



MSD

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

April 23, 2008

Charlie Roth, District Supervisor
Kentucky Division of Water
9116 Leesgate road
Louisville, Kentucky 40222

**Re: MSD Metro Operations
Timberlake WTP; KPDES No.: KY0043087
Discharge Monitoring Reports – March 2008**

Dear Mr. Roth

Attached is the Discharge Monitoring Reports (DMRs) for the Timberlake WTP, KPDES No.: KY0043087 for the month of March 2008.

Also included are the Discharge reports and the treatment plant bypass letter.

If you have any questions concerning the attached DMRs, please contact me at (502)241-9093.

Sincerely,

John Kessel
Process Supervisor, East Region

JK/Timberlake 0308

Enclosures

cc: K. Thurman (DOW)
T. Singleton

R. Shaw



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www.louisvillegreen.com*

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

ADDRESS C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211

FACILITY MSD TIMBERLAKE STP
LOCATION PROSPECT KY 40057

ATTN: DENNIS THOMASSON, SR METRO DPS

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

KY0043087
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL

Form Approved.
OMB No. 2040-0004

JEFFE

MUNICIPAL DISCHARGE
EFFLUENT

*** NO DISCHARGE 1 1 ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****		7.8	*****	*****	(19)	0	1/3	Grb
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	7	*****	*****	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE				*****	INST MIN						
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.5	(12)	0	1/3	Grb
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE				*****	MINIMUM		MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	280.0	458.0	(26)	*****	259.0	362.0	(19)	0	1/3	Comp
00530 3 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT	MG/L		WEEKLY	COMPOS
RAW SEW/INFLUENT		MD AVG	MX WK AV	LBS/DY		MD AVG	MX WK AV				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	25.0	35.0	(26)	*****	22.0	28.0	(19)	0	1/3	Comp
00530 1 0 0	PERMIT REQUIREMENT	50.0	75.0		*****	30	45	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE		MD AVG	MX WK AV	LBS/DY		MD AVG	MX WK AV				
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	22.0	26.0	(26)	*****	21.0	35.0	(19)	0	1/3	Comp
00610 3 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT	MG/L		WEEKLY	COMPOS
RAW SEW/INFLUENT		MD AVG	MX WK AV	LBS/DY		MD AVG	MX WK AV				
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	0.15	0.21	(26)	*****	0.15	0.28	(19)	0	1/3	Comp
00610 1 2 0	PERMIT REQUIREMENT	8	12		*****	5	7.5	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE		MD AVG	MX WK AV	LBS/DY		MD AVG	MX WK AV				
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	3.0	3.0	(19)	0	2/31	Comp
00685 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE				*****		MD AVG	MX WK AV			MONTH	
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 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.				TELEPHONE		DATE			
Exec Director H J Schaefer Jr TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

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

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

NAME MSD TIMBERLAKE STP
 ADDRESS C/O CEDAR CREEK STP
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY MSD TIMBERLAKE STP
 LOCATION PROSPECT KY 40059
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0043087
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

MINOR
 (SUBR LV)
 F - FINAL

Form Approved.
 OMB No. 2040-0004

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*** NO DISCHARGE 1 ***

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.153	0.320	(CG)	*****	*****	*****		0	4 _n	C _n
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	*****		CONTIN	CONTIN
EFFLUENT GROSS VALUE										DUES	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.010	<0.010	(19)	0	1 _n	Grab
50060 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.011	0.019			WEEKLY	GRAB
EFFLUENT GROSS VALUE						30DA AVG	DAILY MX	MG/L			
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	1.0	1.0	(13)	0	1 _n	Grab
74055 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	200	400 #/			WEEKLY	GRAB
EFFLUENT GROSS VALUE						30DA GED	7 DA GED	100ML			
BOD, CARBONACEOUS 5 DAY, 20C	SAMPLE MEASUREMENT	165.0	181.0	(26)	*****	158.0	850.0	(19)	0	1 _n	Comp
50082 6 0 0	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPOS
RAW SEW/INFLUENT											
BOD, CARBONACEOUS 5 DAY, 20C	SAMPLE MEASUREMENT	7.0	10.0	(26)	*****	6.0	8.0	(19)	0	1 _n	Comp
50082 1 0 0	PERMIT REQUIREMENT	17 MD AVG	25 MX WK AV	LBS/DY	*****	10 MD AVG	15 MX WK AV	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE											
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL	SAMPLE MEASUREMENT	*****	*****		96%	*****	*****	(23)	0	1/31	Cal
50091 K 0 0	PERMIT REQUIREMENT	*****	*****	*****	85 MD MIN	*****	*****	PER-CENT		ONCE/	CALC'D
PERCENT REMOVAL										MONTH	
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		92%	*****	*****	(23)	0	1/31	Cal
51011 K 0 0	PERMIT REQUIREMENT	*****	*****	*****	85 MD MIN	*****	*****	PER-CENT		ONCE/	CALC'D
PERCENT REMOVAL										MONTH	
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 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.				TELEPHONE		DATE			
Exec Director H.J. Schandew Jr TYPED OR PRINTED						502 241 9093		08 04 22			
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE NUMBER		YEAR MO DAY			

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



MSD

Louisville and Jefferson County Metropolitan Sewer District
700 West Liberty Street
Louisville Kentucky 40203-1911
502-540-6000
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March 24, 2008

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

Re: Bypass Report for the Timberlake WTP, Permit # KY0043087

Dear Mr. Roth

This plant experienced a bypass event starting at 2:00 PM on March 20, 2008 and stopping at 7:25 AM on March 24, 2008. This was reported through our electronic notification system at approximately 5:54 PM on March 21, 2008, referencing work Order 757717 as a Rain Event Discharge. We are providing this letter as a written report of the bypass as required 401 KAR 5:065.

