

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

March 21, 2011

Crystal Thompson
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Timberlake WQTC; KPDES No.: KY0043087
Discharge Monitoring Reports for February 2011**

Dear Ms. Thompson:

Attached are the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Timberlake WQTC, KPDES No.: KY0043087 for the month of February 2011.

There are no exceedences, overflow reports or bypass reports for this month.

If you have any questions concerning the attached DMRs please contact me at (502)587-5856.

Sincerely,



Richard. Mills
Process Supervisor, East Region

RM/Timberlake 2 11

Enclosures

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



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

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

KY0043087
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL
MUNICIPAL DISCHARGE
EFFLUENT

JEFF

| MONITORING PERIOD | | | | | | |
|-------------------|----|-----|----|------|----|-----|
| YEAR | MO | DAY | TO | YEAR | MO | DAY |
| 11 | 02 | 01 | | 11 | 02 | 28 |

*** NO DISCHARGE [] ***

NOTE: Read instructions before completing this form.

| 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 | ***** | ***** | (19) | 0 | 1/7 | GR |
| 00300 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 7 | ***** | ***** | | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | INST MIN | | | MG/L | | | |
| PH | | ***** | ***** | | 6.8 | ***** | 7.0 | (12) | 0 | 1/7 | GR |
| 00400 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 6.0 | ***** | 7.0 | | | WEEKLY | GRAB |
| EFFLUENT GROSS VALUE | | | | **** | MINIMUM | | MAXIMUM | SU | | | |
| SOLIDS, TOTAL SUSPENDED | | 110 | 275 | (25) | ***** | 162 | 256 | (19) | 0 | 7/28 | CP |
| 00530 8 0 0 | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | REPORT | REPORT | | | WEEKLY | COMPOS |
| RAW SEW/INFLUENT | | MO AVG | MX WK AV | LBS/DY | | MO AVG | MX WK AV | MG/L | | | |
| SOLIDS, TOTAL SUSPENDED | | 15.7 | 27.2 | (25) | ***** | 25 | 27 | (19) | 0 | 7/28 | CP |
| 00530 1 0 0 | PERMIT REQUIREMENT | 50.0 | 75.0 | | ***** | 30 | 45 | | | WEEKLY | COMPOS |
| EFFLUENT GROSS VALUE | | MO AVG | MX WK AV | LBS/DY | | MO AVG | MX WK AV | MG/L | | | |
| NITROGEN, AMMONIA TOTAL (AS N) | | 17 | 23 | (25) | ***** | 36 | 51 | (19) | 0 | 1/7 | CP |
| 00610 8 0 0 | PERMIT REQUIREMENT | REPORT | REPORT | | ***** | REPORT | REPORT | | | WEEKLY | COMPOS |
| RAW SEW/INFLUENT | | MO AVG | MX WK AV | LBS/DY | | MO AVG | MX WK AV | MG/L | | | |
| NITROGEN, AMMONIA TOTAL (AS N) | | 0.2 | 0.4 | (25) | ***** | 0.4 | 0.8 | (19) | 0 | 1/7 | CP |
| 00610 1 2 0 | PERMIT REQUIREMENT | 8 | 12 | | ***** | 5 | 7.5 | | | WEEKLY | COMPOS |
| EFFLUENT GROSS VALUE | | MO AVG | MX WK AV | LBS/DY | | MO AVG | MX WK AV | MG/L | | | |
| PHOSPHORUS, TOTAL (AS P) | | ***** | ***** | | ***** | 0.7 | 1.0 | (19) | 0 | 1/7 | CP |
| 00665 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | ***** | REPORT | REPORT | | | TWICE | COMPOS |
| EFFLUENT GROSS VALUE | | | | **** | | MO AVG | MX WK AV | MG/L | | MONTH | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. Schardein 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.

