

700 West Liberty Street | Louisville, KY 40203-1911 Phone: 502.540.6000 | LouisvilleMSD.org

January 23, 2023

Crystal Dennis 300 Sower Blvd., 3rd Floor Frankfort, Kentucky 40601

RE: ASH AVE STP, KPDES No: KY0024724

Discharge Monitoring Report for December 2022.

Dear Ms. Dennis:

Attached are the Discharge Monitoring Report (DMR) for the ASH AVE STP, for the month December 2022. Also attached is fourth quarter is biomonitoring.

There were no overflows or bypasses.

There were 7 exceedances,

TSS monthly average limit 30.0 mg/L with a result of 57.0 mg/L.

TSS maximum weekly average 45.0 mg/L with a result of 76.0 mg/L.

BOD monthly average limit 10.0 mg/L with a result of 16.0 mg/L

BOD maximum weekly average limit of 15.0 mg/L with a result of 18.0 mg/L.

Nitrogen ammonia monthly average 7.0 mg/L with a result of 33.55 mg/L.

Nitrogen ammonia daily maximum 10.5 mg/l with a result of 38.4 mg/L.

E.coli 30 Day GeoMean limit 130 #100mL with a result of 192 #100mL.

If you have any questions concerning the attached DMR's, please contact me at (502)587-5858.

Sincerely,

Curt Otto

Process Supervisor

CEO/ AA 12/22.

Cc: V. Teague, B. Tinnel

DMR Copy of Record

Doumis	
Permit	

KY0024724 Permit #:

001 External Outfall

Major: No Permittee: Louisville and Jefferson County MSD

Permittee Address:

700 W Liberty St Louisville, KY 40203

001-1 SANITARY WASTEWATER

Facility:

Facility Location:

ASH AVENUE WWTP

NetDMR Validated

KY 362 CRESTWOOD, KY 40014

Report Dates & Status

Permitted Feature:

DMR Due Date: Status: **Monitoring Period:** From 12/01/22 to 12/31/22 01/28/23

Discharge:

Considerations for Form Completion

Principal Executive Officer

Form NODI:					

First Na	ıme: Ja	mes					Title:			ļ	Execut	tive Directo	or		Т	elephone: 502-5	40-6000			
_ast Na	me: Pa	arrot																		
Vo Data	a Indicator (NODI)																			
orm N	ODI:																			
	Parameter	Monitoring	Season					antity or Lo						Quality or Conce				# of	Frequency of	Sample
Code	Name	Location	#	NODI		Qualifier 1	Value 1	Qualifier 2	Value 2	Units Q	ualifier 1	value 1	Qualifier 2	Value 2	Qualifie 3	value 3	Units	Ex.	Analysis	Туре
					Sample					=		7.2					19 - mg/L	0	1/07 - Weekly	GR - GRA
00300	Oxygen, dissolved [DO]	1 - Effluent	0		Permit Req.					>:	=	7.0 INST MIN					19 - mg/L	0	1/07 - Weekly	GR - GRAE
00000	exygen, alcontea [20]	Gross			Value															
					NODI Sample					=		6.3			=	7.35	12 - SU	0:	1/07 - Weekly	GR - GRAE
		1 - Effluent			Permit							6.0 MINIMUM			<=	9.0 MAXIMUM	12 - SU		1/07 - Weekly	GR - GRAE
00400	pH	Gross	0		Req. Value					>:	_	MINIMUM			-	5.0 WAXIIVIOW	12 - 30	U	1/07 - Weekly	GK - GKAI
					NODI															
					Sample								=	57.0	=	76.0	19 - mg/L	0.	1/07 - Weekly	CP - COMPOS
X 00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.								<=	30.0 MO AVG	<=	45.0 MX WK AV	19 - mg/L	0	1/07 - Weekly	CP - COMPOS
00550					Value NODI															
					Sample															
00600	Nitrogen, total [as N]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	0	1/07 - Weekly	CP - COMPOS
	The state of the s	Gross			Value NODI									9 - Conditional Monitoring - Not Required This Period		9 - Conditional Monitoring - Not Required Theorem Period	is			
					Sample								=	33.55	=	38.4	19 - mg/L	0	1/07 - Weekly	CP - COMPOS
X 00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	2		Permit Req.								<=	7.0 MO AVG	<=	10.5 DAILY MX	19 - mg/L	0	1/07 - Weekly	CP - COMPOS
00610					Value NODI															
					Sample								=	4.97	=	6.71	19 - mg/L	0	1/07 - Weekly	CP - COMPOS
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	0.	1/07 - Weekly	CP - COMPOS
	, ,	Gross			Req. Value															COMPOS
					NODI					02										
					Sample		0.155		0.017	03 - MGD								0	1/07 - Weekly	IN - INSTA
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0		Permit Req.		Req Mon MO AVG		Req Mon MX WK AV	03 - MGD								0.	1/07 - Weekly	IN - INSTA
	p.s	0.000			Value NODI															
					Sample								=	0.01	=	0.01	19 - mg/L	0.	1/07 - Weekly	GR - GRAI
E0000	Chloring total residual	1 - Effluent	0		Permit								<=	0.011 MO AVG	<=	0.019 DAILY MX	19 - mg/L			GR - GRAE
50060	Chlorine, total residual	Gross	0		Req.															
					NODI Sample								=	192.0	=	104.0	13 -	0	1/07 - Weekly	GR - GRAI
X	E. coli	1 - Effluent	0		Permit									130.0 30DA GEO	<=	240.0 7 DA GEO	#/100mL 13 -		1/07 - Weekly	GR - GRAI
51040	L. 00II	Gross			Req. Value										\ <u></u>	2.5.5 / 5/(020	#/100mL		Trookly	OIL OILA
					NODI															CP -
																				-