Due to the recent rain event, Harrods creek has backed up into our contact chamber, this prevented the effluent flow from leaving the lagoon. We estimate that 19,388 gallons was bypassed once Harrods creek reseeded. All water that was bypassed received full secondary treatment, chlorination and dechlorination.

Please advise if you have any questions concerning this information. You can contact me at my office 241-9093 or on my cell at 648-5984.

Sincerely,

John Kessel
East Region Supervisor

cc: D. Guthrie
D. Thomasson

R. Shaw
M. Jenkins

B. Bingham
D. Talley

A. Akridge



Beneficial Use of Louisville's Biosolids
www.louisvillegreen.com



MSD Louisville and Jefferson County
Metropolitan Sewer District

IMSAST0004

Discharge Report

Mar 01, 2008 12:00 AM thru Mar 31, 2008 11:59 PM

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

KPDES # KY0043087	Facility ID MSD0293	Treatment Plant Name TIMBERLAKE	Receiving Stream of Treatment Plant HARRODS CREEK	Region EAST
Facility Type SPL Sewer Treatment Plant	Facility ID MSD0293	Facility Address 5504 TIMBER RIDGE DR	If Pump Station, Name of Pump Station:	Receiving Stream HARRODS CREEK
				Discharge to GROUND

<u>Activity Code / Description</u> DISREV: RAIN EVENT DISCHARGE	<u>WO #</u> 757717	<u>Initiated</u> 03/20/08 05:00 PM	<u>Initiated By</u> MARKS JR	<u>Assigned To</u> KUSTES	<u>Disch Stat</u> R	<u>Event Date</u> 12/05/07	<u>Problem</u> BYPASS AT TREATMENT PLANT	<u>Resolution</u> DISCHARGE TO WATERS OF THE US	<u>Completed</u> 03/24/08 07:25 AM
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Spot Inspections:

Discharge Amount:	19,388 GAL
Cause:	RAIN EVENT CAUSED CREEK TO BACK UP INTO CONTACT CHAMBER
Clean Up:	NO DEBRIS
Control Zone:	PIPE DISCHARGE SUBMERGED NO CONTROL ZONE
Impact:	NO IMPACT OBSERVED
Repair:	THIS PROBLEM WAS IDENTIFIED DURING RAIN EVENT RECON AND WILL BE EVALUATED FOR REPAIR

Notifications:

03/21/08 05:54 PM	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
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Total Facilities Printed: 108

Report Date 03/24/2008 02:30 PM

Submitted By

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Work Order # 757717 Activity DISREV RAIN EVENT DISCHARGE

Plant ID MSD0293 Description TIMBERLAKE
Address 5504 TIMBER RIDGE DR
PROSPECT KY 40059-0000

Qualifier FN FLOYDS FORK/NORTH COUNTY AT District EAST MSD EAST OPERATIONS MAINT TEAM
Area 16 NEIGHBORHOOD 16 Location EM EASEMENT IN OPEN AREA
Sub-area
Map # MAJ22-C

Plant Type Service Status 1 IN SERVICE
X Coord Parcel
Y Coord Date Installed 03/15/1973 As Built T311A-2
Z Coord
Area Size 0.00
Ownership MSD MSD OWNED AND OPERATED Budget #

Initiated By 00187 NOBLE MARKS JR Initiated Date 03/20/2008 Scheduled
Assigned To 35823 RANDOLPH KUSTES Service # Due

Authorization
Budget # 7446112 SMALL TREATMENT PLANTS - OPS
Crew
Maint Type
Priority
Problem BYPAS BYPASS AT TREATMENT PLANT
Project
Source

Out of Service ☐
Potential Service Request ☐

Work Order Comments

due to creek rising the contact chamber has backed up and is preventing the lagoon effluent from entering the contact chamber

Spot Inspections			
Spot Insp	UM	Completed	Description
DISAMT	GAL	03/24/2008 07:25	DISCHARGE AMOUNT
	Value	19388	
	Insp Comments		
DISCAU		03/24/2008 07:25	CAUSE OF DISCHARGE
	Value	RAINEVENT CAUSED CREEK TO BACK UP INTO CONTACT CHAMBER	
	Insp Comments		
DISCLN		03/24/2008 07:25	CLEANUP ACTIVITY
	Value	NO DEBRIS	
	Insp Comments		
DISCZ		03/24/2008 07:25	CONTROL ZONE SETUP
	Value	PIPE DISCHARGE SUBMERGED NO CONTROL ZONE	
	Insp Comments		
DISIMP		03/24/2008 07:25	VISUAL IMPACT OBSERVATION
	Value	NO IMPACT OBSERVED	
	Insp Comments		

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RAIN EVENT DISCHARGE

Outstanding Work Orders						
Work Order #	Activity	Description	Initiated Date	Initiated By	Scheduled	Due
There are no outstanding work orders						