



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

July 12, 2012

Ms. Cheryl Edwards
Kentucky Division of Water
200 Fair Oaks Lane, 4th Floor
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Chenoweth Run WQTC
KPDES No.: KY0042226
Discharge Monitoring Reports – June 2012**

Dear Ms. Edwards:

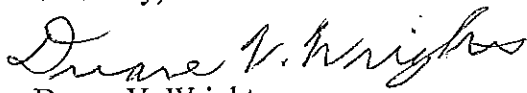
Attached are the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the Chenoweth Run WQTC, KPDES No.: KY0042226 for the month of June 2012.

Also attached are a bypass letter and overflow report.

There were no exceedences.

If you have any questions concerning the attached DMR's, please contact me at (502) 239-7574.

Sincerely,


Duane V. Wright
Process Supervisor Central Region

DVW/ Chen. Run 6.12

Enclosures

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



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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME CHENOWETH RUN WQTC
 ADDRESS C/O CEDAR CREEK WQTC
 8405 CEDAR CREEK RD.
 LOUISVILLE KY 40211
 FACILITY CHENOWETH RUN WQTC
 LOCATION LOUISVILLE KY 40223
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0042226 0012
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
12	06	01	12	06	30

FROM

TO

*** NO DISCHARGE 1 ***

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			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****		8	*****	*****	(17)	0	1/1	GR
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	****	7	*****	*****			WEEKLY	GRAB
EFFLUENT GROSS VALUE				****	INST MIN			MG/L			
PH	SAMPLE MEASUREMENT	*****	*****		6.5	*****	7.2	(12)	0	1/1	GR
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	7.0			WEEKLY	GRAB
EFFLUENT GROSS VALUE				****	MINIMUM		MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	11	19	(26)	*****	8	15	(17)	0	1/7	CP
00530 1 0 0	PERMIT REQUIREMENT	118	236		*****	30	50			WEEKLY	COMPLUS
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX	LBS/D		30DA AVG	DAILY MX	MG/L			
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	0.69	0.9	(26)	*****	0.5	0.7	(17)	0	1/7	CP
00610 1 1 0	PERMIT REQUIREMENT	7.84	15.7		*****	2	4			WEEKLY	COMPLUS
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX	LBS/D		30DA AVG	DAILY MX	MG/L			
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	2.5	3.3	(17)	0	1/7	CP
00668 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT			WEEKLY	COMPLUS
EFFLUENT GROSS VALUE				****		30DA AVG	DAILY MX	MG/L			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.175	0.475	(03)	*****	*****	*****		0	CN	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****		CONTINUOUS	CONTINUOUS
EFFLUENT GROSS VALUE		30DA AVG	INST MAX	MGD				****			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.010	<0.010	(17)	0	1/1	GR
50060 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	0.011	0.017			WEEKLY	GRAB
EFFLUENT GROSS VALUE				****		30DA AVG	DAILY MX	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 GREG C. HEITZMAN
 INTERIM EX DIR
 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.

Shane V. Wright
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 502 540 6000
 DATE 12 7 23
 AREA CODE NUMBER YEAR MO DAY

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

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

NAME CHENOWETH RUN WQTC
 ADDRESS C/O CEDAR CREEK WQTC
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY CHENOWETH RUN WQTC
 LOCATION LOUISVILLE KY 40223
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0042224 PERMIT NUMBER
 001 2 DISCHARGE NUMBER

MINOR (SUBV LV)
 7 - FINAL
 SANITARY WASTEWATER EFFLUENT
 JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
12	05	01		12	05	01

*** 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	*****	*****		*****	4	10	(13)	0	1/7	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	#/		WEEKLY	GRAB
BOD, CARBONACEOUS 5 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	6.9	8.7	(26)	*****	5	7	(19)	0	1/7	CP
	PERMIT REQUIREMENT	39.2	75.4		*****	10	20			WEEKLY	COMPOSITE
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Greg C. Heitzman
 INTERIM EX. DIR.
 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.

