

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 4th 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

Staci Huber

Process Supervisor

SH/ Cedar Creek. 12/24.

Enclosures

Cc:

V. Teague

K. Robinson

M. Saylor

| Т | PERMIT | SEW | W | la | KY009 | SE | IDS (m | | | SSOLV 'GEN (r | | SU | SPEND IDS (m | | | MGD CBOD | (mrd) | 40 | | RECEIVING SLUDGE | STREA | | ATION E | | R CREE | K | | SLUDGE | EHANE | N ING | | FIN | ΔΙ | P | | |
|---|--------------|------------------------------|----------------------------|------------|-------|-------|---------------------|----------------|--------------|------------------|------------|-----|---------------------|----------------|----------|---------------------|----------------|-------------------|---------------|---------------------|------------------------|-----------------------|------------------------|------------|----------------------|-------------------|------------|----------------------|--------------|----------|--------------------------------|---------------|-------|---------------------|-------------------|--------------------------------|
| | TONS | - 1 | | | | - 00. | , o c | | | | BELOW | 001 | , | | J DAI | CLOD | | | TURN | WAST | ક્રિ | | | SLU | TUEU JDGE LUME | | RAW | 1 | LIIAI | HAUL | .ED | | | | | |
| \rightarrow | | GRIT REMOVED (CUBIC FEET) | SCREENINGS (CUBIC FEET) | RAW | FINAL | RAW | PRIMARY EFFLUENT | FINAL EFFLUENT | STREAM ABOVE | FINAL EFFLUENT | STREAM BEI | RAW | PRIMARY EFFLUENT | FINAL EFFLUENT | RAW | PRIMARY EFFLUENT | FINAL EFFLUENT | GAL/DAY X 1000 | MLSS ×1000 | GAL/DAY × 1000 | DISSOLVED OXYGEN (m | MLSS (mg/L) x 1000 | MLVSS (mg/L) X 1000 | 30 MIN. | 60 MIN. | GALLONS X 1000 | DRY SOLIDS | N VOLATILE SOLIDS | N DRY SOLIDS | VOLATILE | WITHDRAWN GALLONS X 1000 | NH3-N (mg/L.) | ECOLI | Total Phosphorus | Total Nitrogen | FOTAL FLOW INF. (MILLION |
| 1 | 5.27 | _ | | | _ | _ | | | | _ | | _ | | | _ | _ | _ | 3 | | 60000 | 4.3 | | l | 400 | _ | _ | | - | _ | \vdash | | | | | - | 6.256559 |
| 2 | 4.91 | - | _ | 7.6 | | _ | | - | - | | _ | 280 | | 3 | 228 | | 2 | 3 | 6700 | 0 | 4.5 | ### | | 420 | - | | | \vdash | | \vdash | | 0.20 | 2 | 0.2 | - | 5.824726 |
| 3 | 4.61 | | | 7.6 | 8.1 | _ | | - | - | 9.3 | | | | _ | | | | 3 | 7250 | 100000 | 4.6 | ### | | 670 | | | | | | | | | | | \rightarrow | 5.63032 |
| 4 | 4.57 | | _ | 7.7 | _ | | | - | - | - | - | _ | | _ | _ | - | _ | 3 | 6540 | 125000 | 4.9 | ### | | 600 | \vdash | _ | _ | - | _ | \vdash | 0 | | | - | - | 5.98455 |
