



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

September 12, 2012

██████████
██████████ Taylor Avenue
Louisville, Kentucky 40213

Subject: Integrated Overflow Abatement Plan (IOAP)
Public Input Meeting August 14, 2012
Response to Comments

Dear ██████████

Thank you for taking the time to submit your comments relative to Camp Taylor Sanitary Sewer Replacement Project. Your comments are summarized below, and your comment form has been attached for reference.

Comment – Runoff from street. No roadside drainage facilities.

Response to comment – During this project MSD will address surface drainage problems which are either severe in nature or incidental to the construction of the new sanitary sewers. Funds available for drainage improvements must be within the limits of, and remain secondary to, the overall funding for this project to replace/rehabilitate the sanitary sewer system. However, MSD cannot fix or improve all surface drainage problems in the Camp Taylor area as a part of this sanitary sewer replacement project.

This letter will be posted on MSD's Project WIN web page at the link www.msdlouky.org/projectwin.

Sincerely,

Steve Emly
Interim Director of Engineering

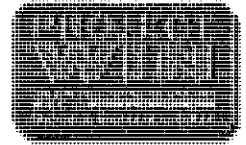
Attachment: Comment Form



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Sewer Overflow Abatement Public Outreach Meeting



Date: 08/14/12

We Want YOU to Share Your Thoughts!

Check box for answer:

1. To what extent do you better understand what MSD is doing to solve the sewer overflow problems? Would you say it was:
 To a great extent To a moderate extent To a slight extent Not at all
2. To what extent do you better understand what MSD is doing on the specific projects presented?
 To a great extent To a moderate extent To a slight extent Not at all
3. To what extent has your awareness increased on how individuals can help reduce sewer overflow problems?
 To a great extent To a moderate extent To a slight extent Not at all
4. After this meeting, are you more or less likely to do the following:
 - a. ~~NOT~~ Run your dishwasher or washing machine *during a rain event?*
 More likely Less likely No change
 - b. Transfer leftover fats, oils and greases into a metal can/trash?
 More likely Less likely No change

To Be Completed by the Customer:

Customer Name (Last, First) [REDACTED]

Address [REDACTED] TAYLOR Ave Zip Code 40213

Cell Phone [REDACTED] Work Phone [REDACTED]

LOCATION OF REQUEST

Address Same Zip Code _____

Owner Owner Tenant Other

REQUEST TYPE

- MSD Construction IOAP Project/Program Drainage Sanitary Sewer
- General MSD concern _____

REQUEST DESCRIPTION:

Runoff from street. No roadside drainage facilities.

To Be Completed by an MSD Representative:

MSD Responder: _____ Division: _____

Would you like to receive email notifications for any of the following?

- Future meeting notices Dry weather sewer overflows Wet weather sewer overflow warnings

Please provide your email address: _____