

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

September 24, 2024

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

RE: Hillview #3 STP, KPDES No: KY0034177 Discharge Monitoring Report for August 2024.

Dear Ms. Dennis:

Attached is the Discharge Monitoring Report (DMR) for the Hillview #3 STP, for the month of August 2024.

Also attached is overflow report.

There was one bypass due to power failure.

There were two exceedances for the month of August. Ammonia Daily max sample result 21.0 mg/l permit limit 6.0 mg/l.

Ammonia monthly average sample results 5.6 mg/l permit limits 4.0 mg/l.

This was a result of a rain event and lack of capacity at the plant. Blowers were put on a timer to help keep DO's up while heavy flows moved through the plant.

If you have any questions concerning the attached DMR's, please contact me at (502)540-6717.

Sincerely,

Jon Baldridge Process Supervisor

JOB/ HV#3 08/24.

Cc: V. Teague/B. Tinnell

DMR Copy of Record

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

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Permit																						
Permit #:		KY0034177				Permi	ittee:			Louisville and Jefferson County MSD									BCSD	HILLVIEW #3		
Major:		No					ittee Addre	ress: 700 W Liberty St Louisville, KY 40203									12325 WESTERN RD HILLVIEW, KY 40129					
Permitted Feature: 001 External Outfall						Disch	arge:			001-1 Domestic Wastev	vater											
Report Da	tes & Status																					
Monitoring Period: From 08/01/24 to 08/31/24						DMR	Due Date:			09/28/24						Status:	Status:			NetDMR Validated		
Considera	tions for Form Completion																					
Principal E	Executive Officer																					
First Name	e:	James A.				Title:				Executive Director					Telephone: 502-540-6000							
Last Name) :	Parrott																				
No Data In	ndicator (NODI)					,																
Form NOD	DI:																					
	Parameter		Monitoring Location	Season #	Param. NODI			Qua	antity or Load	ding				(Quality or Conce	entration			# 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				
						Sample							7.2					19 - mg/L	-	•	GR - GRAB	
00300	Oxygen, dissolved [DO]		1 - Effluent Gross	0		Permit Req.						>= 7.0 INST					19 - mg/L	0	01/07 - Weekly	GR - GRAB		
						Value NODI																

	Parameter	Monitoring Location	tion Season # Param. NO			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			
					Sample						= 7	7.2					19 - mg/L		01/07 - Weekly	GR - GRAB
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	0		Permit Req.						>= 7	7.0 INST MIN					19 - mg/L	0	01/07 - Weekly	GR - GRAB
00300	Oxygen, dissolved [DO]	1 - Lilidelit Gloss	U		Value NODI													0		
					value NODI															
					Sample						= 6	6.4			=	6.9	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	pii	1 - Lindelit Gloss	0		Value NODI													0		
					Sample								=			12.0	19 - mg/L		,	CP - COMPOS
00530	Solids, total suspended	1 - Effluent Gross	0		Permit Req.								<=	30.0 MO AVG	<=	45.0 MX WK AV	19 - mg/L	0	01/07 - Weekly	CP - COMPOS
00000	Johns, total suspended				Value NODI															
					Sample								=	29.3			19 - mg/L		•	CP - COMPOS
00600	Nitrogen, total [as N]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	0	01/07 - Weekly	CP - COMPOS
	The office of the second				Value NODI															
																			2.10= 111 11	25 2211522
					Sample								=	5.6		21.0	19 - mg/L			CP - COMPOS
X 00610	Nitrogen, ammonia total [as N]	1 - Effluent Gross	1		Permit Req.								<=	4.0 MO AVG	<=	6.0 DAILY MX	19 - mg/L	2	01/07 - Weekly	CP - COMPOS
					Value NODI															
					Sample								=	0.91	=	1.7	40		01/07 - Weekly	CP - COMPOS
													=				19 - mg/L		-	
00665	Phosphorus, total [as P]	1 - Effluent Gross	0		Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L	0	01/07 - Weekly	CP - COMPOS
					Value NODI															
					Sample	- 0	0.109		0.398	03 - MGD									99/99 - Continuous	RC - Recorder (auto)
					Permit Reg.	-	Reg Mon MO AVG		Reg Mon DAILY MX											RC - Recorder (auto)
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0				req Mon MO AVG		Red MOIL DAILT MY	03 - IVIGD								0	99/99 - Continuous	NC - Necolder (auto)
					Value NODI															
					Sample								<	0.01	<	0.01	19 - mg/L		01/07 - Weekly	GR - GRAB
		. =			Permit Reg.												19 - mg/L	_		GR - GRAB
50060	Chlorine, total residual	1 - Effluent Gross	0											0.011 1110 7110	-	0.010 Brazi wax	10 mg/L	0	01/01 Wookky	OIT OIT B
					Value NODI															
					Sample								=	4.0	=	110.0	13 - #/100mL		01/07 - Weekly	GR - GRAB
E4040	E and	4 Filliant Crass			Permit Req.								<=	130.0 30DA GEO		240.0 7 DA GEO			•	GR - GRAB
51040	E. coli	1 - Effluent Gross	U															U		
					Value NODI															
					Sample								=	6.0	=	8.0	19 - mg/L		01/07 - Weekly	CP - COMPOS
00000		4 500 + 0			Permit Req.								<=	15.0 MO AVG	<=	22.5 MX WK AV	19 - mg/L		01/07 - Weekly	CP - COMPOS
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	U															U		