| 5 | 4.34 | _ | _ | 7.6 | _ | _ | _ | | - | - | | | | _ | _ | _ | _ | 3 | 6370 | 125000 | 4.9 | ### | ### | 640 | _ | | | - | | \vdash | 63000 | | | | - | 5.4047 |
| 6 | 4.20 | | | 7.9 | _ | _ | | | - | | | _ | | | | | | 3 | 6810 | 100000 | 4.7 | ### | ### | 560 | _ | | _ | \vdash | | \vdash | 107100 | | | | - | 5.170016 |
| 7 | 4.27 | _ | | | - | | | | | | | | | - | | | | 3 | | 75000 | 4.9 | | | 520 | | _ | _ | | | \vdash | 69300 | | | | - | 5.215661 |
| 9 | 4.44 | - | _ | 7.0 | - | - | | - | - | - | | | | | | - | _ | 3 | 0000 | 75000 | 4.1 | | | 550 | _ | _ | - | | | \vdash | 113400 | | _ | | | 5.401770 |
| _ | 7.30 | _ | | 7.6 | 7.8 | _ | | | - | 8.3 | - | 364 | | 3 | 171 | | 2 | 3 | 9060 | 75000 | 4.4 | ### | ### | 540 | | | - | - | _ | \vdash | 107100 | 0.30 | 8 | 0.2 | 8.49 | 8.403607 |
| 10 | 6.59 | | - | 7.6 | _ | | | - | - | - | | _ | _ | | | - | | 3 | 8850 | 100000 | 4.5 | ### | ### | 520 | _ | | | | | \vdash | 50400 | | | | \rightarrow | 7.540336 |
| 11 | 5.65 | _ | | 7.6 | | | | - | - | - | | | | | - | | _ | 3 | 7660 | 75000 | 5.6 | ### | ### | 500 | _ | | _ | - | | \vdash | 50400 | | | | - | 6.72795 |
| 12 | 5.17 | _ | | 7.5 | | - | - | - | | - | | _ | | | _ | _ | - | 3 | 5350 | 75000 | 5.5 | ### | ### | 570 | _ | - | _ | - | _ | \vdash | 94500 | | - | - | _ | 6.14702 |
| 13 | 4.87 | _ | - | 7.8 | | | | - | | - | | | | | | | | 3 | 7140 | 100000 | 4.8 | ### | ### | 580 | | | | \vdash | | \vdash | 75600 | | | _ | | 5.81519 |
| 14 | 4.87 | | | 3 | | _ | - | | | - | - | _ | | | | | | 3 | | 75000 | 4.6 | | | 530 | _ | _ | | - | | \vdash | 75600 | | | | | 5.79637 |
| 15 | 8.20 | _ | _ | 77 | 0.4 | | - | - | - | — | | | - | _ | - | - | | 3 | 40000 | 0 | 4.3 | | | 550 | _ | - | | - | _ | \vdash | 75600 | | | | | 9.186343 |
| 16 17 | 9.43 | _ | _ | 7.7 | 8.1 | _ | | - | - | 8.9 | - | 166 | - | 3 | 78 | \vdash | 3 | 3 | 10320 | 100000 | 3.2 | ### | | 470 | - | _ | _ | - | _ | \vdash | 75600 | 0.41 | 1 | 0.281 | 8.29 | 11.25632 |
| \rightarrow | 10.86 | | | 1 | _ | | | - | | \vdash | | | | | - | | - | 4 | 8400 | 75000 | 2.9 | ### | | 350 | - | - | | \vdash | _ | \vdash | 88200 | | | - | \rightarrow | 11.955 |
| 18 19 | 12.18 | _ | | 8.0 7.4 | _ | | | - | - | | | - | _ | | | | | 5 | 7580 | 100000 | 4.2 | ### | | 470 | _ | - | _ | \vdash | - | \vdash | 407400 | - | | | | 14.1345 |
| \rightarrow | 10.96 | _ | _ | 8.0 | _ | _ | | - | - | - | - | _ | | - | - | | - | 6 | 4780 | 75000 | 5.1 | ### | ,,,,,, | 240 | - | | - | - | _ | \vdash | 107100 | | | | - | 12.0986 |
| 20 | 7.90 6.73 | _ | _ | 0.0 | _ | | | - | | - | | | | | - | - | | 4 | 6830 | 75000 | 4.3 | ### | ### | 550 550 | | _ | | \vdash | | \vdash | 107100 | | | | _ | 8.85578 |
