MSD
Metropolitan Sewer District

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

May 26, 2009

Ms. Carolena Bentley
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

Re: MSD Metro Operations
Timberlake WTP; KPDES No.: KY0043087
Discharge Monitoring Reports – April 2009

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly operator report (MOR) for the Timberlake WTP, KPDES No.: KY0043087 for the month of April 2009.

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

Sincerely,

D.J.Rheinlaender
Process Supervisor, East Region

DJR/Timberlake 0409

Enclosures

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/Locotion if Different)*
NAME MSD TIMBERLAKE STP
ADDRESS C/O CEDAR CREEK STP
LAKE CRDAN CREEK RD
LOUISVILLE KY 40211
FACILITY MST TIMBERLAKE STP
LOCATION PROSPECT KY 40059
ATT: DENNIS THOMASSON SR METPC OPS

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

KY0043087	001 2
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	04	01	TO	09	04	30

MINOR
(SUBLEV)
2 - FINAL
MUNICIPAL DISCHARGE
EFFLUENT
*** NO DISCHARGE [ ] ***

JEFFE

Form Approved.
OMB No. 2040-0004

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) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		8	*******	*******	(19) MG/L	0	1/7 WEEKLY	GR
	PERMIT REQUIREMENT	*******	*******	**** ****	INST MIN	*******	*******				
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		6.6	*******	6.7	(12) SU	0	1/7 WEEKLY	GR
	PERMIT REQUIREMENT	*******	*******	**** ****	6.0 MINIMUM	*******	9.0 MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	138	198	(26) LBS/DY	*******	185	288	(19) MG/L	0	1/7 WEEKLY COMPOS	GP
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*******	REPORT MO AVG	REPORT MX WK AV	MG/L			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	6.4	10.6	(26) LBS/DY	*******	8	12	(19) MG/L	0	1/7 WEEKLY COMPOS	GP
	PERMIT REQUIREMENT	30.0 MO AVG	45.0 MX WK AV	LBS/DY	*******	30 MO AVG	45 MX WK AV	MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	18	24	(26) LBS/DY	*******	24	34	(19) MG/L	0	1/7 WEEKLY COMPOS	GP
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*******	REPORT MO AVG	REPORT MX WK AV	MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.2	0.5	(26) LBS/DY	*******	0.3	0.7	(19) MG/L	0	1/7 WEEKLY COMPOS	GP
	PERMIT REQUIREMENT	3 MO AVG	12 MX WK AV	LBS/DY	*******	3 MO AVG	7.5 MX WK AV	MG/L			
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	0.6	0.8	(19) MG/L	0	3/7 DAILY COMPOS	GP
	PERMIT REQUIREMENT	*******	*******	**** ****	*******	REPORT MO AVG	REPORT MX WK AV			MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Exec Dir M. J Schroder Jr 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	AREA CODE 502	NUMBER 540-6400	YEAR 09	MO 05	DAY 21

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
8415 CEDAR CREEK RD
LOUISVILLE KY 40291

FACILITY MSD TIMBERLAKE STP

LOCATION PROSPECT KY 40059

ATTN: DENNIS THOMASSON, SR METRO OPS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM ***(NPDES)***