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	Type	Description	Acknowledge
Code	Name	Monitoring Location	rieid		Description	Acknowledge
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
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

Comments

Attachments

Name	Туре	Size
Hillview3coverletter.pdf	pdf	191757.0
H3Overflow.pdf	pdf	109775.0

Report Last Saved By

Louisville and Jefferson County MSD

User: JON.BALDRIDGE@LOUISVILLEMSD.ORG

Name: Jonathan Baldridge

E-Mail: jon.baldridge@louisvillemsd.org

Date/Time: 2024-09-24 10:22 (Time Zone: -04:00)

Report Last Signed By

User: JON.BALDRIDGE@LOUISVILLEMSD.ORG

Name: Jonathan Baldridge

E-Mail: jon.baldridge@louisvillemsd.org

Date/Time: 2024-09-24 12:35 (Time Zone: -04:00)



KPDES#	Facility ID	Water 0	Water Quality Treatment Center			am of Discharge	Region				
KY0034177	MSD0508	BCSD H	HILLVIEW #3		BROOKS RUN						
Facility Type	Facility ID	Facility	Facility Address If Pump Station,			n	Recieving St	ream	Discharge To		
Sewer Treatment Plant	MSD0508	126 W	ESTERN RD	BCSD HILLVIE	CSD HILLVIEW #3			N	STREAM		
Activity Code / Description	WO#	Ref#	Initiated on	Initiated By	Assigned To	Dish Status	Event Date	Problem Desc	Result	Completed	Condition
DISREV:RAIN EVENT DISCHARGE	3825259		8/1/2024 7:50:00 AM	BALDRIDGE		QUEUED FOR INVESTIGATIO N / REPAIR	3/28/2023 12:00:00 AM	BYPASS AT WQTC	UNAUTHORIZED DISCHARGE- WATERS	08/01/24 08:35 AM	

Discharge Reporting:

Discharge Amount:	450 GAL	
Cause:	POWER FAILURE LG&E OUTAGE,	
Clean Up:	WILL HAVE EIC CLEAN DITCH WHEN RAIN FLOW STOPS IN DITCH.	
Control Zone:	AT PLANT.	Augus 20,000
Impact:	OVERFLOW TO DITCH WITH EFF DISCHARGE.	-
Repair:	POWER WAS RESTORED AND INFLUENT PUMPS PULLED THE WELL DOWN.	
Public Netification:	TEMP SIGN NEAR FENCE.	

Notifications:

8/1/24 1:00 PM	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV
8/1/24 1:00 PM	DISSNO	WAITING TO COMPLETE THE DISCHARGE INFORMATION



IMSAST0004 Overflow Report 8/1/2024 12:00:00 AM to 8/31/2024 12:00:00 AM

KPDES #	Facility ID	Water Q	uality Treatme	ent Center	Recieving Stea	m of Discharge	Region							
KY0034177	MSD0508	BCSD H	ILLVIEW #3		BROOKS RUN									
Facility Type	Facility ID	Facility .	Address	If Pump Station	np Station, Name of Station			ream	Discharge To STREAM					
Sewer Lift Station	MSD2014-PS	169 SU	MMERS DR	BCSD HILLVIEW #3			BROOKS RUI	N						
Activity Code / Description	WO#	Ref#	Initiated on	Initiated By	Assigned To	Dish Status	Event Date	Problem Desc	Result	Completed	Condition			
DISREV:RAIN EVENT	3825256		8/1/2024 7:15:00 AM	SANTEE	SANTEE	DOCUMENTED	12/9/2021 12:00:00 AM	POWER OUTAGE (LG&E)	UNAUTHORIZED DISCHARGE-	08/01/24 07:45 AM				

Discharge Reporting:

Discharge Amount:	50 GAL
Cause:	POWER OUTAGE.
Clean Up:	CLEANED AND SANITIZED THE IMPACTED AREA.
Control Zone:	PERMANENT SIGN IN PLACE - NO ADDITIONAL CONTROL ZONE SET UP.
Impact:	SEWAGE/DEBRIS/SOLIDS/PERSONAL HYGIENE PRODUCTS FOUND IN THE DITCH.
Repair:	GENERATOR UTILIZED UNTIL POWER RESTORED.
Public Notification:	ADVISED ALL POSSIBLE IMPACTED PROPERTIES IN THE SURROUNDING AREA.

Notifications:			
8/1/24 1:00 PM	DISNOT	EMAIL NOTIFICATION OF UNAUTHORIZED DISCHARGE SENT TO:DISCHARGENOTICES@LOUISVILLEMSD.ORG, SAYRE.DENNIS@EPAMAIL.EPA.GOV	