

MSD

Metropolitan Sewer District

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

January 24, 2011

Ms. Crystal Thompson
Kentucky Division of Water
200 Fair Oaks Lane, 4th Floor
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Lake of the Woods WQTC; KPDES No.: KY0044342
Discharge Monitoring Reports –December 2010**

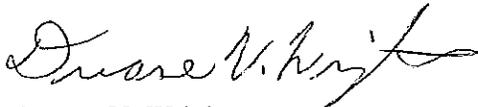
Dear Ms. Thompson:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Lake of the Woods WQTC; KPDES No.: KY0044342 for the month of December 2010.

There were no exceedences, bypasses or overflow reports.

If you have any questions concerning the attached DMRs, please contact me at (502)239-7574.

Sincerely,



Duane V. Wright
Process Supervisor Central Region

DVW/Lake of the Woods 12.10

Enclosures

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



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

NAME LAKE OF THE WOODS WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 6405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY LAKE OF THE WOODS WQTC MSD
 LOCATION LOUISVILLE KY 40297
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0044342
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

MINOR (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER EFFLUENT
 *** NO DISCHARGE 1/1/91 ***

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
10	12	31		10	12	31

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)	*****	*****	*****		8	*****	*****	(1)	0	0/31	GR
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	7	*****	*****	NO/L		INCE/ MONTH	GRAD
PH	*****	*****	*****		6.9	*****	*****	(12)	0	0/31	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	MINIMUM		MAXIMUM	SU
SOLIDS, TOTAL SUSPENDED	*****	*****	*****	(26)	*****	10	10	(19)	0	0/31	CP
00500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	11.0	22.0	LBS/DY	30DA AVG	DAILY MX	DAILY MX	MG/L		INCE/ MONTH	COMPLUS
NITROGEN, AMMONIA TOTAL (AS N)	*****	*****	*****	(26)	*****	6	6	(19)	0	0/31	CP
00810 1 2 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.67	7.34	LBS/DY	30DA AVG	DAILY MX	DAILY MX	MG/L		INCE/ MONTH	COMPLUS
PHOSPHORUS, TOTAL (AS P)	*****	*****	*****		*****	2.2	2.2	(19)	0	0/31	CP
00640 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	MG/L		INCE/ MONTH	COMPLUS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	*****	(03)	*****	*****	*****		0	CN	CN
00050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	30DA AVG	INST MAX	INST MAX	MGD		INCE/ MONTH	COMPLUS
CHLORINE, TOTAL RESIDUAL	*****	*****	*****		*****	<0.010	<0.010	(19)	0	0/31	GR
00060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.011	0.017	MG/L		INCE/ MONTH	GRAD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H.J. SCHARDEIN, 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


TELEPHONE
 502 5406000
 DATE
 11 01 27

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

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

NAME LAKE OF THE WOODS WOTC MSD

ADDRESS C/O CEDAR CREEK WOTC

5405 CEDAR CREEK RD

LOUISVILLE

KY 40211

FACILITY LAKE OF THE WOODS WOTC MSD

LOCATION LOUISVILLE KY 40299

ATTN: DANNIS THOMASSEN, SR METRO DPS

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

KY0044342
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUBR LV)

F - FINAL

SANITARY WASTEWATER

EFFLUENT

*** NO DISCHARGE 1 ***

JEFFE

Form Approved.
OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	10	12	01		10	12	01

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			
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	32	32	(13)	0	0/31	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	#/100ML		ONCE / MONTH	
BOD, CARBONACEOUS 5 DAY, 20C 90082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.5	1.5	(28)	*****	8	8	(19)	0	0/31	CP
	PERMIT REQUIREMENT	11.0	22.0		*****	30	60	MG/L		ONCE / MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. J. SCHARDEIN, JR.
EXECUTIVE DIRECTOR
TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Danniss Thomassen, Sr.

TELEPHONE
502.540.6000
DATE
11 01 27
AREA CODE NUMBER YEAR MO DAY

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

Lake of the Woods		Report for	Dec-10		Tot. Exc.=		0			
Tot. Flow=	1.097		Concentrations				Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	
12/1/10	0.116									
12/2/10	0.072									
12/3/10	0.057									
12/4/10	0.045									
12/5/10	0.042									
12/6/10	0.055									
12/7/10	0.05									
12/8/10	0.021									
12/9/10	0.022	10	8	5.5	32	1.835	1.468	1.009	2.2	
12/10/10	0.021									
12/11/10	0.023									
12/12/10	0.039									
12/13/10	0.036									
12/14/10	0.029									
12/15/10	0.02									
12/16/10	0.03									
12/17/10	0.03									
12/18/10	0.023									
12/19/10	0.027									
12/20/10	0.027									
12/21/10	0.028									
12/22/10	0.029									
12/23/10	0.027									
12/24/10	0.026									
12/25/10	0.027									
12/26/10	0.023									
12/27/10	0.023									
12/28/10	0.023									
12/29/10	0.023									
12/30/10	0.041									
12/31/10	0.042									
Average	0.035	10.00	8.00	5.50	32.00	1.83	1.47	1.01	2.20	
Maximum	0.116	10.00	8.00	5.50	32.00	1.83	1.47	1.01	2.20	