| 22 | 6.08 | | \vdash | 3 | | | | - | \vdash | - | | - | | | - | | \vdash | | | 75000 | 5.6 | | | 550 | - | | | | | \vdash | 107100 107100 | | | | | 7.75199 |
| 23 | 6.38 | _ | | 7.6 | 7.7 | | | | - | 9.3 | | 86 | _ | 3 | 134 | - | 3 | 4 | 7130 | 75000 75000 | 4.5 3.6 | | ### | 540 | \vdash | _ | _ | | _ | \vdash | 107100 | 0.70 | | 0.767 | | 7.09388 |
| 24 | 5.86 | - | _ | 7.0 | 1.1 | - | | 1 | + | 9.3 | - | 86 | _ | 3 | 134 | | -3 | 4 | 7130 | 75000 | 2.3 | """ | """ | 700 | \vdash | _ | | | _ | \vdash | 50400 | 0.70 | | 0.767 | | 7.45824 |
| 25 | 5.25 | _ | _ | | | | | _ | 1 | | | | | | \vdash | | | 4 | | 75000 | 1.9 | | | 770 | \vdash | | | | _ | \vdash | 50400 | | | | | 6.78292 |
| 26 | 5.33 | | | 8.0 | | | | - | + | + | - | _ | _ | | - | _ | | 4 | 8550 | 150000 | 2.5 | ### | ### | 750 | \vdash | | | | | \vdash | 107100 | | | | | 6.17901 |
| 27 | 6.43 | _ | | 7.9 | _ | | \vdash | 1 | + | _ | 1 | | | | | | | 4 | 7210 | 150000 | 3.5 | ### | | 680 | - | | | | | \vdash | 75600 | | | | | 6.30638 |
| 28 | 7.17 | _ | | 7.5 | | | | | 1 | + | | | | | - | | | 5 | 1210 | 150000 | 3.9 | """ | "### | 750 | | | | | | \vdash | 73000 | | | | | 7.92142 |
| 29 | 14.37 | | | | | | | | | _ | | | | | | | | 5 | | 100000 | 4.1 | | | 200 | - | | | | | \vdash | 94500 | | | | | 8.26610 16.7964 |
| 30 | 11.34 | _ | | 7.4 | | | | 1 | | _ | | | - | | | 1 | | 5 | 16660 | | 1 | ### | ### | 360 | - | | - | | _ | \vdash | 107100 | | | | - | 12,456 |
| 31 | 8.83 | | | 7.7 | _ | | | 1 | + | + | - | | | | 1 | | | 4 | 46660 8160 | 100000 | 4.0 | ### | | | - | | | | | \vdash | 50400 | | | | | 9.94698 |
| \rightarrow | 214.36 | _ | | [" | | | | 1 | _ | \vdash | | | | | | 1 | \vdash | 113.3 | 0100 | 30000 | 4.0 | ۳۳۳ | """ | 330 | | _ | - | | | \vdash | 30400 | | | | - | 249.76576 |
| rg. | 6.91 | | | 7.7 | 7.9 | | | | | 9.0 | | 224 | | 3 | 153 | | 3 | 3.655 | 9367.5 | 87096.7742 | 4.205 | 2864 | 2488 | 536.5 | 5 | | | | | | 107100 | 0.40 | 2 | 0.362 | 8.39 | 8.0569600 |
| | | | | | | | RESI | DENTIA | L | | | | | INDUS | STRIAL | WASTI | E POPL | JLATIO | N EQUIV | ALENT | | | | | | | | | | | 100000 | | | | | |
| | | | | | | | | /IERCI/ | | | | | | | 855 | _ | 51 | 818 | _ | 6151 | 4 | 2 | chris | coomer | | | | 8 1 | 18291 | | | | | | | |
| INDUSTRIAL FLOW CBOD TSS OPERATOR CERT. NO. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DTAL NUMBER OF SEWER CONNECTIONS 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Form Approved OMB No. 2040-0004 expires on 07/31/2026 **DMR Copy of Record**

