



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)

June 15, 2012

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 May 2012.**


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 May 2012.

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,

  
Kevin Thompson  
Process Supervisor, East Region

KT/Ken Carla 05/12.

Enclosures

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



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

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 THOMASSEN, SR METRO DPE

KY0022497  
PERMIT NUMBER

001 1  
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
12	06	04		12	06	04

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

JEFF

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	*****	*****	*****	*****	8	*****	*****	MG/L	19	1/1	GR
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	0.11	0.11	LBS/D	*****	2	2	MG/L	19	1/31	CP	
PH	*****	*****	*****	*****	6.8	8.2	SU	12	1/1	GR	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	0.54	0.54	LBS/D	*****	10	10	MG/L	19	1/31	CP	
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	0.02	0.02	LBS/D	*****	0.3	0.3	MG/L	19	1/31	CP	
PHOSPHORUS, TOTAL (AS P) 00645 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	0.38	0.58	MG/L	19	2/31	CP	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	0.004	0.008	MGD	*****	*****	*****	*****	*****	*****	CN	CN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Greg C. Heitzman  
Interim 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 Thomas*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 502 540-6000  
DATE: 12 06 15  
AREA CODE: 502  
NUMBER: 540-6000  
YEAR: 12  
MO: 06  
DAY: 15

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

NAME: KEN CARLA WQTC MSD  
ADDRESS: C/O CEDAR CREEK WQTC  
8405 CEDAR CREEK RD  
LOUISVILLE KY 40211  
FACILITY: KEN CARLA WQTC MSD  
LOCATION: LOUISVILLE KY 40000  
ATTN: DENNIS THOMASSEN, SR METRO OPS

KY0022497  
PERMIT NUMBER

001 1  
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
12	05	01		12	05	31

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

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			
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALU		*****	*****		*****	3	3	( 13)		1/31	GR
		*****	*****	****	*****	200	400	*/		ONCE /	SNAB
						30DA GEC	7 DA GEC	100ML		MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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TELEPHONE: 502 540-6000  
DATE: 12 06 15  
AREA CODE: 502 NUMBER: 540-6000 YEAR: 12 MO: 06 DAY: 15

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

