



MSD

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

January 23, 2009

Ms. Carolena Bentley
Kentucky Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Yorktown WTP; KPDES No.: KY0036323
Discharge Monitoring Reports –December 2008.**

Dear Ms. Bentley:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Yorktown WTP, KPDES No.: KY0036323 for the month of December 2008.

If you have any questions concerning the attached DMRs, please contact me at (502)540-6031.

Sincerely,

John Kessel
Process Supervisor West Region

JMK/Yorktown 1208

Enclosures

cc: T. Singleton
R. Shaw
C. Roth



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

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

MINOR
(SUBR LV)
7 - FINAL
SANITARY WASTEWATER
EFFLUENT

JEFFS

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

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

NAME YORKTOWN STP MSD
ADDRESS C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY YORKTOWN STP MSD
LOCATION LOUISVILLE KY 40214
ATTN: DENNIS THOMASSON, SR METRO OPS

KY0036323
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	08	12	01		08	12	31

PARAMETER	X	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	*****	*****		7.2	*****	*****	(19)	0	1/3	Grab
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	8	*****	*****	MG/L		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		6.8	*****	6.9	(12)	0	1/3	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	8.0	*****	9.0	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	6.9	10.9	(26)	*****	4	7	(19)	0	1/3	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	37.5	75.0	LBS/DY	*****	30	50	MG/L		WEEKLY	COMPLUS
		30DA AVG	DAILY MX			30DA AVG	DAILY MX				
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	4.5	9.5	(26)	*****	3	6	(19)	0	1/3	Comp
00610 1 2 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	12.5	25.0	LBS/DY	*****	10	20	MG/L		WEEKLY	COMPLUS
		30DA AVG	DAILY MX			30DA AVG	DAILY MX				
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	2.1	2.3	(19)	0	1/3	Comp
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	MG/L		WEEKLY	COMPLUS
		*****	*****	****	*****	30DA AVG	DAILY MX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.214	0.573	(03)	*****	*****	*****		0	1/2	1/2
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		QUART IN CON	IN
		30DA AVG	INST MAX			*****	*****	****		DUOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.010	<0.010	(19)	0	1/3	Grab
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.011	0.014	MG/L		WEEKLY	GRAB
		*****	*****	****	*****	30DA AVG	DAILY MX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Exec Director
D.S. Schaefer, 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

TELEPHONE
DATE
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)

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

FACILITY YORKTOWN STP MSD

LOCATION LOUISVILLE KY 40214

ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0036323
 PERMIT NUMBER

001 1
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MINOR
 (SUBR LV)

F - FINAL

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 EFFLUENT

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	12	01	00	12	01


FROM

TO

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL GENERAL 74053 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1	2	(13)	0	1/4	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	#/		WEEKLY	GRAB
BOD, CARBONACEOUS 05 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	7.1	9.8	(26)	*****	5	7	(19)	0	1/2	Comp
	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY	*****	10	20	MG/L		WEEKLY	COMPO
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Exec Dir.
 H.J. Schaefer Jr
 TYPED OR PRINTED

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 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 502 546-6886
 DATE
 09 01 07
 AREA CODE NUMBER YEAR MO DAY

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

Yorktown Tot. Flow= Date	Report for 6.641 Flow	Dec-08 Concentrations TSS BOD	NH3	Tot. Exc.= Fecal	0 TSS	Pounds BOD	NH3
12/1/08	0.186						
12/2/08	0.168	5	7	1.6	2	7.006	2.242
12/3/08	0.159						
12/4/08	0.171						
12/5/08	0.207						
12/6/08	0.17						
12/7/08	0.183						
12/8/08	0.184						
12/9/08	0.186	7	4		1	10.859	6.205
12/10/08	0.235						
12/11/08	0.237						
12/12/08	0.201						
12/13/08	0.174						
12/14/08	0.185						
12/15/08	0.162						
12/16/08	0.211	3	3	0.95	1	5.279	1.672
12/17/08	0.205						
12/18/08	0.138						
12/19/08	0.251						
12/20/08	0.213						
12/21/08	0.246						
12/22/08	0.175	3		6.5	1	4.379	9.487
12/23/08	0.15						
12/24/08	0.573						
12/25/08	0.343						
12/26/08	0.151						
12/27/08	0.157						
12/28/08	0.255						
12/29/08	0.303						
12/30/08	0.218						
12/31/08	0.244						
Average	0.214	4.50	4.67	3.02	1.19	6.88	4.47
Maximum	0.573	7.00	7.00	6.50	2.00	10.86	9.49
Exceed.	29	0	0	0	0	0	0
Day Viol.							
Mo. Viol							
Minimum	0.138 MIN		MAX				
DO (min)							
pH							
TRC							

This plant has a summer ammonia limit of 4/8 mg/L and 5/10 pounds
This plant has a winter ammonia limit of 10/20 mg/L and 12.5/25 pounds
Winter limits are from November - April, Summer is from May - October