



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

August 11, 2011

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

**Re: MSD Metro Operations
Ken Carla WQTC; KPDES No.: KY 0022497
Discharge Monitoring Reports for July of 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 July 2011.

There were 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 "Kevin Thompson", written over a horizontal line.

Kevin Thompson
Process Supervisor, East Region

RM/Ken Carla 7.11

Enclosures

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



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

NAME: KEM CARLA WSTC MSD
 ADDRESS: 270 CEDAR CREEK WSTC
 1905 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY: KEM CARLA WSTC MSD
 LOCATION: LOUISVILLE KY 00000
 ATTN: DENNIS THOMASSEN SR METRO OPS

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

PERMIT NUMBER: KY0022497
 DISCHARGE NUMBER: 001

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

MONITORING PERIOD
 FROM 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	*****	*****	***	7.0	*****	*****	MG/L	8	30/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	INLET MIN	*****	*****	MG/L		MONTH	
BOD, 5-DAY (20 DEG. C)	00310 1 0 0	0.17	0.17	LBS/DY	*****	5	5	MG/L	8	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
PH	00400 1 0 0	*****	*****	***	6.5	*****	7.2	BU	8	30/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM	BU		MONTH	
SOLIDS, TOTAL SUSPENDED	00500 1 0 0	0.43	1.43	LBS/DY	*****	13	13	MG/L	8	1/31	GRCP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
NITROGEN, AMMONIA TOTAL (AS N)	00610 1 0 0	0.01	0.01	LBS/DY	*****	0.3	0.3	MG/L	8	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
PHOSPHORUS, TOTAL (AS P)	00625 1 0 0	*****	*****	***	*****	0.42	0.42	MG/L	8	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30DA AVG	DAILY MX	MG/L		MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	00700 1 0 0	1.003	0.005	MGD	*****	*****	*****	MGD	8	CN	CN
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INLET MAX	MGD	*****	*****	*****	MGD		DAYS	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H.J. Scharlein 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
 Ken Thomas

TELEPHONE: 502-540-6600
 DATE: 11/08/15
 AREA CODE: 502
 NUMBER: 540-6600
 YEAR: 11
 MO: 08
 DAY: 15

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

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

NAME KEN CARLA WOTC MGD

ADDRESS 070 CEDAR CREEK WOTC

8405 CEDAR CREEK RD

LOUISVILLE

KY 40211

FACILITY KEN CARLA WOTC MGD

LOCATION LOUISVILLE

KY 40000

ATTN: DENNIS THOMASSEN, SR METRO OPS

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

WY022477
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MINOR

(SUBR LV)

F - FINAL

SANITARY WASTEWATER

EFFLUENT

*** NO DISCHARGE ***

Form Approved.
OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO.	DAY	TO	YEAR	MO.	DAY

NOTE: Read Instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
GENERAL EFFLUENT GROSS VALUE						2	2		8	1/31 MONTH	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H.J. Schardein JR
Executive Director
TYPED OR PRINTED

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Ken Thomas
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
502 540-6000
DATE
11 08 15

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

