



MSD

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)

December 19, 2007

Ms. Kathy Thurman  
Kentucky Division of Water  
14 Reilly Road  
Frankfort, Kentucky 40601

**Re: MSD Metro Operations  
Lake of the Woods WTP; KPDES No.: KY0044342  
Discharge Monitoring Reports –November 2007**

Dear Ms. Thurman:

Attached is the Discharge Monitoring Reports (DMRs) for the Lake of the Woods WTP; KPDES No.: KY0044342 for the month of November 2007.  
If you have any questions concerning the attached DMRs, please contact me at (502)239-7695.

Sincerely,

James E. Porter Jr.  
Process Supervisor - Operations

JEP/Lake of the Woods 1107

Enclosures

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



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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME LAKE OF THE WOODS SUBD MSD

ADDRESS 2405 CEDAR CREEK RD  
LOUISVILLE KY 40291

FACILITY LAKE OF THE WOODS SUBD MSD  
LOCATION LOUISVILLE KY 40299  
DANIEL THOMAS

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

HY0044342  
PERMIT NUMBER  
0012  
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	11	01		07	11	30

MINDR  
(SUBR LV)  
7 - FINAL  
SANITARY WASTEWATER  
EFFLUENT  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				9.0			(19)	0	1/20	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				INST MIN			MG/L		ONCE/MONTH	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.8		6.8	(12)	0	1/20	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				MINIMUM		MAXIMUM	SU		ONCE/MONTH	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.07	2.07	(26)		8.00	8.00	(19)	0	1/20	COMB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LB/DY		30DA AVG	DAILY MX	MG/L		ONCE/MONTH	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.56	0.56	(26)		2.18	2.18	(19)	0	1/20	COMB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LB/DY		30DA AVG	DAILY MX	MG/L		ONCE/MONTH	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					2.68	2.68	(19)	0	1/20	COMB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT					REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/MONTH	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.029	1.074	(03)					0	1/20	INST
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD						WEEK-DAYS	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					1.00	1.00	(19)	0	1/20	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT					30DA GED	7 DA GED	100ML		ONCE/MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
H. J. SERRAVALLO 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. Port

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
502	546-6000	07	12	18

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

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

NAME LAKE OF THE WOODS SUBD MSD

ADDRESS 8405 CEDAR CREEK RD

LOUISVILLE

KY 40291

FACILITY LAKE OF THE WOODS SUBD MSD

LOCATION LOUISVILLE

KY 40299

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MINOR

(SUDR LV)

F - FINAL

SANITARY WASTEWATER

EFFLUENT

\*\*\* NO DISCHARGE ( ) \*\*\*

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL CARBONATE EQUIV 35 DAY, 200 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.81	1.81	(26)	*****	7.00	7.00	(19)	0	1/20	comb
	PERMIT REQUIREMENT	11.0 30DA AVG	22.0 DAILY MX	LB/DY	*****	30 30DA AVG	60 DAILY MX	MG/L		ONCE / MONTH	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										

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H. J. SCHUBERT JR.

EXECUTIVE DIRECTOR

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

540-6000

AREA CODE

NUMBER

DATE

07 12 18

YEAR

MO

DAY

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