

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

August 11, 2011

Cheryl Edwards
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

Re:

**MSD Metro Operations** 

Shadow Wood WQTC; KPDES No.: KY0031810 Discharge Monitoring Reports for July 2011.

Dear Ms. Edwards:

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 June 2011.

During the month of July we experienced a bypass from the tertiary pond to the waters of the US. The investigation determined that the bypass was caused by a significant amount of erosion from the drain pipe which led into a water retention pond behind the treatment plant. We had a contractor excavate the erosion site and installed a bulkhead to stop the leak and further erosion.

There were no exceedences to reports for this month.

Also attached is a bypass letter and overflow report.

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

Sincerely,

Kevin Thompson

Process Supervisor, East Region

RM/Shadow Wood 6.11

Enclosures

cc:

C. Roth (DOW Louisville)

T. Singleton

R. Shaw



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

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

NAME:

SHADOWWOOD WQTC

ADDRESS: 5512 HITT LN LOUISVILLE, KY 40241

FACILITY: SHADOWWOOD WQTC

ATTN: MARION M GEE

LOCATION: 5497 FOREST LAKE DR LOUISVILLE, KY 40059

FROM

KY0031810 PERMIT NUMBER

001-1 DISCHARGE NUMBER

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY 07/01/2011 TO 07/31/2011

DMR Mailing ZIP CODE:

40241

MINOR

(SUBR LV) **JEFFE** SANITARY WASTEWATER

External Outfall

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION					FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved (DO)	SAMPLE MEASUREMENT	******	Water State of the	****	7.0	*****	*****		0	27/31	GR
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	Stratesh yarar	7 INST MIN	*****	*****	mg/L		Weekly	GRAB
pH	SAMPLE MEASUREMENT	******	*******	*****	6.5	*****	7.2		0	27/31	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	****	****	****	6 MINIMUM	Water State Control of the Control o	9 MAXIMUM	SU		Weekly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	1.5	5.0		可以称单点者	6	. 9		0	17	CP
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	21.3 30DA AVG	42.6 DAILY MX	lb/d	*****	30 30DA AVG	60 DAILY MX	mg/L		Weekly	COMPOS
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	0.13	0.43		***	0.5	0.8		Ð	1/7	CP
00610 1 1 Effluent Gross	PERMIT REQUIREMENT	1.42 30DA AVG	2.84 DAILY MX	lb/d	*****	30DA AVG	DAILY MX	mg/L		Weekly	COMPOS
Phosphorus, total (as P)	SAMPLE MEASUREMENT	सर्वे <del>अं</del> के के के	****	*****	KARPER	0.49	0.76		-0	1/7	CP
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	****	*****	****	在在内外状态	Reg. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Weekly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.026	0.164		*****	*****	*****	*****	0	CN	CN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. 30DA AVG	Req. Mon. INST MAX	Mgal/d	***	No for the shorts	*****	*****		Continuous	CONTIN
Coliform, fecal general	SAMPLE MEASUREMENT	******	****	****	*****	/	<i>i</i>		Ø	1/7	GR
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	****	****	*****	200 30DA GEO	400 7 DA GEO	#/100mL		Weekly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I centily noder penalty of law that this document and all attachments were proposed under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the	1/ Sh	TEL	EPHONE	DATE
H.J. Schardein JR Executive Director	system, or those parsons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and behind, the neutrals, and complete, I am aware that there are significant together for when there are significant together the providing for admitting this information, including the neutral life of the part to previous for the providing the state of the providing the	Jun 100m	7"	540-6000	08/15/2011
TYPED OR PRINTED	Yolations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

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

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

Form Approved OMB No. 2040-0004

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

NAME:

SHADOWWOOD WQTC

ADDRESS:

5512 HITT LN

LOUISVILLE, KY 40241

FACILITY:

SHADOWWOOD WOTC

KY0031810 PERMIT NUMBER

001-1 DISCHARGE NUMBER

DMR Mailing ZIP CODE:

40241

MINOR

(SUBR LV)

**JEFFE** SANITARY WASTEWATER

External Outfall

No Discharge

LOCATION: 5497 FOREST LAKE DR . LOUISVILLE, KY 40059

ATTN: MARION M GEE

MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY FROM 07/01/2011 TO 07/31/2011

PARAMETER		QUANT	TTY OR LOADING	<b>S</b>	QUALITY OR CONCENTRATION					FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	1		
BOD, carbonaceous, 05 day, 20 C	SAMPLE MEASUREMENT	0.59	1.7		***	3	3		B	1/2	CP
80082 1 0 Effluent Gross	PERMIT REQUIREMENT	7.09 30DA AVG	14,2 DAILY MX	lb/d	****	10 30DA AVG	20 DAILY MX	mg/L		Weekly	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER H.J. Schardein JR EXECUTIVE Director TYPED OR PRINTED

I contily under peaalty of law that this document and all attechnepts were prepared under my direction or supervision in accordance with a system designed to assure that qualified personned properly gather and evaluate the information submitted. Based on my inquisty of the person or persons who manage my system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and delight responsible for gathering the information, the information submitted is, to the best of my knowledge and delight my accurate, and complete, I am owner that there are adjustication penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 502-540-6000 08/15/201 AREA Code NUMBER MM/DD/YYYY

