

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

October\_14, 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 - September 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 September 2010.

There were no exceedences, bypasses or overflow reports.

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

Sincerely,

Duane V. Wright

Process Supervisor Central Region

Tuane V. Wright

DVW/Starview 09.10

Enclosures

cc:

C. Roth (DOW Louisville)

R. Shaw

T. Singleton



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

MONITORING PERIOD

TO

DAY

Form Approved. OMB No. 2040-0004

CONTRACTOR WATER TO

ADDRESS C/O CEDAR CREEK WOTC

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LOUISVILLE AY 40211

FACILITY (FILE NO. SEE NO. 1970)

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

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

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DISCHARGE MONITORING REPORT (DMR)

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Form Approved. OMB No. 2040-0004

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PERMIT REQUIREME	Service (Co. C. Co. C.	. O	244				5-2-2									
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 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						,	<u>C</u>	ing L	· L	· Som	T	ELEPHONE		DA <sup>*</sup>	ſΕ	
Submitted is, to the best of my knowledge and belief, true, accurate, and complete.  TYPED OR PRINTED  COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)						SIGNAT OFFI	TURE OF PRI CER OR AUT	NCIPAL E	XECUTIVE AGENT	SP J ARBA	SYL'60		/EAR MO			

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Starview Tot, Flow=	1.69	Report for	Sep-10	<b>-</b> 4:	Tot. Exc.= 0				
Date	Flow	TSS	Concentr BOD	NH3	C	TOO	Pounds		
9/1/10	0.054	133	БОО	NUS	Fecal	TSS	BOD	ИНЗ	Tot. Phos.
9/2/10	0.06	4	2	0.39	0.0	0.000	4		
9/3/10	0:059	7	۷	0.39	2.6	2.002	1.001	0.195	0.394
9/4/10	0.057								
9/5/10	0.054								
9/6/10	0.063								
9/7/10	0.06	•							
9/8/10	0.06								
9/9/10	0.059	5	2	0.1	3	0.400	0.004		
9/10/10	0:061	J	2	0.1	ა	2.460	0.984	0.049	0.293
9/11/10	0.059								
9/12/10	0.057								
9/13/10	0.047								
9/14/10	0.056								
9/15/10	0.061								
9/16/10	0:062	6	2	0.1	1	3.102	1.034	0.050	0.44
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9/18/10	0.054								
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9/20/10	0:057								
9/21/10	0.057								
9/22/10	0.058								
9/23/10	0.054	4	2	0.2	2	1.801	0.901	0.090	0.313
9/24/10	0:068						0.001	0.030	0.515
9/25/10	0.048								
9/26/10	0.055								
9/27/10	0.056								
9/28/10	0.049								
9/29/10	0.048								
9/30/10	0.046								
Average	0:056	4.75	2.00	0.20	1.99	2.34	0.98	0.10	0.35
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