



MSD

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

June 25, 2007

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

**Re: MSD Metro Operations
Timberlake WTP; KPDES No.: KY0043087
Discharge Monitoring Reports – May 2007**

Dear Ms. Thurman:

Attached is the Discharge Monitoring Reports (DMRs) for the Timberlake WTP, KPDES No.: KY0043087 for the month of May 2007.

If you have any questions concerning the attached DMRs, please contact me at (502)241-9093.

Sincerely,

John Kessel
Process Supervisor, East Region

JK/Timberlake 0507

Enclosures

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



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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME MSD TINNERLAKE STP
 ADDRESS C/O LOUISVILLE/JEFF CO MSD
 4522 ALBUQUIN PARK
 LOUISVILLE KY 40211-2497
 FACILITY MSD TINNERLAKE STP
 LOCATION PROSPECT KY 40057
 ATTN: ALBA E NOVAK, OPER MGR

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

KY0043087
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

MINOR (SUBR LV)
 T - FINAL
 MUNICIPAL DISCHARGE EFFLUENT
 *** NO DISCHARGE ***

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
07	03	01	07	03	01

FROM

TO

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			
OXYGEN, DISSOLVED (DO)		*****	*****		7.0	*****	*****	(17)	0	1/1	Grab
00200 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	INST MIN	*****	*****	MG/L			
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	6.7	*****	6.8	(12)	0	1/1	Grab
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	MINIMUM	*****	MAXIMUM	EU			
SOLIDITY, TOTAL SUSPENDED		200.47	311.05	(20)	*****	343.50	518.00	(17)	0	1/1	Comp
00500 1 0 0 RAW SEW/INFLUENT		REPORT	REPORT		*****	REPORT	REPORT	MG/L			
00500 1 0 0 EFFLUENT GROSS VALUE		MG AVG	MX WK AV	LBS/DY	*****	MG AVG	MX WK AV	MG/L			
SOLIDITY, TOTAL SUSPENDED		11.50	19.0	(25)	*****	20.0	34.0	(17)	0	1/1	Comp
00500 1 0 0 EFFLUENT GROSS VALUE		50.0	75.0		*****	30	45	MG/L			
00500 1 0 0 EFFLUENT GROSS VALUE		MG AVG	MX WK AV	LBS/DY	*****	MG AVG	MX WK AV	MG/L			
NITROGEN, AMMONIA TOTAL (AS N)		16.69	19.22	(20)	*****	28.68	32.00	(17)	0	1/1	Comp
00510 1 0 0 RAW SEW/INFLUENT		REPORT	REPORT		*****	REPORT	REPORT	MG/L			
00510 1 0 0 EFFLUENT GROSS VALUE		MG AVG	MX WK AV	LBS/DY	*****	MG AVG	MX WK AV	MG/L			
NITROGEN, AMMONIA TOTAL (AS N)		0.12	0.22	(25)	*****	0.20	0.39	(17)	0	1/1	Comp
00510 1 0 0 EFFLUENT GROSS VALUE		MG AVG	MX WK AV	LBS/DY	*****	MG AVG	MX WK AV	MG/L			
00510 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	4.91	4.51	(17)	0	2/31	Comp
00510 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	REPORT	REPORT	MG/L			
00510 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	MG AVG	MX WK AV	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Exec Director
 H.J. Scherdel
 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
 528 1241-4093
 DATE
 07 06 00
 AREA CODE NUMBER YEAR MO DAY

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

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

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

Form Approved
OMB No. 2040-0004

NAME MSD, TIMBERLAKE STP
ADDRESS 670 LOUISVILLE/JEFF CD MSD
4502 ALBENBOUTH PKWY
LOUISVILLE KY 40211-2497

KY0043087
PERMIT NUMBER

001 E
DISCHARGE NUMBER

MINOR
(SUBR LV)

F - FINAL

MUNICIPAL DISCHARGE
EFFLUENT

JEFFE

FACILITY MSD, TIMBERLAKE STP
LOCATION PROSPECT KY 40057

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	05	01		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			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.067	0.086	(MGD)	*****	*****	*****		0	9	1/2
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	REPORT	REPORT		*****	*****	*****	***		ON LINE	
PERMIT REQUIREMENT	PERMIT REQUIREMENT	30DA AVG	DAILY MX	MGD	*****	*****	*****	***		ONLINE	
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	20.00	20.00	(17)	0	1/2	6.6
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.011	0.019			WEEKLY	
PERMIT REQUIREMENT	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA AVG	DAILY MX	MG/L		WEEKLY	
CODIFORM, TOTAL GENERAL		*****	*****		*****	1.86	2.0	(17)	0	1/2	6.6
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	200	400			WEEKLY	
PERMIT REQUIREMENT	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA GED	7 DA GED	100ML		WEEKLY	
BOD, CARBONACEOUS 5 DAY, 20C		131.74	186.15	(LBS/DY)	*****	225.75	310.00	(17)	0	1/2	6.6
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	REPORT	REPORT		*****	REPORT	REPORT			WEEKLY	
PERMIT REQUIREMENT	PERMIT REQUIREMENT	MG AVG	MX WK AV	LBS/DY	*****	MG AVG	MX WK AV	MG/L		WEEKLY	
BOD, CARBONACEOUS 5 DAY, 20C		2.74	3.40	(LBS/DY)	*****	4.75	6.0	(17)	0	1/2	6.6
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	10	15			WEEKLY	
PERMIT REQUIREMENT	PERMIT REQUIREMENT	MG AVG	MX WK AV	LBS/DY	*****	MG AVG	MX WK AV	MG/L		WEEKLY	
BOD, 5 DAY, 20C		*****	*****		98%	*****	*****	(23)	0	1/2	6.1
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			MONTH	
PERMIT REQUIREMENT	PERMIT REQUIREMENT	*****	*****	*****	NO MIN	*****	*****	PERCENT		MONTH	
SOLIDS, SUSPENDED		*****	*****		94%	*****	*****	(23)	0	1/2	6.1
PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			MONTH	
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	*****	NO MIN	*****	*****	PERCENT		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Alex D. ...
H.S. Scher ...
TYPED OR PRINTED

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