

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

August 18, 2011

Ms. Cherly Edwards Kentucky Division of Water 200 Fair Oaks Lane Frankfort, Kentucky 40601

Re:

MSD Metro Operations

Silver Heights WQTC; KPDES No.: KY0028801

Discharge Monitoring Reports - July 2011.

Dear Ms. Thompson:

Attached are the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Silver Heights WQTC, KPDES No.: KY0028801 for the month of July 2011.

There were no exceedences or overflow, bypass reports for the month of July for Silver Heights WQTC

If you have any questions concerning the attached DMRs, please contact me at (502) 540-6031.

Sincerely,

John Kassel

Process Supervisor, West region

JMK/Silver Heights 0711

Enclosures

cc:

T. Singleton

R. Shaw

C. Roth

DRESS CAD. CEDAR CREEK WOTC

CATION LOUISVILLE

SHOE CEDAR CREEK RD

KY 40211 LOUISVILLE

CILTY SILVER HEIGHTS WOTC MED

KY 40229

TIM: DENNIS THOMASSON, SR METRO CPS

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) WEE MU AVE FOR BODYTES REMY, REPT. IN MINIMUM COLUMN.

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

MONITORING PERIOD

TO

DAY

KYUUEEBUL PERMIT NUMBER

YEAR MO.

FROM

DISCHARGE NUMBER

YEAR MO- DAY

MINOR (SUBR LV)

UMFFE

Form Approved.

OMB No. 2040-0004

F - FINAL SAMITARY WASTEWATER

EFFLUENT

*** WO DISCHARGE

NOTE: Read Instructions before completing this form.

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·	\times	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER 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								Line HORL		T	
to assure that qualified personnel properly gather and evaluate the information							.0				
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. OFFICER OR AUTHORIZED AGENT								1.000	<u>, , , , , , , , , , , , , , , , , , , </u>	08/ 18	
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DRESS C/O CEDAR CREEK WOTO EADE CEDAR CHEEK RD.

LOUISVILLE

KY 40Zll

COLITY SILVER METCHIS WOTO MED

)CATION LOUISVILLE KY 40227

PERMIT NUMBER

FROM

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YEAR

MO.

001 <u>z</u> DISCHARGE NUMBER

DAY

YEAR MO-

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

DAY

MIMOR (SUER LY) THE THE OMB No. 2040-0004

Horm Approved.

SARITARY WASTEWATER

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TIN: DENNIS THOMASSON, OR METRO CPS NOTE: Read Instructions before completing this form. **PARAMETER** FREQUENCY QUANTITY OR LOADING NO. QUALITY OR CONCENTRATION SAMPLE EX TYPE ANALYSIS **AVERAGE** MAXIMUM UNITS MINIMUM **AVERAGE** MAXIMUM UNITS COLIFORM, FECAL おななななる 茶茶茶茶茶 ----SAMPLE GR. ENERAL MEASUREMENT /07 4055 0 茶茶茶 發於於於獨於 经济资格的 建筑器 医常语 PERMIT لسائل شت ---FFLUENT GROSS VALUE GODA GEO DAILY MX 100Mi REQUIREMENT 抗療療療 CARBONACEOUS ·安徽·安·安·安· SAMPLE 16 5 DAY: 208 MEASUREMENT ัวว 0082 1 \circ 100 Stade Westerner is PERMIT ے ہے دیکر FYLLENT GROSS VALUE REQUIREMENT SODA AVO MAILY MY LES/DY 30DA AV9 DAILY MX MGAL SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE. MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT I certify under penalty of law that this document and all attachments were IAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE. DATE prepared under my direction or supervision in accordance with a system designed Exec Dia 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 H.J. Sdmilain submitted is, to the best of my knowledge and belief, true, accurate, and complete. 1546.6066 15 SIGNATURE OF PRINCIPAL EXECUTIVE I am aware that there are significant penaltics for submitting false information, OFFICER OR AUTHORIZED AGENT TYPED OR PRINTED including the possibility of fine and imprisonment for knowing violations. NUMBER YEAR DAY

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

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Silver Heigh	ıts l	Report for	Jul-11	7	Tot. Exc.=	0			•
Tot. Flow=	9.302		Concentra				Pounds	•	
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.
7/1/11	0.248								
7/2/11	0.238	•							
7/3/11	0.234								_
7/4/11	0.242	3	8	0.34	6	6.055	16.146	0.686	1.72
7/5/11	0.216			•					
7/6/11	0.198	•							
7/7/11	0.216								
7/8/11	0.366								
7/9/11	0.329								
7/10/11	0.305	2.	3	0.22	1	5.087	7.631 .	0.560	2.01
7/11/11	0.267								
7/12/11	0.53								
7/13/11	0.728						•		
7/14/11	0.438								
7/15/11	0.367								
7/16/11	0.323				_		10.001	0.740	. 46
7/17/11	0.318	4	5	0.28	.6	10.608	13.261	0.743	3 1.6
7/18/11	0.297								
7/19/11	0.269								
7/20/11	0.392								
7/21/11	0.367								
7/22/11	0.313								
7/23/11	0.293					4 50 4	. 4.504	0.63	1 2.53
7/24/11	0.27	. 2	2	0.28	1	4.504	4.504	0.63	2.00
7/25/11	0.249								
7/26/11	0.229			•					
7/27/11	0.245								
7/28/11	0.207								
7/29/11	0.201								
7/30/11	0.2						~		
7/31/11	0.207			·	· · · · · · · · · · · · · · · · · · ·		1.00		F 4.07
Average .	0.300		4.50	0.28		6:56		0.6	
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Exceed.	2	. 0	0	0	0	0	0		U

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