

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

October 27, 2008

Ms. Vickie L. Prather Kentucky Division of Water 14 Reilly Road Frankfort, Kentucky 40601

**Re:** MSD Metro Operations

Timberlake WTP; KPDES No.: KY0043087 Discharge Monitoring Reports – September 2008

Dear Ms. Prather

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

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 0908

Enclosures

cc:

C. Roth (DOW)

T. Singleton

P. Burgin

R. Shaw



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

norm approved. OMB No. 2040 0004

MED TIMBERLAKE STP

KY0043087 DRESS C/O CEDAR CREEK STR PERMIT NUMBER GAOS CEDAR CREEK RD

DISCHARGE NUMBER

MINOR (BUBR LV) F - FINAL

JEST

LOUISVILLE

MY 40211 MSO TIMBERLAKE STP

40059

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM TO 3. 3  $\bigcirc$ 30

EFFLUENT \*\*\* NU DISCHARGE ! **砂水粉** 

MUNICIPAL DISCHARGE

NOTE: Read Instructions before completing this form. ITM: DENNIS THOMASSON, SR METRO DES FREQUENCY **SAMPLE** NO. **PARAMETER** QUANTITY OR LOADING QUALITY OR CONCENTRATION OF EX TYPE ANALYSIS **AVERAGE** MAXIMUM UNITS MINIMUM **AVERAGE MAXIMUM** UNITS 你母母母母母 197 并经外债价格 SAMPLE 经经济保险 XYGEM. DISSULVED 经营营营营销 MEASUREMENT (DD) 有特种特殊等 日本年 PERMIT 经保护证据证 0 0 操作操作特殊 经婚债 0300 REQUIREMENT MILL GROSS VALUE 196-36-35 IMST MIN (12)要發供條例并 SAMPLE 各种物种形势 學學學學學 7.0 **MEASUREMENT** 9.0 海海海外海海 PERMIT 18-36-16-15-18-18-18-24.25 B. J. M. H. 0 0400 REQUIREMENT MAXIMUM المناولا الجيانا MINIMUM FFLUENT GROSS VALUE (9) 学者哲学教教 26) TOTAL SAMPLE 225 409.0 710.0 MEASUREMENT USPENDED 我亲亲亲痛病毒 REPORT REPORT REPORT PERMIT REPORT 0530 0 0 0 REQUIREMENT MET JOURN MY WK AV .95/D MC AVG MY MK AV MG/L AM SFW/INFLUENT 19) 261 SAMPLE 海特性部務等 ULIDS, TOTAL 15.0 9.0 **MEASUREMENT** USPENDED 30 45 PERMIT 50.0 安计会会分许 0530 REQUIREMENT ME AVO MK NEG AV MEL AVE MX NK AV MG/L FFLUENT GROSS VALU 103 26) SAMPLE 经安全的证券 AMMONTA 20.0 28.0 36.0 15.0 MEASUREMENT TOTAL (AS N) REPORT PERMIT PERMAT 模件与内模等 经营业营业 REPORT 10610 (3) 0 0 REQUIREMENT MO AVE ME BW AV MX HK AV MO AVG IAW SEW/INFLUENT 191 SAMPLE AMMONTA 0.29 0.50 0,52 0.90 MEASUREMENT 0-4 TOTAL (AS M) PERMIT 13 К., 使将婚婚好 10510 REQUIREMENT MG AVG 88/04 MO AVO 禄林 AM MO / L FFLUENT GROSS VALUE 191 计据录的比较 SAMPLE 计技术分析性 MOSPHORUS, TOTAL 2.0 **MEASUREMENT** (AS P) REPORT REPORT PERMIT 告并分母母母 44-25-4-25-42 计算法设计符件 0 10665 MUNITH REQUIREMENT MIT AVO MW XM FFILIENT CROSS VALUE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I certify under penalty of law that this document and all attachments were **TELEPHONE** DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information Exec Dir 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. 2 U SIGNATURE OF PRINCIPAL EXECUTIVE I am aware that there are significant penalties for submitting false information, OFFICER OR AUTHORIZED AGENT YEAR NUMBER MO DAY **TYPED OR PRINTED** including the possibility of fine and imprisonment for knowing violations.

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

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

MONITORING PERIOD

TO

DAY

O1

Form Approvea. OMB No. 2040-0004

MSD TIMBERLAKE STP

ADDRESS C/O CEDAR CREEK STP

8405 CEDAR CREEK RD

LOUISVILLE

KY 40211

FACILITY MSD TIMBERLAKE STE LOCATION

KY GOOST

KYU043087 **PERMIT NUMBER** 

YEAR MO

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FROM

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MINOR (SUBR LV) r - Final

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MUNICIPAL DISCHARGE

EFFLUENT

\*\*\* NO DISCHARGE | | | \*\*\*

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NAME/TITLE PRINCIPAL EXECUTIVE	under penalty of law that the	his document and all attachn	ients were		<u> </u>		TELEPHON	L		I			
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							EVECUIIAE [	O DE NUMBER	3093	08 10			

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