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(I)(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 #: | KY0098540 | Permittee: | Cedar Creek WQTC MSD | Facility: | CEDAR CREEK WQTC MSD |
| Major: | Yes | Permittee Address: | 700 W Liberty St Louisville, KY 40203 | Facility Location: | 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: | James | Title: | Executive Director | Telephone: | 502-540-6000 |
| Last Name: | Parrott | | | | |

Form NODI:

No Data Indicator (NODI)

| | Parameter | Monitoring Location | Season | # Param. NODI | l e | Qua | antity or Lo | ading | | | | | Quality or Conce | ntration | | | # of Ex | c. 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 | | | |
| | | | | | Sample | | | | | - | 8.3 | | | | | 19 - mg/L | | 01/07 - Weekly | GR - Grab |
| 00300 | Oxygen, dissolved [DO] | 1 - Effluent Gross | 0 | | Permit Req | | | | | >= | 7.0 INST MIN | | | | | 19 - mg/L | 0 | 01/07 - Weekly | GR - Grab |
| | ,3., | | | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | | | | | = | 7.7 | | | = | 8.1 | 12 - SU | | 01/07 - Weekly | GR - Grab |
| 00400 | pH | 1 - Effluent Gross | 0 | | Permit Req | | | | | >= | 6.0 MINIMUM | | | <= | 9.0 MAXIMUM | 12 - SU | 0 | 01/07 - Weekly | GR - Grab |
| 00400 | PIT | 1 - Lindent Gloss | U | | Value NOD | | | | | | | | | | | | | | |
| | | | | | Sample | = 175.0 | = | 236.0 | 26 - lb/d | | | = | 3.0 | = | 3.0 | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 00530 | Solids, total suspended | 1 - Effluent Gross | 0 | | 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 | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| 00000 | conus, total suspended | 1 Emacin Gross | | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | = | 224.0 | = | 364.0 | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 00530 | Solids, total suspended | G - Raw Sewage Influent | 0 | | Permit Req | | | | | | | | Req Mon MO AVO | i | Req Mon MX WK A\ | / 19 - mg/L | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| 00000 | Contas, total suspended | C Naw Cowago milaon | | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | = | 8.0 | = | 9.0 | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 00600 | Nitrogen, total [as N] | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | | Req Mon MO AVO | i | Req Mon MX WK A\ | / 19 - mg/L | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| 00000 | Mirogen, total [as 14] | 1 Emacin Gross | | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | = 24.0 | = | 37.0 | 26 - lb/d | | | = | 0.4 | = | 0.7 | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 00610 | Nitrogen, ammonia total [as N] | 1 - Effluent Gross | 2 | | 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 | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| 00010 | Thiregon, animoma total [ao N] | 1 Emaoni Oroco | _ | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | = | 0.36 | = | 0.8 | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 00665 | Phosphorus, total [as P] | 1 - Effluent Gross | 2 | | Permit Req | | | | | | | <= | 2.0 MO AVG | <= | 3.0 MX WK AV | 19 - mg/L | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| | The state of the s | | | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | = 6.915 | = | 9.467 | 03 - MGI |) | | | | | | | | 99/99 - Continuous | CN - Continuous |
| 50050 | Flow, in conduit or thru treatment plant | 1 - Effluent Gross | 0 | | Permit Req | . Req Mon MO AVG | | Req Mon MX WK AV | / 03 - MGI | ס | | | | | | | 0 | 99/99 - Continuous | RE - Record (manual) |
| | , | | | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | = 8.057 | = | 10.748 | 03 - MGI |) | | | | | | | | 99/99 - Continuous | CN - Continuous |
| 50050 | Flow, in conduit or thru treatment plant | G - Raw Sewage Influent | 0 | | Permit Req | . Req Mon MO AVG | | Req Mon MX WK AV | / 03 - MGI | ס | | | | | | | 0 | 99/99 - Continuous | RE - Record (manual) |
| | , and a second s | | - | | Value NOD | ı | | | | | | | | | | | | | |
| | | | | | Sample | | | | | | | = | 2.0 | = | 8.0 | 13 - #/100mL | | 01/07 - Weekly | GR - Grab |
| 51040 | E. coli | 1 - Effluent Gross | 0 | | Permit Req | | | | | | | <= | 130.0 30DA GEO | <= | 240.0 7 DA GEO | 13 - #/100mL | . 0 | 01/07 - Weekly | GR - Grab |
| 31040 | L. COII | 1 - Lilluciii Gioss | U | | | | | | | | | | | | | | U | | |