Richard Mills
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **502-540-6000**
DATE **11 03 23**
AREA CODE NUMBER YEAR MO DAY

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

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

KY0043087
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

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

JEFFE

| MONITORING PERIOD | | | | | | |
|-------------------|----|-----|----|------|----|-----|
| YEAR | MO | DAY | TO | YEAR | MO | DAY |
| 11 | 02 | 01 | | 11 | 02 | 28 |

NOTE: Read Instructions before completing this form.

| PARAMETER | SAMPLE MEASUREMENT | 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 | 0-074 | 0-163 | (03) | ***** | ***** | ***** | | 0 | ON | CN | |
| 50050 1 0 0 | PERMIT REQUIREMENT | REPORT 30DA AVG | REPORT DAILY MX | MGD | ***** | ***** | ***** | **** | | CONTINUOUS | |
| EFFLUENT GROSS VALUE | | | | | | | | | | | |
| CHLORINE, TOTAL RESIDUAL | ***** | ***** | | ***** | <0.010 | <0.010 | (17) | 0 | 1/7 | GR | |
| 50060 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 0.011 | 0.019 | | | WEEKLY | GRAB | |
| EFFLUENT GROSS VALUE | | | | | 30DA AVG | DAILY MX | MG/L | | | | |
| COLIFORM, FECAL GENERAL | ***** | ***** | | ***** | 1 | 1 | (13) | 0 | 1/7 | GR | |
| 74055 1 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 200 | 400 | #/100ML | | WEEKLY | GRAB | |
| EFFLUENT GROSS VALUE | | | | | 30DA GED | 7 DA GED | | | | | |
| BOD, CARBONACEOUS 05 DAY, ZOC | 103 | 149 | (26) | ***** | 209 | 266 | (17) | 0 | 1/7 | CP | |
| 80082 0 0 0 | PERMIT REQUIREMENT | REPORT MD AVG | REPORT MX WK AV | LBS/DY | ***** | REPORT MD AVG | REPORT MX WK AV | MG/L | | WEEKLY | CORPUS |
| RAW SEW/INFLUENT | | | | | | | | | | | |
| BOD, CARBONACEOUS 05 DAY, ZOC | 3 | 4 | (26) | ***** | 5 | 8 | (17) | 0 | 1/7 | CP | |
| 80082 1 0 0 | PERMIT REQUIREMENT | 17 | 25 | | 10 | 15 | | | WEEKLY | CORPUS | |
| EFFLUENT GROSS VALUE | | MD AVG | MX WK AV | LBS/DY | | MD AVG | MX WK AV | MG/L | | | |
| BOD, CARB-5 DAY, ZOC | ***** | ***** | | ***** | 97 | ***** | ***** | (20) | 0 | 1/28 | CA |
| 80091 K 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 85 | ***** | ***** | PER-CENT | | ONCE/MONTH | |
| PERCENT REMOVAL | | | | | MD MIN | | | | | | |
| SOLIDS, SUSPENDED PERCENT REMOVAL | ***** | ***** | | ***** | 85 | ***** | ***** | (20) | 0 | 1/28 | CA |
| 81011 K 0 0 | PERMIT REQUIREMENT | ***** | ***** | **** | 85 | ***** | ***** | PER-CENT | | ONCE/MONTH | |
| PERCENT REMOVAL | | | | | MD MIN | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
HJ Schardein 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.

Richard Mills
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **502-540-6000**
 DATE **11 03 23**
 AREA CODE NUMBER YEAR MO DAY

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

Timberlake

| Date | Flow | INFLUENT Concentration | | | Pounds | | |
|-----------|-------|------------------------|--------|-------|---------|---------|--------|
| | | TSS | BOD | NH3 | TSS | BOD | NH3 |
| 2/1/2011 | 0.088 | | | | | | |
| 2/2/2011 | 0.067 | 190 | 266 | 25 | 106.168 | 148.635 | 13.970 |
| 2/3/2011 | 0.059 | | | | | | |
| 2/4/2011 | 0.059 | | | | | | |
| 2/5/2011 | 0.076 | | | | | | |
| 2/6/2011 | 0.075 | | | | | | |
| 2/7/2011 | 0.069 | | | | | | |
| 2/8/2011 | 0.052 | | | | | | |
| 2/9/2011 | 0.06 | 256 | 199 | 31 | 128.102 | 99.580 | 15.512 |
| 2/10/2011 | 0.052 | | | | | | |
| 2/11/2011 | 0.063 | | | | | | |
| 2/12/2011 | 0.072 | | | | | | |
| 2/13/2011 | 0.08 | | | | | | |
| 2/14/2011 | 0.072 | | | | | | |
| 2/15/2011 | 0.061 | | | | | | |
| 2/16/2011 | 0.053 | 98 | 124 | 51 | 43.318 | 54.810 | 22.543 |
| 2/17/2011 | 0.073 | | | | | | |
| 2/18/2011 | 0.067 | | | | | | |
| 2/19/2011 | 0.062 | | | | | | |
| 2/20/2011 | 0.073 | | | | | | |
| 2/21/2011 | 0.082 | | | | | | |
| 2/22/2011 | 0.057 | | | | | | |
| 2/23/2011 | 0.054 | 246 | 246 | 36 | 110.789 | 110.789 | 16.213 |
| 2/24/2011 | 0.104 | | | | | | |
| 2/25/2011 | 0.163 | 202 | | | 274.603 | | |
| 2/26/2011 | 0.09 | 60 | | | 45.036 | | |
| 2/27/2011 | 0.088 | 80 | | | 58.714 | | |
| 2/28/2011 | 0.107 | | | | | | |
| Average | 0.074 | 161.71 | 208.75 | 35.75 | 109.53 | 103.45 | 17.06 |
| Maximum | 0.163 | 256.00 | 266.00 | 51.00 | 274.60 | 148.64 | 22.54 |

