

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

October 6, 2010

Ms. Carolena Bentley DMR Coordinator 200 Fair Oaks Lane Frankfort, Kentucky 40601

Re: MSD Metro Operations

Shadow Wood WQTC; KPDES No.: KY0031810 Discharge Monitoring Reports –September 2010

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Shadow Wood WQTC; KPDES No.: KY0031810 for the month of September 2010.

There were no exceedences, overflow reports or bypass reports to report this month

If you have any questions concerning the attached DMRs, please contact me at (502)587-5856.

Sincerely,

Richard W. Mills

Process Supervisor, East Region

schard w-Mills

RWM/Shadow Wood 0910

Enclosures

cc:

C. Roth (DOW Louisville)

T. Singleton

R. Shaw



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

SHADOWWOOD WETC

ADDRESS 0/0 JOHN MESSEL

SSIR HITT LN

MY 40241 LOUISVILLE

FACILITY SHADOWNOOD WOTO

LOCATION LOUISVILLE ATTN: MARION M CEE NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

TO

MYUQQIBIU PERMIT NUMBER

MO. DAY

YEAR

FROM

the said of DISCHARGE NUMBER

YEAR MO. DAY.

MINOR tauar Lv)

JEFFE

Form Approved.

OMB No. 2040-0004

F - FINAL SANITARY WASTEWATER

EFFLUENT

200

ANA NO DISCHARGE: I I HAM

NOTE: Read Instructions before completing this form.

PARAMETER		QUAN	TITY OR LOADING		QUALITY OR COM		ENTRATION	NO.		OF	SAMELL
: :		AVERAGE	MAXIMUM	UNITS	МІМІМ	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	TYPE
DXYCEM, D iss olved (DD)	SAMPLE MEASUREMENT	· 经营业的 · · · · · · · · · · · · · · · · · · ·			7	প্রকেপন কর্	স্থা কথা সূথা সূথা সূথা সূথা সূথা সূথা সূ		Ø	1/2	GR
00300 1 0:0 Effluent gross valux	PERMIT REQUIREMENT	***	被救你会搬卖 。	****	INST MIN	70355750508	****	Mozi			CVEV PSOI
	SAMPLE MEASUREMENT	· 安安分录分析			6.9	্বরুমে সমান্ত্র বর্গ বর্গ বর্গ ব্য	7.5			1/2	G-R
00400 1 TO 0 Effluent gross valus	PERMIT REQUIREMENT	***	# % # % *	***	MINIMUM		MAKINU	5 0	2	Maria San Dalama San Dalama San Dalama	द्यार स्टब्स् इ.स.च्या
BOLIBS: TOTAL BOLIBS	SAMPLE MEASUREMENT	2.3	4.9		ाः नाक्षेत्रस्य न्द्रम् स्वयं स्वयं स्वयं स्वयं	30	53	10 27	Ø	5/30	C. f
00530 10 0 Q E <mark>ffluent gross</mark> value	PERMIT REQUIREMENT	BODA AVO	THE YEAR	L#8/0Y		SQDA AVQ	DAXLY ?	MGZL		V Zoo Book V Nestala N	GCIII və
NITROCENA APPROMIA : TOTAL (AS N)	SAMPLE MEASUREMENT	0.02	0 - 05			0.3	0.5		Ø	1/2	C ?
DOBLO 1 1 0 Effluent gross value	PERMIT REQUIREMENT	GODA AVO	DATLY MX	LB5/10\		3000 AVG	DAILY Y	Y Mg/11		94	Sale Sale (Sale (Sale)
PHOSPHORUS (TOTAL)	SAMPLE MEASUREMENT	******				0.66	1,0		Ø	6/30	OP
OOSSE (ETV) O Effluent Gross Value	PERMIT REQUIREMENT			有效者 并非要求		BOTA AVG	narun Dally 1	8997 112	0.00 0.00 0.00	7 64 6 * \$ \$	4
and the second of the second o	SAMPLE MEASUREMENT	0.011	6.027	V 04)			ggg i Artist se se es e Sus		Ø	CN	CN
30050 3 ⁰ 0 0 Effluent <mark>G</mark> røss valu:	PERMIT REQUIREMENT	SPDA AVO	MARCHI HMST MAK	MOD	# # X X X X X X		*36**	****** *****		ucus	1443 Amerika (1865) S. S. Sakar
	SAMPLE MEASUREMENT	· 為發發發發數	· 特殊市場大學			Philippine A.	2		Ø		GR
74055 1 100 0 Effluent Gross Value	PERMIT REQUIREMENT	香味油油 香油	· · · · · · · · · · · · · · · · · · ·	新於語 發於發發		3904 9 50	7 06 9	696 P.C.		M. Estill Steward New York	\$\$P\$ \$ \$ 6 664
NAME/TITLE PRINCIPAL EXECUTIVE	prepare	y under penalty of law that the ed under my direction or sup-	ervision in accordance with a	system designed		-1 1 N	2.11	TELEPHON	E	DA	TE
H.J. Schardein J	or those	re that qualified personnel pr ted. Based on my inquiry of the persons directly responsible	he person or persons who ma for gathering the information	mage the system, on, the informatio		crara 11/	rely .				
lam:		led is, to the best of my knowledge ware that there are significant og the possibility of fine and i	penalties for submitting fal-	se information.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			562 510-6		YEAR M	O DAY

