



MSD

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

June 26, 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 –May 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 May 2007.
If you have any questions concerning the attached DMRs, please contact me at (502)239-7695.

Sincerely,

James E. Porter
Process Supervisor - Operations

JEP/Lake of the Woods 0507

Enclosures

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



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

ERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME LAKE OF THE WOODS SUBD MSD
 ADDRESS 8405 CEDAR CREEK RD
 LOUISVILLE KY 40291

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

AY0094342
 PERMIT NUMBER
 0012
 DISCHARGE NUMBER

MINOR
 (SUBP LV)
 F - FINAL
 SANITARY WASTEWATER
 EFFLUENT

JEFF

ACILITY LAKE OF THE WOODS SUBD MSD
 LOCATION LOUISVILLE KY 40299
 ATTN: DEBBIE NEWTON

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

*** NO DISCHARGE 1 ***

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			
XYGEN, DISSOLVED (DO)		*****	*****		7.0	*****	*****	(17)		1/31	GRAB
30300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	INST MIN	*****	*****	MG/L		MONTH	
30400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		6.6	*****	6.6	(12)		1/31	GRAB
30400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM	SU		MONTH	
30500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	3.50	3.50	(26)		15.00	15.00	(17)		1/31	COMB
30500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
30610 1 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.38	0.38	(25)		1.62	1.62	(17)		1/31	COMB
30610 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
30625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					1.60	1.60	(17)		1/31	COMB
30625 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	MO AVG	DAILY MX	MG/L		MONTH	
30950 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.033	0.050	(69)				***		9/11	C11
30950 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD	*****	*****	*****	****		DAYS	
74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					1.00	1.00	(12)		1/31	GRAB
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30DA GEO	7 DA GEO	100ML		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H. J. SANDERSON 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.

James E. Port
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 502 540 6000
 AREA CODE NUMBER
 DATE
 07 6 25
 YEAR MO DAY

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

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

KY0044342
 PERMIT NUMBER

0012
 DISCHARGE NUMBER

MINOR
 (SURR LV)
 F - FINAL
 SANITARY WASTEWATER
 EFFLUENT

JW/PFL

FACILITY LAKE OF THE WOODS SUBD MSD
 LOCATION LOUISVILLE KY 40299
 ATTN: DEBBIE NEWTON

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY
07	05	01				

*** 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			
100% CARBONACEOUS 25 DAY D5C 30000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.70	0.70	(20)	*****	3.00	3.00	(19)	0	1/31	Comp
	PERMIT REQUIREMENT	11.0 30DA AVG	22.0 DAILY MX	LBS/DY	*****	30 30DA AVG	50 DAILY MX	MG/L		MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H.S. SCHMIDT JR
 EXECUTIVE DIRECTOR
 TYPED OR PRINTED

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James E. Butler
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
502 545 6000		07	6	25
AREA CODE	NUMBER	YEAR	MO	DAY

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