Y	. ===		Sample		=	16.0	=	18.0	19 - mg/L	01/07 - Weekly	COMPOS
BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	 Permit Req.		<=	10.0 MO AVG	<=	15.0 MX WK AV	19 - mg/L	01/07 - Weekly	CP - COMPOS
			Value NODI								

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

	Parameter	Monitoring Location	Field	Tuno	Description	Acknowledge
Code	Name	Monitoring Location	rielu	Туре	Description	Acknowledge
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
51040	E. coli	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00530	Solids, total suspended	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00530	Solids, total suspended	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes

Comments

Attachments

Name Name	Туре	Size
DEC22ASHCOVER.pdf	pdf	46346.0

Report Last Saved By

Louisville and Jefferson County MSD

User: CURT.OTTO@LOUISVILLEMSD.ORG

Name: Curt Otto

E-Mail: curt.otto@louisvillemsd.org

Date/Time: 2023-01-23 10:54 (Time Zone: -05:00)

Report Last Signed By

User: CURT.OTTO@LOUISVILLEMSD.ORG

Name: Curt Otto

E-Mail: curt.otto@louisvillemsd.org

Date/Time: 2023-01-23 10:54 (Time Zone: -05:00)

DMR Copy of Record

Permit																			
Permit #:		KY00247	24		Perm	ittee:		L	_ouisville and .	Jefferson Cour	nty MSD			Faci	lity:		ASH A\	/ENUE WWTP	
Major:		No			Permi	ittee Addr	ess:	7 L	700 W Liberty _ouisville, KY 4	St 40203				Faci	lity Location		KY 362 CREST	WOOD, KY 40014	
Permitted Fe	eature:	001 External 0	Outfall		Disch	narge:			001-2 QUARTERLY										
Report Date	es & Status				,														
Monitoring F	Period:	From 10/	01/22 to 12/31/22		DMR	Due Date:		0	01/28/23					Stat	us:		NetDMI	R Validated	
Consideration	ions for Form Cor	mpletion			'									'					
Principal Ex	xecutive Officer																		
First Name:		James			Title:			Е	Executive Dire	ctor				Tele	phone:		502-540	0-6000	
Last Name:		Parrot												ı					
No Data Indi	licator (NODI)				,														
Form NODI:																			
	Parameter		Monitoring Locatio	n Season#	Param. NODI				or Loading					oncentrat			# of Ex.	Frequency of Analys	is Sample Ty
Code	Name					Sample	Qualifier 1	Value 1 Q	Qualifier 2 Value	2 Units Qualifier	1 Value 1	Qualifier 2	Value 2 C		Value 3 1.0	Units 2G - tox chronic		01/90 - Quarterly	CP - COMP
						Odilipic							<			A 2G - tox chronic		01/90 - Quarterly	CP - COMP
61406 Toyi	iaity final aana tay	daity unita	1 Effluent Cross	0		Permit Req.											,	U1/30 Qualitary	
61406 Toxi	icity, final conc tox	cicity units	1 - Effluent Gross	0		Permit Req. Value NODI											<u></u>	01/30 Quarterly	0. 00
		cicity units	1 - Effluent Gross	0														01/30 Quantity	
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