



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: Jeffersontown Treatment Plant, KPDES No: KY0025194
Discharge Monitoring Report
October 2007

Dear Ms. Thurman:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) report for the Jeffersontown Wastewater Treatment Plant, for the month of October 2007. There was one exception for effluent BOD removal, and two each for TSS and BOD percent removal. These were a direct result of the rain event of October 22 & 23 when over eight inches of rain fell. If you have any questions concerning the attached DMR's, please contact me at (502) 239-7695.

Sincerely,

James E. Porter Jr.
Process Supervisor Central Region

JEP/Jeffersontown 1007.doc

Enclosures

cc: M. Roth (DOW Louisville)
E. Brady
R. Shaw
P. Burgin
T. Singleton



Beneficial Use of Louisville's Biosolids
www.louisvillegreen.com

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

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

Form Approved.
OMB No. 2040-0004

NAME: H.S. JEFFERSONTOWN STP
ADDRESS: 2405 CEDAR CREEK RD
LOUISVILLE, KY 40291

PERMIT NUMBER: KY0025194

DISCHARGE NUMBER: 0012

MAJOR (SUBR LV): F - FINAL
JEFFRE

FACILITY LOCATION: H.S. JEFFERSONTOWN STP
JEFFERSONTOWN, KY 40299

MONITORING PERIOD					
FROM	YEAR	MO	DAY	TO	DAY
	07	10	01		07
					31

FLOW: 800 TSS 80 PH
EFFLUENT
*** NO DISCHARGE ***
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			
PHENOL DISSOLVED (CO)	*****	*****	*****		8.1	*****	*****	(19)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	INST MIN	7	*****	*****	MG/L		THREE/WK	
EFFLUENT GROSS VALUE	*****	*****	*****		6.8	*****	7.9	(12)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MINIMUM	5	*****	MAXIMUM	50		THREE/WK	
TOTAL SUSPENDED SOLIDS RAW SEW/INFLUENT	*****	*****	*****	(26)	*****	*****	*****	(19)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MG/DY	*****	REPORT	REPORT	MG/L		THREE/COMP	
TOTAL SUSPENDED SOLIDS RAW SEW/INFLUENT	*****	*****	*****	(26)	*****	*****	*****	(17)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1000	1501	MG/DY	*****	30	45	MG/L		THREE/COMP	
TOTAL AMMONIA (AS N) RAW SEW/INFLUENT	*****	*****	*****	(26)	*****	*****	*****	(19)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MG/DY	*****	REPORT	REPORT	MG/L		THREE/COMP	
TOTAL AMMONIA (AS N) EFFLUENT GROSS VALUE	*****	*****	*****	(26)	*****	*****	*****	(19)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	133	200	MG/DY	*****	4	5	MG/L		THREE/COMP	
TOTAL PHOSPHORUS (AS P) EFFLUENT GROSS VALUE	*****	*****	*****	(26)	*****	*****	*****	(19)	0	3/1	COMP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	33	50	MG/DY	*****	1.0	1.5	MG/L		THREE/COMP	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H.J. SCHROEDER JR.
BY: [Signature]
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]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 502-540-6000
DATE: 07/11/21
AREA CODE: 502
NUMBER: 540-6000
YEAR: 07
MO: 11
DAY: 21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
USE MG/DY AVG FLOW, PH, TSS REMV, REST IN MINIMUM COLUMN.

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

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

MAJOR
(SUBR LV)
F - FINAL

NAME H.S. JEFFERSONTOWN 51F
ADDRESS 3405 CEDAR CREEK RD
JEFFERSONVILLE KY 40291

PERMIT NUMBER KY002184

DISCHARGE NUMBER 0012

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	10	01	TO	07	10	31

FLOW 800 TSS 80 PH
EFFLUENT

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

FACILITY H.S. JEFFERSONTOWN 51F
LOCATION JEFFERSONTOWN KY 40299
ATTN: KRISTE NEWTON

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
THRU TREATMENT PLANT		3.89	17.88	(03)	*****	*****	*****			0	0/H	0/H	
EFFLUENT GROSS VALUE		REPORT NO AVG	REPORT MX WK AV	MSD	*****	*****	*****	****			CONTIN	CONTIN	
GENERAL		*****	*****		*****	9	35.86	(13)		0	3/1	Case	
EFFLUENT GROSS VALUE		*****	*****	***	*****	200	400 #/				FREE/	GRAB	
RAW SEW/INFLUENT		4281	6200	(25)	*****	168	248	(19)		0	3/1	Cont	
RAW SEW/INFLUENT		REPORT NO AVG	REPORT MX WK AV	LBS/DY	*****	REPORT NO AVG	REPORT MX WK AV	MG/L			FREE/	COMPOS	
EFFLUENT GROSS VALUE		205	676	(26)	*****	4	11	(19)		1	3/1	Cont	
EFFLUENT GROSS VALUE		587	1001	LBS/DY	*****	20	30				FREE/	COMPOS	
PERCENT REMOVAL		*****	*****		*****	94.6	*****	*****	(23)		2	1/31	Case
PERCENT REMOVAL		*****	*****	***	*****	55	*****	*****	PER-		ONCE/	CALC TO	
PERCENT REMOVAL		*****	*****	***	*****	92.1	*****	*****	(23)		2	1/31	Case
PERCENT REMOVAL		*****	*****	***	*****	55	*****	*****	PER-		ONCE/	CALC TO	
					MO MIN				CENT		MONTH		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H.S. SCHAUBERT 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 PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
James E. Burt

TELEPHONE 502-540-6000
DATE 07 11 21
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SEE MO AVG FOR 800 TSS REMV REPT IN MINIMUM COLUMN.

