



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

February 23, 2010

Ms. Carolena Bentley
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

Re: MSD Metro Operations
Hunting Creek north; WQTC KPDES No.: KY0029106
Discharge Monitoring Reports –January 2010

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Hunting Creek North WQTC, KPDES No.: KY0029106 for the month of January 2010.

There are no exceedences , overflow reports or bypass reports for this month.

If you have any questions concerning the attached DMRs, please contact me at (502) 587-5856.

Sincerely,

A handwritten signature in black ink, appearing to read "D.J. Rheinlaender". Below the signature, the name "Kessel" is printed in a small, sans-serif font.

D.J.Rheinlaender
Process Supervisor - Operations

DJR/HCN 0210

Enclosures

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



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

ADDRESS
C/O CEDAR CREEK WQTC
3400 CEDAR CREEK RD
LOUISVILLE KY 40211

FACILITY
LOCATION
PROSPECT
ATTN: DENNIS THOMASSEN SR. METRO OPS

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

PERMIT NUMBER KY0025106			DISCHARGE NUMBER 001 1			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
10	01	01	TO	10	01	01

MINOR
(SUBR LV)
F - FINAL
MUNICIPAL DISCHARGE
EFFLUENT
*** NO DISCHARGE ***

Form Approved.
OMB No. 2040-0004

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 (OC)	SAMPLE MEASUREMENT	*****	*****		8	*****	*****	(19)	0	1/7	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	INST CHIN	*****	*****	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.7	*****	8.0	(12)	0	1/7	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	MINIMUM	*****	MAXIMUM	MG/L		WEEKLY	GRAB
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	230	337	(26)	*****	137	202	(19)	0	1/7	CP
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT NO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT NO AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPLIE
SUSPENDED SOLIDS	SAMPLE MEASUREMENT	15	25	(26)	*****	8	12	(19)	0	1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT NO AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPLIE
NITROGEN AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	39	64	(26)	*****	25	46	(19)	0	1/7	CP
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT NO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT NO AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPLIE
NITROGEN AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	2	8	(26)	*****	2	6	(19)	0	1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT NO AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPLIE
PHOSPHORUS TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	0.62	0.89	(19)	0	1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT NO AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPLIE

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Exec Dir
H. J. Schauben Jr
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	596-6060	10	02	26
AREA CODE	NUMBER	YEAR	MO	DAY

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

NAME

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2001	01	01		TO	2001	01

NOTE: Read Instructions before completing this form

TELEPHONE		DATE		
402	346-5666	10	02	26
AREA CODE	NUMBER	YEAR	MO	DAY

Hunting Creek North

Date	Flow	INFLUENT			Pounds		
		TSS	Concentration BOD	NH3	TSS	BOD	NH3
1/1/2010	0.072						
1/2/2010	0.164						
1/3/2010	0.178						
1/4/2010	0.188						
1/5/2010	0.168	174	166	46	243.795	232.586	64.452
1/6/2010	0.164						
1/7/2010	0.175						
1/8/2010	0.172						
1/9/2010	0.173						
1/10/2010	0.172						
1/11/2010	0.166						
1/12/2010	0.156	74	186	23	96.277	241.993	29.924
1/13/2010	0.157						
1/14/2010	0.181						
1/15/2010	0.16						
1/16/2010	0.161						
1/17/2010	0.189						
1/18/2010	0.176						
1/19/2010	0.165						
1/20/2010	0.2	202	250	20	336.936	417.000	33.360
1/21/2010	0.516						
1/22/2010	0.36						
1/23/2010	0.273						
1/24/2010	0.467						
1/25/2010	0.421						
1/26/2010	0.302	96	116	12	241.793	292.167	30.224
1/27/2010	0.255						
1/28/2010	0.23						
1/29/2010	0.203						
1/30/2010	0.209						
1/31/2010	0.208						
Average	0.219	137	180	25.25	229.700	295.937	39.490
Maximum	0.516	202	250	46.00	336.9	417.00	64.452

Hunting Creek North

[illegible]