



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

January 17, 2025

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

**RE: Cedar Creek WQTC, KPDES No: KY0098540  
Discharge Monitoring Report for December 2024.**

Dear Mrs. Dennis:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operator Report (MOR) for the Cedar Creek WQTC, for the month of December 2024.

Also, attached is 4<sup>th</sup> quarter biomonitoring

There were no exceedances, overflows or bypasses to report.

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

Sincerely,

A handwritten signature in blue ink, appearing to read 'Staci Huber', with a long horizontal flourish extending to the right.

Staci Huber  
Process Supervisor

SH/ Cedar Creek. 12/24.

Enclosures

Cc: V. Teague  
K. Robinson  
M. Saylor

NAME OF TREATMENT PLANT CEDAR CREEK WTP COUNTY JEFFERSON MONTH OF: December 2024  
KPD'S PERMIT NUMBER KY0098540 PLANT CAPACITY 7.5 MGD RECEIVING STREAM CEDAR CREEK

DATE	TOTAL FLOW (MILLION GALLONS)	RAW SEWAGE		pH	SETTLABLE SOLIDS (mg/L)		DISSOLVED OXYGEN (mg/L)		SUSPENDED SOLIDS (mg/L)		5 DAY CBOD (mg/L)		ACTIVATED SLUDGE		AERATION BASIN				SLUDGE HANDLING						FINAL		Total Phosphorus	Total Nitrogen	TOTAL FLOW INF. (MILLION GALLONS)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
		GRIT REMOVED (CUBIC FEET)	SCREENINGS (CUBIC FEET)		RAW	FINAL	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	STREAM ABOVE	FINAL EFFLUENT	STREAM BELOW	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	RETURN		WAST ID	DISSOLVED OXYGEN (mg/L)	MLSS (mg/L) x 1000	MLVSS (mg/L) x 1000	SETTLED SLUDGE VOLUME					RAW		HAULED		WITHDRAWN FALLS x 1000	NH3-N (mg/L)	ECOLI																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
																			GAL/DAY x 1000	MLSS x 1000					GAL/DAY x 1000	30 MIN.				60 MIN.	FALLS x 1000	DRY SOLIDS	% VOLATILE SOLIDS				DRY SOLIDS	% VOLATILE SOLIDS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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RESIDENTIAL  
COMMERCIAL  
INDUSTRIAL

INDUSTRIAL WASTE POPULATION EQUIVALENT

65855  
FLOW

51818  
CBOD

61514  
TSS

chris coomer  
OPERATOR

18291  
CERT. NO.

TOTAL NUMBER OF SEWER CONNECTIONS

SEWER CONNECTIONS 0 X 4 = 0 SEWERED POPULATION

PLANT TELEPHONE

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the [NPDES eReporting Help Desk](#) for further guidance. Please note that EPA may contact you after you submit this report for more information.

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with this permit and EPA NPDES regulations 40 CFR 122.41(l)(4)(i). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average 2 hours per outfall. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Permit

Permit #:  
Major:

KY0098540  
Yes

Permittee:  
Permittee Address:

Cedar Creek WQTC MSD  
700 W Liberty St  
Louisville, KY 40203

Facility:  
Facility Location:

CEDAR CREEK WQTC MSD  
8405 CEDAR CREEK RD  
LOUISVILLE, KY 40291

Permitted Feature:

001  
External Outfall

Discharge:

001-1  
MUNICIPAL DISCHARGE

Report Dates & Status

Monitoring Period:

From 12/01/24 to 12/31/24

DMR Due Date:

01/28/25

Status:

NetDMR Validated

Considerations for Form Completion

Principal Executive Officer

First Name:  
Last Name:

James  
Parrott

Title:

Executive Director

Telephone:

502-540-6000

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0	--	Sample						=	8.3					19 - mg/L	0	01/07 - Weekly	GR - Grab
					Permit Req.						>=	7.0 INST MIN					19 - mg/L			
					Value NODI															
00400	pH	1 - Effluent Gross	0	--	Sample						=	7.7			=	8.1	12 - SU	0	01/07 - Weekly	GR - Grab
					Permit Req.						>=	6.0 MINIMUM			<=	9.0 MAXIMUM	12 - SU			
					Value NODI															
00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample	=	175.0	=	236.0	26 - lb/d			=	3.0	=	3.0	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.	<=	1877.0 MO AVG	<=	2815.0 MX WK AV	26 - lb/d			<=	30.0 MO AVG	<=	45.0 MX WK AV	19 - mg/L			
					Value NODI															
00530	Solids, total suspended	G - Raw Sewage Influent	0	--	Sample								=	224.0	=	364.0	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.									Req Mon MO AVG		Req Mon MX WK AV	19 - mg/L			
					Value NODI															
00600	Nitrogen, total [as N]	1 - Effluent Gross	0	--	Sample								=	8.0	=	9.0	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.									Req Mon MO AVG		Req Mon MX WK AV	19 - mg/L			
					Value NODI															
00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	2	--	Sample	=	24.0	=	37.0	26 - lb/d			=	0.4	=	0.7	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.	<=	626.0 MO AVG	<=	939.0 MX WK AV	26 - lb/d			<=	10.0 MO AVG	<=	15.0 MX WK AV	19 - mg/L			
					Value NODI															
00665	Phosphorus, total [as P]	1 - Effluent Gross	2	--	Sample								=	0.36	=	0.8	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.								<=	2.0 MO AVG	<=	3.0 MX WK AV	19 - mg/L			
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	6.915	=	9.467	03 - MGD								0	99/99 - Continuous	CN - Continuous
					Permit Req.		Req Mon MO AVG		Req Mon MX WK AV	03 - MGD										
					Value NODI															
50050	Flow, in conduit or thru treatment plant	G - Raw Sewage Influent	0	--	Sample	=	8.057	=	10.748	03 - MGD								0	99/99 - Continuous	CN - Continuous
					Permit Req.		Req Mon MO AVG		Req Mon MX WK AV	03 - MGD										
					Value NODI															
51040	E. coli	1 - Effluent Gross	0	--	Sample								=	2.0	=	8.0	13 - #/100mL	0	01/07 - Weekly	GR - Grab
					Permit Req.								<=	130.0 30DA GEO	<=	240.0 7 DA GEO	13 - #/100mL			

