



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

July 18, 2011

Cheryl Edwards
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Hunting Creek South WQTC; KPDES No.: KY 0029114
Discharge Monitoring Reports for June of 2011**

Dear Ms. Edwards:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Hunting Creek South WQTC; KPDES No.: KY0029114 for the month of June 2011.

There were no exceedences, overflows or bypasses to report 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 that reads "Kevin Thompson". The signature is written in a cursive style with a large, sweeping "K" and "T".

Kevin Thompson
Process Supervisor, East Region

RM/Hunting Creek South 6 11

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 HUNTING CREEK S WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 6405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY HUNTING CREEK S WQTC MSD
 LOCATION PROSPECT KY 40057
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

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

Form Approved.
 OMB No. 2040-0004

AY0027114	001
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	7					17/30	GR
PH	PERMIT REQUIREMENT	*****	*****	****	6.9		7.3			17/30	GR
SOLIDS, TOTAL SUSPENDED 00530 0 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT	REPORT	LBS/DY	MINIMUM		MAXIMUM	30		1/7	CP
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MD AVG	MX WK AV	LBS/DY				MG/L		1/7	CP
NITROGEN, AMMONIA TOTAL (AS N) 00610 0 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT	REPORT	LBS/DY				MG/L		1/7	CP
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MD AVG	MX WK AV	LBS/DY				MG/L		1/7	CP
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****		0.5	0.8			5/30	CP

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 HJ, Schardein JR
 Executive 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 Kevin Thompson
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 502 546-6000
 DATE: 11 07 19
 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 HUNTING CREEK S WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY HUNTING CREEK S WQTC MSD
 LOCATION PROSPECT KY 40089
 ATTN: DENNIS THOMASSEN, SR METRO OPS

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

Form Approved
 OMB No. 2040-0004

XY0027114
 PERMIT NUMBER

UW1 1
 DISCHARGE NUMBER

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

JENFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
11	07	11		11	07	19

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW IN CONDUIT OR THRU TREATMENT PLANT 80050 1 0 0		0.186	0.361	(G3)	*****	*****	*****				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MAX	MGD	*****	*****	*****	****		VALUE	
CHLORINE, TOTAL RESIDUAL 80060 1 0 0		*****	*****		*****	0.010	<0.010	(17)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.011	0.017				
COLIFORM, FECAL GENERAL 74055 1 0 0		*****	*****		*****	1	1	(13)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	200	400	1/			
BOD, CARBONACEOUS 5 DAY, 20C 80082 8 0 0		216	293	(25)	*****	148	221	(17)			
RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT				
BOD, CARBONACEOUS 5 DAY, 20C 80082 1 0 0		11	12	(20)	*****	8	9	(17)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MG AVG	MG WA AV	LBS/DY	*****	MG AVG	MG WA AV	MG/L			
BOD, CARB-S DAY, 20C 80091 8 0 0		*****	*****		*****	95	*****	(25)			
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	PER-CENT		MONTH	
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 8 0 0		*****	*****		*****	94	*****	(25)			
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	PER-CENT		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H.S. Schardein Jr
 Executive 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.

Ken Thomassen
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 502 540-6000
 DATE
 11 07 19
 AREA CODE NUMBER YEAR MO DAY

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

Hunting Creek South

Date	Flow	INFLUENT Concentration			Pounds		
		TSS	BOD	NH3	TSS	BOD	NH3
6/1/2011	0.192						
6/2/2011	0.181	192	131	18	289.832	197.750	27.172
6/3/2011	0.172						
6/4/2011	0.177						
6/5/2011	0.189						
6/6/2011	0.134						
6/7/2011	0.154						
6/8/2011	0.154						
6/9/2011	0.152	114	92	20	144.516	116.627	25.354
6/10/2011	0.141						
6/11/2011	0.146						
6/12/2011	0.155						
6/13/2011	0.141						
6/14/2011	0.143						
6/15/2011	0.109						
6/16/2011	0.159	372	221	20	493.294	293.059	26.521
6/17/2011	0.187						
6/18/2011	0.192						
6/19/2011	0.252						
6/20/2011	0.227						
6/21/2011	0.21						
6/22/2011	0.252						
6/23/2011	0.361						
6/24/2011	0.23						
6/25/2011	0.194						
6/26/2011	0.222						
6/27/2011	0.209	240	148	15	418.334	257.973	26.146
6/28/2011	0.19						
6/29/2011	0.176						
6/30/2011	0.167						
7/1/2011							
Average	0.186	230	148	18.25	336.494	216.352	26.298
Maximum	0.361	372	221	20.00	493.3	293.06	27.172