| | | | | | Value NODI | | | | | | | | | | | | | | |
|-------|--|-------------------------|---|--|------------------------|--------------|----|----------------|-----------|----|---------------|----|----------------|----|------------------|-----------|---|-----------------|------------------------|
| | BOD, carbonaceous [5 day, 20 C] | | | | Sample = | 150.0 | = | 236.0 | 26 - lb/d | | | = | 3.0 | = | | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 80082 | | 1 - Effluent Gross | 0 | | 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 | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| | | | | | Value NODI | | | | | | | | | | | | | | |
| | | G - Raw Sewage Influent | | | Sample | | | | | | | = | 153.0 | = | 228.0 | 19 - mg/L | | 01/07 - Weekly | CP - Composite |
| 80082 | BOD, carbonaceous [5 day, 20 C] | | 0 | | Permit Req. Value NODI | | | | | | | | Req Mon MO AVG | | Req Mon MX WK AV | 19 - mg/L | 0 | 01/07 - Weekly | 24 - 24 Hour Composite |
| | , , , , , | | | | | | | | | | | | | | | | | | |
| | | K - Percent Removal | | | Sample | | | | | = | 98.0 | | | | | 23 - % | | 01/30 - Monthly | CA - Calculated |
| 80091 | BOD, carb-5 day, 20 deg C, percent removal | | 0 | | Permit Req. | | | | | >= | 85.0 MO AV MN | I | | | | 23 - % | 0 | 01/30 - Monthly | CA - Calculated |
| | , , , , , | | | | Value NODI | | | | | | | | | | | | | | |
| | | | | | Sample | | | | | = | 99.0 | | | | | 23 - % | | 01/30 - Monthly | CA - Calculated |
| 81011 | Solids, suspended percent removal | K - Percent Removal | 0 | | Permit Req. | | | | | >= | 85.0 MO AV MN | ı | | | | 23 - % | 0 | 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 | Туре | Size |
|-------------------|------|----------|
| CCMOR.pdf | pdf | 120056.0 |
| CCCoverletter.pdf | pdf | 37874.0 |

Report Last Saved By

Cedar Creek WQTC MSD

User: staci.huber@louisvillemsd.org

Name: Staci Huber

E-Mail: staci.huber@louisvillemsd.org

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

Report Last Signed By

User: staci.huber@louisvillemsd.org

Name: Staci Huber

E-Mail: staci.huber@louisvillemsd.org

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

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 <a href="https://www.npde.com/npack-need-to-the-

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Permit Permit #: KY0098540 Permittee: Cedar Creek WQTC MSD Facility: CEDAR CREEK WQTC MSD Major: Yes **Permittee Address:** 700 W Liberty St **Facility Location:** 8405 CEDAR CREEK RD Louisville, KY 40203 LOUISVILLE, KY 40291 **Permitted Feature:** Discharge: 001-2 001 External Outfall TOXICITY Report Dates & Status **DMR Due Date:** Status: **Monitoring Period:** From 10/01/24 to 12/31/24 01/28/25 **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 Title: **Executive Director** Telephone: 502-540-6000

Last Name:

No Data Indicator (NODI)

Form NODI: --

| | Parameter | Monitoring Location | Season # Pa | aram. NODI | | | Quantity or Loading | | | | Quality or Cor | ncentratio | n | | # of Ex. | Frequency of Analysis | Sample Type |
|-------|-------------------------------------|---------------------|-------------|------------|-------------|-------------|---------------------|-------------|-------------------------|--------------------|----------------|------------|-------------|------------------|----------|-----------------------|------------------------|
| Code | Name | | | | | Qualifier 1 | Value 1 | Qualifier 2 | Value 2 Units Qualifier | 1 Value 1 Qualific | er 2 Value 2 Q | ualifier 3 | Value 3 | Units | | | |
| | | 1 - Effluent Gross | | | Sample | | | | | | < | | 1.0 | 2G - tox chronic | | 01/90 - Quarterly | 24 - 24 Hour Composite |
| 61406 | Toxicity, final conc toxicity units | | 0 | | Permit Req. | | | | | | <= | | 1.0 MAXIMUM | 2G - tox chronic | 0 | 01/90 - Quarterly | 24 - 24 Hour Composite |
| 27400 | roxiony, miar cone toxiony units | . Emacin Oloss | | | 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

Parrott

Name: Curt Otto

E-Mail: curt.otto@louisvillemsd.org

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

Report Last Signed By

User: staci.huber@louisvillemsd.org

Name: Staci Huber

E-Mail: staci.huber@louisvillemsd.org

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