



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

February 14, 2012

Cheryl Edwards
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

Re: MSD Metro Operations
Timber Lake WQTC; KPDES No.: KY 0043087
Discharge Monitoring Report for January 2012

Dear Ms. Edwards:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Timber Lake WQTC; KPDES No.: KY0043087 for the month of January of 2012..

There were no exceedences, overflows or bypasses to report this month.

If you have any questions concerning the attached DMRs, please contact me at (502) 587-5832.

Sincerely,


Richard Mills
Process Supervisor of Metro Operations

RM/ Timber Lake 01/12

Enclosures

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



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

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

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**

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

KY0043087
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
 (SUBR LV)
 F - FINAL
 MUNICIPAL DISCHARGE
 EFFLUENT
 *** NO DISCHARGE 1 ☐ ***

JEFFE

NOTE: Read Instructions before completing this form.

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
12	01	01		12	01	31

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	*****	*****		9	*****	*****	(19)	0	1/1	Gr
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	****	7	*****	*****			WEEKLY	GRAB
EFFLUENT GROSS VALUE				****	INST MIN			MG/L			
PH	SAMPLE MEASUREMENT	*****	*****		6.5	*****	7.9	(12)	0	1/1	Gr
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			WEEKLY	GRAB
EFFLUENT GROSS VALUE				****	MINIMUM		MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	222	428	(26)	*****	366	800	(19)	0	1/7	CP
00530 0 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	SAMPLE MEASUREMENT	9	14	(26)	*****	18	28	(19)	0	1/7	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)	SAMPLE MEASUREMENT	15	19	(26)	*****	27	31	(19)	0	1/7	CP
00610 0 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)	SAMPLE MEASUREMENT	0.2	0.3	(26)	*****	0.4	0.6	(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)	SAMPLE MEASUREMENT	*****	*****		*****	0.5	0.5	(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		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			
Greg Heitzman Interim Executive Director						Richard Mills SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		502.540-6000	12	2	20
TYPED OR PRINTED		AREA CODE		NUMBER		YEAR		MO		DAY	

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

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

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

KY0043087
 PERMIT NUMBER
 001 2
 DISCHARGE NUMBER

MINOR
 (SUBR LV)
 F - FINAL
 MUNICIPAL DISCHARGE
 EFFLUENT
 *** NO DISCHARGE 1-1-1 ***
 NOTE: Read Instructions before completing this form.

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	12	01	01		12	01	01

PARAMETER	X	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 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.075	0.132	(03)	*****	*****	*****		0	CN	CN	
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		CONTINUOUS	CONTINUOUS	
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.010	<0.010	(19)	0	1/1	Gr	
	PERMIT REQUIREMENT	*****	*****	****	*****	0.011	0.019			WEEKLY GRAB		
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	2	16	(13)	0	1/7	Gr	
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400 #/			WEEKLY GRAB		
BOD, CARBONACEOUS 5 DAY, 20C 80082 0 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	141	243	(25)	*****	253	534	(19)	0	1/7	CP	
	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WEEKLY COMPOS		
BOD, CARBONACEOUS 5 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	3	4	(25)	*****	6	6	(19)	0	1/7	CP	
	PERMIT REQUIREMENT	17 MD AVG	25 MX WK AV	LBS/DY	*****	10 MD AVG	15 MX WK AV	MG/L		WEEKLY COMPOS		
BOD, CARE-5 DAY, 20 DEG C, PERCENT REMOVAL 80091 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		98	*****	*****	(23)	0	CA	CA	
	PERMIT REQUIREMENT	*****	*****	****	85 MD MIN	*****	*****	PER-CENT		ONCE / MONTH	CALCULATED	
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0 PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		95	*****	*****	(23)	0	CA	CA	
	PERMIT REQUIREMENT	*****	*****	****	85 MD MIN	*****	*****	PER-CENT		ONCE / MONTH	CALCULATED	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER					Richard Mills			TELEPHONE		DATE		
Greg Hietzman Interim Executive Director								102-540-6000		12 2 20		
TYPED OR PRINTED					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			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
1/1/2012	0.07078						
1/2/2012	0.06908						
1/3/2012	0.05242	80	183	31	34.975	80.004	13.553
1/4/2012	0.06103						
1/5/2012	0.0622						
1/6/2012	0.06245						
1/7/2012	0.0665						
1/8/2012	0.06226						
1/9/2012	0.0546	800	534	27	364.291	243.164	12.295
1/10/2012	0.04928						
1/11/2012	0.07608						
1/12/2012	0.07316						
1/13/2012	0.06623						
1/14/2012	0.07339						
1/15/2012	0.06644						
1/16/2012	0.08126						
1/17/2012	0.07638	98	77	30	62.427	49.050	19.110
1/18/2012	0.06039						
1/19/2012	0.07067						
1/20/2012	0.06968						
1/21/2012	0.07403						
1/22/2012	0.08241						
1/23/2012	0.10594	484	216	18	427.633	190.845	15.904
1/24/2012	0.07267						
1/25/2012	0.0631						
1/26/2012	0.13237						
1/27/2012	0.12324						
1/28/2012	0.09076						
1/29/2012	0.08713						
1/30/2012	0.08781						
1/31/2012	0.08102						
Average	0.075	365.50	252.50	26.50	222.33	140.77	15.22
Maximum	0.132	800.00	534.00	31.00	427.63	243.16	19.11

Timberlake

[illegible]