OF

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

SHARQWWOOD WETC

ADDRESS C/O JOHN KESSEL

BBIR MITT LW

LOUISVILLE FACILITY SHADSHADSO WETC KY AUZ41

LOCATION LOUISVILLE

NY 40057

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

MONITORING PERIOD

TO

MYVVJISIV **PERMIT NUMBER**

MO DAY

YEAR

FROM

WW. DISCHARGE NUMBER

YEAR MO DAY

MINOR (SUBR LV) F - FINAL

SAMITARY WASTEWATER

Form Approved.

OMB No. 2040-0004

OMFFE

EFFLUENT

*** NO DISCHARGE ()) ***

PARAMETER		QUAN	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				FREQUENCY	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	TYPE
OD, CARBONACHOUS 5 Day, 200	SAMPLE MEASUREME		1.0	(e/s /	. : : : : : : : : : : : : : : : : : : :	6	16		Ø	1/7	CF
0082 1 10 0 FFLUENT GROSS VAL	PERMIT REQUIREMEN	NT BODA AVG	IMALLY WX	CBE/IN		30DA AVB	DAILY MY	MOZL.	100 100 100 100 100 100	Tank Cine	
	SAMPLE MEASUREME	NT					19.0 1.0 1.0				
	PERMIT REQUIREMEN	υ Τ								e de la composition della comp	
	SAMPLE MEASUREME	NT					1,114 1,114 1,114 1,114 1,114 1,114 1,114				10,000
	PERMIT REQUIREMEN	π					with w		100 00 100 00 100 00	(30)	
	SAMPLE MEASUREME	NT				**************************************					
	PERMIT REQUIREMEN	π							100 Car 100 Car 100 Car		
	SAMPLE MEASUREME	NT					plateries 2 South 2 South 2 South 3				
	PERMIT REQUIREMEN	41					187		(2) (2)	2066 2066	
	SAMPLE MEASUREMEI	NT					New Control of the Co				
	PERMIT REQUIREMEN	(T				Carlos Ca) 1141 2024 1177 1770	1980	
	SAMPLE MEASUREMEI	NT O				The second secon			AMERICAN INCOME.	200 200 200 200 200 200 200 200 200 200	
	PERMIT REQUIREMEN	ir	Andrews Company Compan				i i				
AME/TITLE PRINCIPAL EXECUTIV		rtify under penalty of law that the pared under my direction or supe				11 / 10		TELEPHONE	7,99,50,957	DA	TE
H.J. Scharden	J. f to a	ssure that qualified personnel promitted. Based on my inquiry of the	operly gather and evaluate th	e information		I MANALAN TI	HULLO I				
Exec. Director	or t sub	hose persons directly responsible mitted is, to the best of my knowl	for gathering the information	n, the informatio	and the second s		5.	2,540-60		10 1	06
I am awa		n aware that there are significant juding the possibility of fine and in	penalties for submitting fals	e information,	SIGNA	TURE OF PRINCIPAL ICER OR AUTHORIZE		A NUMBER		 	O DAY

SHADOW W		Report for	Sep-10		rot. Exc.=	0			•	
Tot. Flow=	0.338		Concenti			m	Pounds		Conc.	
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	T Phos	
9/1/10	0.013	16	9	0.45	2	1.735	0.976	0.049	0.687	
9/2/10	0.014			•						
9/3/10	0.009									
9/4/10	0.016									
9/5/10	0.021									
9/6/10	0.027									
9/7/10	0.015				4	4 000	0.400	0.040	0.070	
9/8/10	0.011	53	2	0.2	1	4.862	0.183	0.018	0.873	
9/9/10	0.009									
9/10/10	0.008									
9/11/10	0.005									
9/12/10	0.021									
9/13/10	0.014	•								
9/14/10	0.012		_			0.450	0.450	0.045	4.00	
9/15/10	0.009	46	2	0.2	1	3.453	0.150	0.015	1.03	
9/16/10	0.016	40				0.500				
9/17/10	0.005	12				0.500				
9/18/10	0.018									
9/19/10	0.016									
9/20/10	0.007		•						0.500	
9/21/10	0.005					4.054	0.550	0.040	0.506	
9/22/10	0.006	21	11	0.2	1	1.051	0.550	0.010	0.502	
9/23/10	0.007									
9/24/10	0.012									•
9/25/10	0.008									
9/26/10	0.011									
9/27/10	0.008									
9/28/10	0.004								0.074	
9/29/10	0.004								0.374	
9/30/10	0.007									
10/1/10				·····						
Average	0.011	29.60	6.00	0.26	1.19	2.32	0.46	0.02		
Maximum	0.027	53.00	11.00	0.45	2.00	4.86	0.98	0.05		
Exceed.	0	0	0	0	0	. 0	0	0	0	

•