)	*****	6.0	6.0	(19)	0	1/2	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.50 30DA AVG	5.00 DAILY MX	LB5/DY	*****	30 30DA AVG	50 DAILY MX	MG/L		DIRTY COMPOS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Exec. Director
H.J. Schackin
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
502 341-9093
DATE
07 11 20

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

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

NAME ALUMINUM BLUFF SLP NSD
 ADDRESS C/O CEDAR CREEK STP
 7405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY ALUMINUM BLUFF SLP NSD
 LOCATION LOUISVILLE KY 40222
 FRANKIE THOMAS

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

KY00044241
 PERMIT NUMBER

0011 1
 DISCHARGE NUMBER

MINOR
 (SUBR LV)
 T - FINAL

Form Approved
 OMB No. 2040-0004

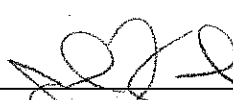
JEFF

SANITARY WASTEWATER
 EFFLUENT

*** NO DISCHARGE 1 1 ***

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
1. IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.004	0.005	(03)	*****	*****	*****		0	9/17	Inst.
2. EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT INST MAX	MGD	*****	*****	*****	*****		WEEKLY	INSTAN
3. GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	1.0	1.0	(13)	0	1/92	Grab
4. EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	200	400	*/		QTRLY	GRAB
5. 1.5% BOD/5 DAY, 20C	SAMPLE MEASUREMENT	0.10	0.10	(26)	*****	3.0	3.0	(19)	0	1/92	Comp
6. EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.50	5.00	LB5/DY	*****	30	60	MG/L		QTRLY	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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Exec Director H.J. Schneider TYPED OR PRINTED			502 241-	07	11	20

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

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

NAME

ADDRESS C/O CEDAR CREEK STP

FACILITY CLEVELAND BLUFF STP MSD

LOCATION LOUISVILLE KY 40222

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

PERMIT NUMBER KY0044261

DISCHARGE NUMBER 001

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL (AS APPL)	SAMPLE MEASUREMENT	0.004	0.004	(26)	*****	0.11	0.11	(19)	0	1/92	Comp
	PERMIT REQUIREMENT	0.33	0.26		*****	4	8			DAILY COMPOS	
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX	LB/DT		30DA AVG	DAILY MX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA CODE

NUMBER

YEAR

MO

DAY

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