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

SHADOW W		Report for	Jul-11		Tot. Exc.=	. 0				-		
Tot. Flow=	0.8		Concentr				Pounds		Conc.			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	T Phos			
7/1/11	0.066						-					
7/2/11	0.065						·					
7/3/11	0.065											
7/4/11	0.066	9	3	0.78	1	4.954	1.651	0.429	0.378			
7/5/11	0.065											•
7/6/11	0.008											
7/7/11	0.009					•						
7/8/11	0.016				•							
7/9/11	0.018											0.2
7/10/11	0.018		•	•			•					
7/11/11	0.018	2	2	0.28	1	0.300	0.300	0.042	2 0.247			
7/12/11	0.004							-	<del></del>	-		•
7/13/11	0.018				•					•		
7/14/11	0.01									•		
7/15/11	0.01					•					٠	
7/16/11	0.011								•			
7/17/11	0.013											
7/18/11	0.011	5	3	0.56	1	0.459	0.275	0.051	0.568			
7/19/11	0.005	•				,						
7/20/11	0.006							•				
7/21/11	0.003									-		
7/22/11	0.006											
7/23/11	0.012					,						
7/24/11	0.017											
7/25/11	0.009	6	2	0.17	1	0.450	0.150	0.013	0.764			
7/26/11	0.004											
7/27/11	0.164											
7/28/11	0.083											
7/29/11	0											
7/30/11	0								•			
7/31/11	0	•										•
Average	0.026	5.50	2.50	0.45	1.00	1.54	0.59	0.13				
Maximum	0.164	9.00	3.00	0.78	1.00	4.95	1.65	0.43				
Exceed.	1	0	0	0	0	Ō	0	0		٠		

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July 28,2011

Mr. Charlie Roth, District Supervisor KY Division of Water Louisville Regional Office 9116 Leesgate Road Louisville, KY 40222-5084

Re: Bypass Report for the Shadow Wood WQTC-KPDES Permit KY0031810

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 AM on July 28, 2011, referencing Work Order 1308246 as a dry weather discharge. This letter serves as a written report of the bypass as required by 401 KAR 5:065.

Provided below are the details of the bypass event:

- Description of the noncompliance and its cause: On July 27, 2011, the Shadow Wood WQTC's tertiary pond experienced a bypass to the waters of the US. To investigate the cause of the bypass, an excavation of the site was performed. This investigation determined that the bypass was caused by a significant amount of erosion that had occurred at the tertiary pond into a drain pipe which led into a water retention pond. Approximately 1832 gallons bypassed. The bypassed volume received full treatment except for disinfection.
- Period of noncompliance: Starting 12:15 PM on July 27, 2011 and stopping 04:39 PM on July 27, 2011.
- Steps taken or planned to reduce, eliminate and prevent recurrence: MSD had a contractor excavate the erosion site and install a plug into the drain pipe which stopped the bypass. Water was also pumped out of the tertiary pond to reduce its level. We have installed a bulkhead in the pipe and a concrete cut off wall in the embankment to stop the leak.

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-587-5856, my cell phone at (502)-475-2224 or via email at Thompson@msdlouky.org.

Kevin Thompson

Process Supervisor-Operations

Gary Levy, KDEP cc:

Paula Purifoy, Wes Sydnor, Kevin Ries, Robert Bates - MSD

eB File





Report Selections: Excluding PPI, CSO, Excluding LAT, Prob Code: BYPAS, Result WUS, Act Code: DISDW, DISREV

KPDES# KY0031810 Facility ID MSD0404

**Water Quality Treatement Center** SHADOW WOOD

**Receiving Stream of Treatment Center** HARRODS CREEK

Region EAST

Facility Type

DISCHARGE

Facility ID

Facility Address

If Pump Station, Name of Pump Station:

Receiving Stream

Discharge to

SPL , Sewer Treatment Plant

MSD0404

5489 FOREST LAKE DR

HARRODS CREEK

GROUND

Activity Code / Description DISDW: DRY WEATHER

WO # 1308246

Initiated 07/27/11 12:15 PM Initiated By ELDER

Assigned To THOMPSON

Disch Status REPAIRED -ISSUE

RESOLVED

**Event Date** 07/27/11

**Problem** BYPASS AT WQTC Result UNAUTHORIZED Completed Condition 07/27/11 D4:39

DISCHARGE-WATER PM

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## Spot inspections:

Discharge Amount	1,832 GAL
Cause:	EROSION OF THE LAGOON WALL
Clean Up:	DISCHARGING DIRECTLY TO STREAM, NO CLEANUP POSSIBLE
Control Zone:	TEMPORARY SIGNS AROUND AFFECTED AREA
Impact:	CLEAR UNCHLORINATED EFFLUENT WATER
Repair:	CHEROKEE CALLED TO MAKE REPAIRS

## Notifications:

		·
	DISPUB	Temporary signs placed around affected area
07/27/11 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
07/27/11 01:00 PM		Supplemental Email notification of unauthorized discharge has been sent to ireland sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Total Facilities Printed: 2 Total Work Orders Printed: 2