



Louisville and Jefferson County Metropolitan Sewer District  
700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
[www.msdlouky.org](http://www.msdlouky.org)

June 11, 2010

Ms. Carolena Bentley, DMR Coordinator  
Kentucky Division of Water  
200 Fair Oaks Lane, 4<sup>th</sup> Floor  
Frankfort, Kentucky 40601

**Re: MSD Metro Operations  
Starview WQTC; KPDES No.: KY0031712  
Discharge Monitoring Reports – May 2010.**

Dear Ms. Bentley:

Attached are the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Starview WQTC, KPDES No.: KY0031712 for the month of May 2010.

Also attached is a bypass letter and overflow report.

There were no exceedences.

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

Sincerely,

A handwritten signature in cursive script that reads "Duane V. Wright".

Duane V. Wright  
Process Supervisor Central Region

DVW/Starview 05.10

Enclosures

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



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

MINOR  
(SUBP 10)  
F - FINAL  
SANITARY WASTEWATER  
EFFLUENT

JEFF L

NO DISCHARGE

NOTE: Read Instructions before completing this form.

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

NAME STARVIEW WGTG MBI  
ADDRESS C/O CEDAR CREEK WGTG  
0405 CEDAR CREEK RD  
LOUISVILLE KY 40210  
FACILITY STARVIEW WGTG MBI  
LOCATION LOUISVILLE KY 40242  
ATTN: JENNIS THOMASON, SR METRO OPS

PERMIT NUMBER KY000112

DISCHARGE NUMBER 0001

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

FROM

TO

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									1/07	CR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				INST MIN			MG/L			
PH	7.2				7.2	7.3				1/07	CR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				MINIMUM	MAXIMUM		EU			
SOLIDS, TOTAL SUSPENDED	3.3	5.9				3	5			1/07	CR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DAY	30DA AVG	DAILY MX		MG/L			
NITROGEN, AMMONIA TOTAL (AS N)	0.32	0.49				0.3	0.6			1/07	CR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DAY	30DA AVG	DAILY MX		MG/L			
PHOSPHORUS, TOTAL (AS P)	0.25	0.30				0.25	0.30			1/07	CR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT					30DA AVG	DAILY MX	MG/L			
FLOW IN CONDUIT OR THRU TREATMENT PLANT	0.123	0.355								1/07	CN
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD							UDS
CHLORINE, TOTAL RESIDUAL						<0.010	<0.010			1/07	CR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT					30DA AVG	DAILY MX	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
H. J. STARR  
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 H. J. Starr*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 512 540 1000  
DATE 10 06 11  
AREA CODE NUMBER YEAR MO DAY

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

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME STARVILL WGTG MFG  
 ADDRESS 670 CEDAR CREEK WGTG  
 644 CEDAR CREEK RD  
 LOUISVILLE KY 40211  
 FACILITY STARVIEW WGTG MFG  
 LOCATION LOUISVILLE KY 40243  
 ATTN DENNIS THOMASSEN SR MTRD OPS

WY0031717  
 PERMIT NUMBER

001  
 DISCHARGE NUMBER

MINOR  
 (SUDDEN)  
 F - FINAL  
 SANITARY HAS REMOVED  
 EFFLUENT  
 \*\*\* NO DISCHARGE \*\*\*

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

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			
GENERAL EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	2	43			1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	300	700				
5 DAY BOD	SAMPLE MEASUREMENT	2.0	3.5	1.00	*****	2	3			1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	25.0	50.0	LB/DAY	*****	300	500				
	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  
 T. S. CLARKE 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  
 DATE  
 AREA CODE NUMBER YEAR MO DAY