					Value NODI														
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	--	Sample	=	150.0	=	236.0	26 - lb/d		=	3.0	=	3.0	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.	<=	626.0 MO AVG	<=	939.0 MX WK AV	26 - lb/d		<=	10.0 MO AVG	<=	15.0 MX WK AV	19 - mg/L		01/07 - Weekly	24 - 24 Hour Composite
					Value NODI														
80082	BOD, carbonaceous [5 day, 20 C]	G - Raw Sewage Influent	0	--	Sample							=	153.0	=	228.0	19 - mg/L	0	01/07 - Weekly	CP - Composite
					Permit Req.								Req Mon MO AVG		Req Mon MX WK AV	19 - mg/L		01/07 - Weekly	24 - 24 Hour Composite
					Value NODI														
80091	BOD, carb-5 day, 20 deg C, percent removal	K - Percent Removal	0	--	Sample					=	98.0					23 - %	0	01/30 - Monthly	CA - Calculated
					Permit Req.					>=	85.0 MO AV MN					23 - %		01/30 - Monthly	CA - Calculated
					Value NODI														
81011	Solids, suspended percent removal	K - Percent Removal	0	--	Sample					=	99.0					23 - %	0	01/30 - Monthly	CA - Calculated
					Permit Req.					>=	85.0 MO AV MN					23 - %		01/30 - Monthly	CA - Calculated
					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**

No errors.

**Comments**

**Attachments**

Name	Type	Size
CCMOR.pdf	pdf	120056.0
CCCoverletter.pdf	pdf	37874.0

**Report Last Saved By**

**Cedar Creek WQTC MSD**

User: staci.huber@louisvillemسد.org

Name: Staci Huber

E-Mail: staci.huber@louisvillemسد.org

Date/Time: 2025-01-17 10:18 (Time Zone: -05:00)

**Report Last Signed By**

User: staci.huber@louisvillemسد.org

Name: Staci Huber

E-Mail: staci.huber@louisvillemسد.org

Date/Time: 2025-01-17 10:26 (Time Zone: -05:00)

**DMR Copy of Record**

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit #:

KY0098540

Major:

Yes

Permitted Feature:

001  
External Outfall

Permittee:

Cedar Creek WQTC MSD

Permittee Address:

700 W Liberty St  
Louisville, KY 40203

Facility:

CEDAR CREEK WQTC MSD

Facility Location:

8405 CEDAR CREEK RD  
LOUISVILLE, KY 40291

Discharge:

001-2  
TOXICITY

Report Dates & Status

Monitoring Period:

From 10/01/24 to 12/31/24

DMR Due Date:

01/28/25

Status:

NetDMR Validated

Considerations for Form Completion

THREE 24-HOUR COMPOSITE SAMPLES ONE EACH COLLECTED EVERY OTHER DAY FOR A PERIOD OF 5 DAYS; IE - DAYS 1, 3 & 5

Principal Executive Officer

First Name:

James

Last Name:

Parrott

Title:

Executive Director

Telephone:

502-540-6000

No Data Indicator (NODI)

Form NODI:

--

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type	
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
61406	Toxicity, final conc toxicity units	1 - Effluent Gross	0	--	Sample										<	1.0	2G - tox chronic	0	01/90 - Quarterly	24 - 24 Hour Composite
					Permit Req.										<=	1.0 MAXIMUM	2G - tox chronic		01/90 - Quarterly	24 - 24 Hour Composite
					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

No errors.

Comments

Attachments

No attachments.

Report Last Saved By

Cedar Creek WQTC MSD

User:

CURT.OTTO@LOUISVILLEMSD.ORG

Name:

Curt Otto

E-Mail:

curt.otto@louisvillemسد.org

Date/Time:

2025-01-17 09:32 (Time Zone: -05:00)

Report Last Signed By

User:

staci.huber@louisvillemسد.org

Name:

Staci Huber

E-Mail:

staci.huber@louisvillemسد.org

Date/Time:

2025-01-17 10:26 (Time Zone: -05:00)