DISCHARGE MONITORING REPORT *(DMR)*

PERMIT NUMBER	DISCHARGE NUMBER
KY0043057	001 Z

	MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	09	04	01	TO	09	04	30

MINOR
(SUBR L5)
F - FINAL
MUNICIPAL DISCHARGE
EFFLUENT
*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

JEFF

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING – AVERAGE	QUANTITY OR LOADING – MAXIMUM	QUANTITY OR LOADING – UNITS	QUALITY OR CONCENTRATION – MINIMUM	QUALITY OR CONCENTRATION – AVERAGE	QUALITY OR CONCENTRATION – MAXIMUM	QUALITY OR CONCENTRATION – UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.103	0.146	(03)	******	******	******		0	C/N	C/N
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		******	<0.010	<0.010	(19)	0	1/7	GR
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	0.011 30DA AVG	0.019 DAILY MX	MG/L		WEEKLY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	******	******		******	1	1	(13)	0	1/7	GR
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	200 30DA GEO	400 7 DA GEO	#/100ML		WEEKLY	GRAB
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	218	338	(26)	******	302	506	(19)	0	1/7	CP
80082 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	******	REPORT MO AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPOS
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	3	4	(26)	******	4	5	(19)	0	1/7	CP
80082 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	17 MO AVG	25 MX WK AV	LBS/DY	******	10 MO AVG	15 MX WK AV	MG/L		WEEKLY	COMPOS
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL	SAMPLE MEASUREMENT	******	******		99	******	******	(23)	0	1/30	CA
80091 K 0 0 PERCENT REMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85 MO MIN	******	******	PER-CENT		ONCE/MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******		96	******	******	(23)	0	1/30	CA
81011 K 0 0 PERCENT REMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85 MO MIN	******	******	PER-CENT		ONCE/MONTH	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
[illegible] 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.	[illegible]	502 (AREA CODE)	540 6000 (NUMBER)	09 (YEAR)	05 (MO)	21 (DAY)

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

Timberlake

Timberlake		Report for	Apr-09		Tot. Exc.=	0	(Influent data below.)				
Tot. Flow=	3.079		Concentrations				Pounds				
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	TSS Rem	BOD Rem
4/1/09	0.08	7	3	0.39	1	4.670	2.002	0.260		0.975694	0.994071
4/2/09	0.096								0.777		
4/3/09	0.125										
4/4/09	0.09										
4/5/09	0.115										
4/6/09	0.11										
4/7/09	0.071								0.703		
4/8/09	0.086	9	5	0.055	1	6.455	3.586	0.039	0.689	0.93662	0.976303
4/9/09	0.095								0.700		
4/10/09	0.114										
4/11/09	0.119										
4/12/09	0.101										
4/13/09	0.138										
4/14/09	0.138								0.587		
4/15/09	0.106	12	3	0.055	1	10.608	2.652	0.049	0.619	0.934066	0.984043
4/16/09	0.095								0.541		
4/17/09	0.108										
4/18/09	0.107										
4/19/09	0.146										
4/20/09	0.118										
4/21/09	0.1								0.610		
4/22/09	0.09	5		0.67	1	3.753		0.503	0.488	0.960938	
4/23/09	0.09								0.499		
4/24/09	0.093										
4/25/09	0.101										
4/26/09	0.105										
4/27/09	0.096										
4/28/09	0.104										
4/29/09	0.069										
4/30/09	0.073										
5/1/09											
Average	0.103	8.25	3.67	0.29	1.00	6.37	2.75	0.21	0.62	96%	99%
Maximum	0.146	12.00	5.00	0.67	1.00	10.61	3.59	0.50	0.78		

Timberlake

INFLUENT

		Concentration			Pounds		
Date	Flow	TSS	BOD	NH3	TSS	BOD	NH3
4/1/2009	0.08	288	506	18	192.154	337.603	12.010
4/2/2009	0.096						
4/3/2009	0.125						
4/4/2009	0.09						
4/5/2009	0.115						
4/6/2009	0.11						
4/7/2009	0.071						
4/8/2009	0.086	142	211	34	101.848	151.338	24.386
4/9/2009	0.095						
4/10/2009	0.114						
4/11/2009	0.119						
4/12/2009	0.101						
4/13/2009	0.138						
4/14/2009	0.138						
4/15/2009	0.106	182	188	26	160.895	166.200	22.985
4/16/2009	0.095						
4/17/2009	0.108						
4/18/2009	0.107						
4/19/2009	0.146						
4/20/2009	0.118						
4/21/2009	0.1						
4/22/2009	0.09	128		18	96.077		13.511
4/23/2009	0.09						
4/24/2009	0.093						
4/25/2009	0.101						
4/26/2009	0.105						
4/27/2009	0.096						
4/28/2009	0.104						
4/29/2009	0.069						
4/30/2009	0.073						
5/1/2009							
Average	0.103	185.00	301.67	24.00	137.74	218.38	18.22
Maximum	0.146	288.00	506.00	34.00	192.15	337.60	24.39