



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

November 19, 2009

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

Re: MSD Metro Operations
Yorktown WQTC; KPDES No.: KY0036323
Discharge Monitoring Reports - October 2009.

Dear Ms. Bentley:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Yorktown WQTC, KPDES No.: KY0036323 for the month of October 2009.

For the month of October there were no exceedances, bypasses or overflow reports for Yorktown WQTC.

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

Sincerely,

A handwritten signature in black ink, appearing to read "J. Kessel", is written over a horizontal dotted line.

John Kessel
Process Supervisor West Region

JMK/Yorktown 1009

Enclosures

cc: T. Singleton
R. Shaw
C. Roth



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

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

NAME YORKTOWN WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY YORKTOWN WQTC 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
 DISCHARGE NUMBER

MINOR
 (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER
 EFFLUENT

JEFFE

Form Approved.
 OMB No. 2040-0004

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	10	01		07	10	31

*** NO DISCHARGE [] ***

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)	SAMPLE MEASUREMENT	*****	*****		7	*****	*****	(19)			
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	****	INST MIN	*****	*****	MG/L		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7	*****	7.3	(12)			
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	5U		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	3.3	3.8	(26)	*****	2	2	(19)			
00530 1 0 0	PERMIT REQUIREMENT	37.5 30DA AVG	75.0 DAILY MX	LBS/DY	*****	30 30DA AVG	60 DAILY MX	MG/L		WEEKLY	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	0.5	1.2	(26)	*****	0.2	0.4	(19)			
00610 1 1 0	PERMIT REQUIREMENT	5.00 30DA AVG	10.0 DAILY MX	LBS/DY	*****	4 30DA AVG	8 DAILY MX	MG/L		WEEKLY	COMPOS
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	1.4	2.2	(19)			
00665 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 30DA AVG	REPORT DAILY MX	MG/L		WEEKLY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.279	0.555	(03)	*****	*****	*****				
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT INST MAX	MGD	*****	*****	*****	****		CONTIN	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.010	<0.010	(19)			
50060 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	0.011 30DA AVG	0.019 DAILY MX	MG/L		WEEKLY	GRAB
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			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

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

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

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KY0036323
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001 1
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MINOR
 (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER
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 *** NO DISCHARGE 1 1 ***

JEFFE

Form Approved,
 OMB No. 2040-0004

MONITORING PERIOD							
YEAR			MO	DAY	YEAR		
FROM	09	10	01	TO	09	10	31

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			
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	1	1	(13)			
74055 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	#/		WEEKLY	GRAB
EFFLUENT GROSS VALUE				****		30DA GED	7 DA GED	100ML			
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	5.1	7.5	(26)	*****	3	5	(19)			
80082 1 0 0	PERMIT REQUIREMENT	12.5	25.0		*****	10	20			WEEKLY	COMPOS
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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			AREA CODE	NUMBER	YEAR	MO	DAY

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

Yorktown	Report for		Oct-09	Tot. Exc.=		0				
Tot. Flow=	8.643			Concentrations			Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	
10/1/09	0.179	2	5	0.056	1	2.986	7.464	0.084		
10/2/09	0.348								2.16	
10/3/09	0.285									
10/4/09	0.259									
10/5/09	0.225									
10/6/09	0.198									
10/7/09	0.199									
10/8/09	0.228	2	2	0.34	1	3.803	3.803	0.647	0.909	
10/9/09	0.555									
10/10/09	0.424									
10/11/09	0.325									
10/12/09	0.247									
10/13/09	0.214									
10/14/09	0.288									
10/15/09	0.369	1	2	0.4	1	3.077	6.155	1.231	0.527	
10/16/09	0.267									
10/17/09	0.304									
10/18/09	0.213									
10/19/09	0.213									
10/20/09	0.195									
10/21/09	0.19									
10/22/09	0.188	2	2	0.056	1	3.136	3.136	0.088	2.03	
10/23/09	0.224									
10/24/09	0.259									
10/25/09	0.239									
10/26/09	0.209									
10/27/09	0.21									
10/28/09	0.475									
10/29/09	0.302									
10/30/09	0.303									
10/31/09	0.509									
Average	0.279	1.75	2.75	0.21	1.00	3.25	5.14	0.51	1.41	
Maximum	0.555	2.00	5.00	0.40	1.00	3.80	7.46	1.23	2.16	
Exceed.	31	0	0	0	0	0	0	0		