Timberlake

| Timberlake | Report for | Feb-11 | | Tot. Exc.= | | Pounds | | | | | |
|------------|------------|----------------|------|------------|-------|--------|-------|-------|------------|----------|----------|
| Tot. Flow= | 2.078 | Concentrations | | 0 | | | | | | | |
| Date | Flow | TSS | BOD | NH3 | Fecal | TSS | BOD | NH3 | Tot. Phos. | TSS Rem | BOD Rem |
| 2/1/11 | 0.088 | | | | | | | | | | |
| 2/2/11 | 0.067 | 40 | 8 | 0.28 | 1 | 22.351 | 4.470 | 0.156 | 0.637 | 0.789474 | 0.969925 |
| 2/3/11 | 0.059 | | | | | | | | | | |
| 2/4/11 | 0.059 | | | | | | | | | | |
| 2/5/11 | 0.076 | | | | | | | | | | |
| 2/6/11 | 0.075 | | | | | | | | | | |
| 2/7/11 | 0.069 | | | | | | | | | | |
| 2/8/11 | 0.052 | | | | | | | | | | |
| 2/9/11 | 0.06 | 18 | 4 | 0.17 | 1 | 9.007 | 2.002 | 0.085 | 0.447 | 0.929688 | 0.979899 |
| 2/10/11 | 0.052 | | | | | | | | | | |
| 2/11/11 | 0.063 | | | | | | | | | | |
| 2/12/11 | 0.072 | | | | | | | | | | |
| 2/13/11 | 0.08 | | | | | | | | | | |
| 2/14/11 | 0.072 | | | | | | | | | | |
| 2/15/11 | 0.061 | | | | | | | | | | |
| 2/16/11 | 0.053 | 8 | 3 | 0.84 | 1 | 3.536 | 1.326 | 0.371 | 0.601 | 0.918367 | 0.975806 |
| 2/17/11 | 0.073 | | | | | | | | | | |
| 2/18/11 | 0.067 | | | | | | | | | | |
| 2/19/11 | 0.062 | | | | | | | | | | |
| 2/20/11 | 0.073 | | | | | | | | | | |
| 2/21/11 | 0.082 | | | | | | | | | | |
| 2/22/11 | 0.057 | | | | | | | | | | |
| 2/23/11 | 0.054 | 58 | 6 | 0.28 | 1 | 26.121 | 2.702 | 0.126 | 0.968 | 0.764228 | 0.97561 |
| 2/24/11 | 0.104 | | | | | | | | | | |
| 2/25/11 | 0.163 | 20 | | | | 27.188 | | | | 0.90099 | |
| 2/26/11 | 0.09 | 12 | | | | 9.007 | | | | 0.8 | |
| 2/27/11 | 0.088 | 17 | | | | 12.477 | | | | 0.7875 | |
| 2/28/11 | 0.107 | | | | | | | | | | |
| Average | 0.074 | 24.71 | 5.25 | 0.39 | 1.00 | 15.67 | 2.63 | 0.18 | 0.66 | 85% | 97% |
| Maximum | 0.163 | 27.00 | 8.00 | 0.84 | 1.00 | 27.19 | 4.47 | 0.37 | 0.97 | | |