



Louisville and Jefferson County Metropolitan Sewer District  
700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
[www.msdlouky.org](http://www.msdlouky.org)

May 25, 2011

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

**Re: MSD Metro Operations  
Ken Carla WQTC; KPDES No.: KY0022497  
Discharge Monitoring Reports for April, 2011**

Dear Ms. Edwards:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Ken Carla WQTC; KPDES No.: KY0022497 for the month of April, 2011.

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 cursive script that reads "Richard Mills".

Richard. Mills  
Process Supervisor, East Region

RM/Ken Carla 4.11

Enclosures

cc. C. Roth (DOW Louisville)  
T. Singleton  
R. Shaw



*Beneficial Use of Louisville's Biosolids*  
[www.louisvillegreen.com](http://www.louisvillegreen.com)

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

NAME KEN CARLA WOTC MSD  
 ADDRESS C/O CEDAR CREEK WOTC  
 8405 CEDAR CREEK RD  
 LOUISVILLE KY 40211  
 FACILITY KEN CARLA WOTC MSD  
 LOCATION LOUISVILLE KY 00000  
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0022497  
 PERMIT NUMBER

001 1  
 DISCHARGE NUMBER

MINOR (SUBR LV)  
 F - FINAL JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
11	04	01		11	04	05

SANITARY WASTEWATER 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			
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	8	*****	*****	( 19 )	0	1/30	GR
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	2 INST MIN	*****	*****	MG/L		1/30	CP
PH 00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.9	*****	*****	( 12 )	0	1/30	GR
SOLIDS, TOTAL SUSPENDED 00520 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	25	*****	*****	( 19 )	0	1/30	CP
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	0.5	*****	*****	( 19 )	0	1/30	CP
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	0.5	*****	*****	( 19 )	0	1/30	CP
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	0.025	*****	*****	( 03 )	0	CN	CN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 H.J. Schwabert Jr  
 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.

Richard Mullis  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 502 540-6000  
 DATE 11 5 25  
 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 KEN CARLA WQTC MSD  
 ADDRESS C/O CEDAR CREEK WQTC  
 6405 CEDAR CREEK RD  
 LOUISVILLE KY 40211

FACILITY KEN CARLA WQTC MSD

LOCATION LOUISVILLE KY 40000

ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0022497  
 PERMIT NUMBER

001 1  
 DISCHARGE NUMBER

MINOR  
 (SUBR LV)

F - FINAL

SANITARY WASTEWATER  
 EFFLUENT

\*\*\* NO DISCHARGE  \*\*\*

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JEFF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
11	09	01		11	09	30

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL GENERAL		*****	*****		*****	7	7	( 13 )		1/30	GR
74055 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	200	400	1/		ONCE /	30 DAY
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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*Richard Mills*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 502 540-6000  
 DATE 11 5 25  
 AREA CODE NUMBER YEAR MO DAY

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

Ken Carla		Report for	Apr-11		Tot. Exc.=		0		
Tot. Flow=	0.150867	Concentrations				Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.
4/1/11	0.002								
4/2/11	0.002								
4/3/11	0.002								
4/4/11	0.004								
4/5/11	0.002								
4/6/11	0.002								
4/7/11	0.002								
4/8/11	0.003								
4/9/11	0.004								
4/10/11	0.003								
4/11/11	0.007	25	5	0.45	7	1.460	0.292	0.026	0.526
4/12/11	0.015								
4/13/11	0.003								
4/14/11	0.003								
4/15/11	0.005								
4/16/11	0.003								
4/17/11	0.003								
4/18/11	0.003								
4/19/11	0.004								
4/20/11	0.003								
4/21/11	0.002								
4/22/11	0.003								
4/23/11	0.02								
4/24/11	0.013								
4/25/11	0.006								
4/26/11	0.003								
4/27/11	0.016								
4/28/11	0.004								
4/29/11	0.002								
4/30/11	0.002								
5/1/11									
Average	0.005	25.00	5.00	0.45	7.00	1.46	0.29	0.03	0.53
Maximum	0.020	25.00	5.00	0.45	7.00	1.46	0.29	0.03	0.53