NAME OF TREATMENT PLANT JEFFERSONTOWN WTP
 KPDES PERMIT NUMBER KY0025194

COUNTY JEFFERSON
 PLANT CAPACITY 4.0 MGD

MONTH OF: October 2007
 RECEIVING STREAM CHENOWETH RUN

DATE	TOTAL FLOW (MILLION GALLONS)	RAW SEWAGE		pH		SETTLEABLE SOLIDS (mg/L)			DISSOLVED OXYGEN (mg/L)			SUSPENDED SOLIDS (mg/L)			5 DAY CBOD (mg/L)			ACTIVATED SLUDGE			AERATION BASIN						SLUDGE HANDLING						FINAL			
		GRIT REMOVED (CUBIC FEET)	SCREENINGS (CUBIC FEET)	RAW	FINAL	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	STREAM ABOVE	FINAL EFFLUENT	STREAM BELOW	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	GAL/DAY X 1000	MLSS X 1000	MLVSS X 1000	WASTED	DISSOLVED OXYGEN (mg/L)	MLSS (mg/L) x 1000	MLVSS (mg/L) X 1000	SETTLED SLUDGE VOLUME		RAW			HAULED			TOTAL PHOS. (mg/L)	NH3-N (mg/L)	FECAL COLIFORM (COLONIES/100ML)	
																									30 MIN.	60 MIN.	GALLONS X 1000	% DRY SOLIDS	% VOLATILE SOLIDS	% DRY SOLIDS	% VOLATILE SOLIDS	WITHDRAWN GALLONS X 1000				
1	2.72										404		5	183		2	1.42	6425	44		6	2.89	2.03	150	150									0.29	0.90	78
2	2.60			7.4	7.7						266		5	196		2	1.36	6825	39		5.8	3.03	1.95	150	150									0.28	1.20	3
3	2.58	3	3	7.4	7.8						124		8	125		2	1.31	6750	40		5.8	2.42	2.41	180	180									0.35	2.50	3
4	2.51			7.2	6.8												1.32	7495	38		5.8	3.91	2.06	170	170											
5	2.25																1.57	6105	47		5.6	2.96	1.96	180	170											
6	2.36																1.28		40					180	170											
7	2.53																1.43		38					170	160											
8	2.60										19		6	117		2	1.44	5120	40		5.8	3.17	2.08	180	170								0.31	0.56	3	
9	2.37			6.3	7.4						275		5	270		2	1.31	5395	42		5.6	3.07	1.96	180	180								0.30	0.10	7	
10	2.59	3	3	7.1	7.5						338		7	185		2	1.44	6570	42		5.6	2.65	1.96	180	170								0.30	0.28	5	
11	2.42			7.0	7.4												1.34	6040	42		5.8	2.58	2.29	200	180											
12	2.22																1.43	6415	42		5.6	2.9	1.91	180	170											
13	2.34																1.34		42					170	150											
14	2.42																1.45		42					180	170											
15	2.50										280		12	203		3	1.45	6755	42		5.4	2.77	2.21	180	180								0.40	1.80	3	
16	3.18			7.4	7.5						364		8	296		2	1.25	4920	42		5	3.13	2.18	150	150									2.50	3	
17	3.19	3	3	7.0	7.4						330		8	245		2	1.33	6825	42		5.8	3.32	2.32	190	180								1.30	7		
18	4.58			6.9	7.4												1.36	9405	42		5.6	3.47	2.38	200	180											
19	3.40																1.96	8930	42		5.8	2.7	2.16	170	170											
20	2.80																1.28		42					180	170											
21	2.95																1.3		42					170	170											
22	8.82																1.33	7145	42		5.8	3.06	2	190	180											
23	17.88																2.05	9999	42		6.2	2.28	1.56	150	150											
24	9.48	3	3								96		15	56		15	0.96	9989	42		6	2.32	1.63	170	160									0.95	53	
25	5.84			6.8	6.9						111		20	64		16	3.73	9620	52		5.8	2.97	2	150	150									1.70	290	
26	3.99			6.4	7.4												2.81	8140	42		5.8	2.41	1.61	150	150											
27	4.10																3.41		40					160	150											
28	3.77										113		8	72		2	3.27		46					170	160								0.10	3		
29	3.30			7.0	7.3												2.99	5850	26		5.6	1.44	1.26	160	150											
30	3.18																2.99	6065	40		5.8	2.07	1.43	160	160											
31	3.13	3	3														3.38	7105	40		5.4	1.71	1.18	180	170											
Tot.	####	15	15														56.29																			
Avg.	3.89	3	3	7.0	7.4						8.4		9	168		4	1.816	7126	41.42		5.713	2.77	1.936	171.9	165.2								0.32	1.14	9	

RESIDENTIAL
 COMMERCIAL
 INDUSTRIAL

INDUSTRIAL WASTE POPULATION EQUIVALENT
 37051 32000 35020 3.32
 FLOW CBOD TSS 2.7

OPERATOR _____ CERT. NO. _____

TOTAL NUMBER OF SEWER CONNECTIONS 0
 SEWER CONNECTIONS 0 X 4 = 0 SEWERED POPULATION

PLANT TELEPHONE _____