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

Starview	Report for	May-10		Tot. Exc.= 0						
Tot. Flow=	3.801	Concentrations					Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	
5/1/10	0.2									
5/2/10	0.177									
5/3/10	0.355									
5/4/10	0.255									
5/5/10	0.185									
5/6/10	0.141	5	3	0.34	2	5.880	3.528	0.400	0.143	
5/7/10	0.124									
5/8/10	0.13									
5/9/10	0.111									
5/10/10	0.094	3	2	0.62	2	2.352	1.568	0.486	0.302	
5/11/10	0.079									
5/12/10	0.108									
5/13/10	0.111									
5/14/10	0.104									
5/15/10	0.103									
5/16/10	0.115									
5/17/10	0.12	4	1.26	0.34	3	4.003	1.261	0.340	0.255	
5/18/10	0.135									
5/19/10	0.119			0.34				0.337		
5/20/10	0.096									
5/21/10	0.094									
5/22/10	0.144									
5/23/10	0.116									
5/24/10	0.094	1	2	0.055	3	0.784	1.568	0.043	0.297	
5/25/10	0.081									
5/26/10	0.074									
5/27/10	0.073									
5/28/10	0.065									
5/29/10	0.067									
5/30/10	0.063									
5/31/10	0.068									
Average	0.123	3.25	2.07	0.34	2.45	3.25	1.98	0.32	0.25	
Maximum	0.355	5.00	3.00	0.62	3.00	5.88	3.53	0.49	0.30	



700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
www.msdlouky.org

May 4, 2010

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

Re: Bypass Report for the: Starview WQTC- KPDES Permit: KY0031712

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 AM on May 04, 2010, referencing Work Order 1063005 as a Rain event 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 May 2 & 3 2010, due to increased plant flow caused by storm event, the aeration basin overflowed resulting in a wet weather discharge to waters of the U.S. Plant aeration was shut off prior to bypass. Approximately 1,650 gallons overflowed. Plant design is 0.100 MGD. Peak and total flow readings are not accurate due to the flow monitor being submerged. Plant total readings for May 2 is 0.151 MGD and May 3 is 0.355 MGD.
- Period of noncompliance: Starting 10:00 PM on May 02, 2010 and stopping 12:45 AM on May 03, 2010.
- Steps taken or planned to reduce, eliminate and prevent recurrence: Bypass was stopped once plant flow decreased .
- Additional comments: No additional comments

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-239-7574, my cell phone at (502)-396-9142 or via email at [wrightd@msdlouky.org](mailto:wrightd@msdlouky.org).

Sincerely,

Duane V. Wright  
Process Supervisor-Operations

cc: Gary Levy, KDEP  
Paula Purifoy, MSD  
eB File





Report Selections: Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES # KY0031712	Facility ID MSD0247	Water Quality Treatment Center STARVIEW	Receiving Stream of Treatment Center CHENOWETH RUN	Region CENT
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Facility Type SPL Sewer Treatment Plant	Facility ID MSD0247	Facility Address 423 BERMUDA WAY	If Pump Station, Name of Pump Station:	Receiving Stream CHENOWETH RUN	Discharge to STREAM
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Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed	Condition
DISREV: RAIN EVENT DISCHARGE	1063005	05/02/10 10:00 PM	SINGLETON	WRIGHT	FORCE MAJEURE	05/02/10	BYPASS AT WQTC	UNAUTHORIZED DISCHARGE - WATERS	05/03/10 12:45 AM	

**Spot Inspections:**

Discharge Amount	1,650 GAL
Cause:	LACK OF SYSTEM CAPACITY DUE TO RAIN EVENT IN THE AREA
Clean Up:	MSD CLEANED & SANITIZED THE AREA AND SPREAD LIME
Control Zone:	CONTAINED ON MSD FENCED PROPERTY
Impact:	PERSONAL HYGIENE PRODUCTS OBSERVED
Repair:	THIS SITE FOUND DURING RAIN EVENT RECON- WILL BE MONITORED & EVALUATED FOR REPAIR

**Notifications:**

05/03/10 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
05/03/10 01:00 AM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
06/07/10 01:11 PM	DISPUB	No public notification occurred.