



MSD

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

January 23, 2009

Carolena Bentley, DMR Coordinator
Kentucky Division of Water
200 Fair Oaks Lane, 4th Floor
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Chenoweth Hills WTP; KPDES No.: KY0029459
Discharge Monitoring Reports – December 2008**

Dear Ms. Bentley:

Attached is the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Chenoweth Hills WTP, KPDES No.: KY0029459 for the month of December 2008. Also attached is the Discharge Reports for the month of December.

If you have any questions concerning the attached DMRs, please contact me at (502) 239-7695.

Sincerely,

Kevin D. Ries
Process Supervisor Central Region

KDR/Chenoweth Hills 1208

Enclosures

cc: C. Roth (DOW Louisville)
R. Shaw
T. Singleton



*Beneficial Use of Louisville's Biosolids
www.louisvillegreen.com*

NAME CHENOWETH HILLS STP WSD
ADDRESS C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY CHENOWETH HILLS STP WSD
LOCATION JEFFERSONTOWN KY 40299
ATTN: DANNIS THOMASSEN, SR METRO OPS

KY0029459
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL
SANITARY WASTEWATER
EFFLUENT
*** NO DISCHARGE: [] ***

JEFF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	12	01		00	12	31

FROM

TO

NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	8	*****	*****	MG/L	0	01/07	CR
PH 00400 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	6.9	*****	7.0	MG/L	0	01/07	CR
SOLIDS, TOTAL SUSPENDED 00500 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	12	15	34	MG/L	0	01/07	CR
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 R 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	0.1	0.2	0.3	MG/L	0	01/07	CR
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	0.132	0.503	2.6	MG/L	0	01/07	CR
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	MG/L	0	01/07	CR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H.S. Scharlein
Exec. Director
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Kent D. [Signature]

TELEPHONE: 502 596-6000
DATE: 09 01 23
AREA CODE: 502 NUMBER: 596-6000 YEAR: 09 MO: 01 DAY: 23

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME CHENOWETH HILLS STP MSD
 ADDRESS C/O CEDAR CREEK STP
 6405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY CHENOWETH HILLS STP MSD
 LOCATION JEFFERSONTOWN KY 40299
 ATTN DENNIS THOMASSON, SR METRO OPS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

KY0029459
 PERMIT NUMBER

001 1
 DISCHARGE NUMBER

MINOR (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER EFFLUENT
 JEFFE

Form Approved
 OMB No. 2040-0004

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	12	31	00	12	31

FROM

TO

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1	1	(15)		0 1/02	CR
	PERMIT REQUIREMENT	*****	*****	***	*****	200	400	*/		NEARLY	GRAB
BOD, CARBONACEOUS 05 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	3	4	(26)	*****	4	6	(17)		0 1/02	CP
	PERMIT REQUIREMENT	50	100		*****	50	100			NEARLY	COMPOS
	SAMPLE MEASUREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L			
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H. J. Schaefer
 Exec. Director
 TYPED OR PRINTED

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Ken D. [Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 502 510-6000
 DATE 09 01 23
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



MSD

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

December 4, 2008

Mr. Charlie Roth, District Supervisor
KY Division of Water
Louisville Regional Office
9116 Leesgate Road
Louisville, KY 40222-5084

Re: Bypass Report for the Chenoweth Hills TP – KPDES Permit KY0029459

Dear Mr. Roth:

This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 PM on December 02, 2008, referencing Work Order #852911 as a Dry Weather Discharge. This letter serves as a written report of the bypass as required by 401 KAR 5:065.

Provided below are the details of the bypass event:

- Description of the noncompliance and its cause: Failure to properly provide chlorine disinfection to the effluent. There was a miscalculation on the remaining amount in the chlorine cylinder.
- Period of noncompliance: Starting 07:30 PM on December 01, 2008 and stopping 07:30 AM on December 02, 2008.
- Steps taken or planned to reduce, eliminate and prevent recurrence: Operating procedures have been discussed with the employee, and MSD will provide refresher training for staff for proper handling of chlorine cylinders for disinfection and sulfur dioxide for dechlorination.

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-239-7695, my cell phone at (502)-523-9957 or via email at jporter@msdlouky.org.

Sincerely,

James E. Porter Jr.
Process Supervisor-Operations

cc: Gary Levy, KDEP
Sean Ireland, EPA

eB File
Paula Purifoy, MSD





Report Selections: Excluding PPI, CSO, Result: WUS, Act Code: DISDW, DISREV, DISSUS

KPDES # KY0029459	Facility ID MSD0263	Treatment Plant Name CHENOWETH HILLS		Receiving Stream of Treatment Plant CHENOWETH RUN		Region CENT				
Facility Type SPL Sewer Treatment Plant	Facility ID MSD0263	Facility Address 4305 ST RENE CT	If Pump Station, Name of Pump Station:		Receiving Stream CHENOWETH RUN	Discharge to STREAM				
<u>Activity Code / Description</u> DISREV: RAIN EVENT DISCHARGE	<u>WO #</u> 852911	<u>Initiated</u> 12/01/08 07:30 PM	<u>Initiated By</u> SINGLETON	<u>Assigned To</u> PORTER JR	<u>Disch Status</u> DOCUMENTED*	<u>Event Date</u> 09/27/02	<u>Problem</u> BYPASS AT TREATMENT PLANT	<u>Result</u> DISCHARGE TO WATERS OF THE US	<u>Completed</u> 12/02/08 07:30 AM	<u>Condition</u>

Spot Inspections:

Discharge Amount: 35,333 GAL
Cause: RAN OUT OF CHLORINE
Clean Up: NO CLEANUP REQUIRED
Control Zone: TEMPORARY SIGNS PLACED AT DISCHARGE OUTLET NEAR CREEK
Impact: NO VISUAL IMPACT OBSERVED
Repair: REPLACED CHLORINE TANK

Notifications:

12/02/08 01:00 AM DISNOT Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
12/02/08 01:00 PM DISPUB Temporary signs placed around the effected area