Dwayne V. Wright
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 502 540 6000
 DATE 12 7 23
 AREA CODE NUMBER YEAR MO DAY

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

LAKE FOREST		Report for	Jun-12			Tot. Exc.=		0		
Tot. Flow=	5.23618	Concentrations					Pounds	Conc.		
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	T Phos	
6/1/12	0.475									
6/2/12	0.256									
6/3/12	0.196	2	3.5	0.28		3.27	5.73	0.46	3.32	
6/4/12	0.180				2					
6/5/12	0.183									
6/6/12	0.179									
6/7/12	0.157									
6/8/12	0.160									
6/9/12	0.163									
6/10/12	0.164	6	5	0.45		8.18	6.82	0.61	3.27	
6/11/12	0.207				2					
6/12/12	0.164									
6/13/12	0.156									
6/14/12	0.156									
6/15/12	0.155									
6/16/12	0.195									
6/17/12	0.186	10	4	0.5		15.49	6.20	0.77	1.75	
6/18/12	0.194				7					
6/19/12	0.149									
6/20/12	0.155									
6/21/12	0.158									
6/22/12	0.137									
6/23/12	0.148									
6/24/12	0.150	15	7	0.73		18.74	8.74	0.91	1.55	
6/25/12	0.143				10					
6/26/12	0.120									
6/27/12	0.134									
6/28/12	0.134									
6/29/12	0.143									
6/30/12	0.143									
7/1/12										
Average	0.175	8.25	4.88	0.49	4.09	11.42	6.87	0.69	2.47	
Maximum	0.475	15.00	7.00	0.73	10.00	18.74	8.74	0.91	3.32	



700 West Liberty Street
Louisville Kentucky 40203-1911
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June 4, 2012

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 Run WQTC – KPDES Permit KY0042226

Dear Mr. Roth:


This plant experienced a bypass event and has been reported through our electronic notification system at approximately 01:00 AM on June 03, 2012, referencing Work Order 1500585 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: On June 2, 2012, during construction of gravity sewer line to eliminate treatment plant, the contractor broke potable water line to WQTC. This line feeds the chlorine and de-chlorine feed injectors. Approximately 14,198 gallons of sewage bypassed dechlorination treatment. The bypassed volume received full treatment except for dechlorination. MSD personnel added granular chlorine to maintain pre-effluent residual chlorine.
- Period of noncompliance: Starting 01:15 PM on June 02, 2012 and stopping 02:30 PM on June 02, 2012.
- Steps taken or planned to reduce, eliminate and prevent recurrence: MSD personnel issued a vendor complaint on the contractor that caused potable water service disruption.

Please advise if you have any questions concerning this information. You can contact me on my office telephone at (502)-239-7574, my cell phone at (502)-396-9142 or via email at wrightd@msdlouky.org.

Sincerely,


Duane V. Wright
Process Supervisor-Operations

cc: Gary Levy, KDEP
Paula Purifoy, Wes Sydnor, Kevin Ries, Robert Bates - MSD
eB File



Report Selections: Excluding PPI, CSO, Excluding LAT and SSL, Prob Code: BYPAS, Result: WUS, Act Code: DISDW, DISREV

KPDES # KY0042226	Facility ID MSD0403	Water Quality Treatment Center CHENOWETH RUN	Receiving Stream of Treatment Center CHENOWETH RUN	Region CENT
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Facility Type SPL Sewer Treatment Plant	Facility ID MSD0403	Facility Address 14000 BECKLEY TRCE	If Pump Station, Name of Pump Station:	Receiving Stream CHENOWETH RUN	Discharge to GROUND
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<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISDW: DRY WEATHER DISCHARGE	1500585	06/02/12 01:15 PM	MARKS JR	OPS BSHIFT CENTRAL	DOCUMENTED	05/20/05	BYPASS AT WQTC	UNAUTHORIZED DISCHARGE-WATER S	06/02/12 02:30 PM	

Spot Inspections:

Discharge Amount:	14,198 GAL
Cause:	CONTRATOR CUT WATER LINE TO PLANT
Clean Up:	NO CLEAN UP REQUIRED ONLY DECHLORINATION BYPASS AT PLANT
Control Zone:	TEMPORARY SIGNS POSTED
Impact:	NO IMPACT OBSERVED
Repair:	FEEDING POWDER CHLORINE TO DISINFECT UNTILL REPAIRS ARE MADE. NO DECHLORINATION.

Notifications:

06/02/12 01:51 PM	DISPUB	msd used signs to warn public
06/02/12 01:00 PM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov, Sayre.Dennis@epamail.epa.gov and LisaA.Jeffries@ky.gov
06/02/12 01:00 PM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov, Sayre.Dennis@epamail.epa.gov and LisaA.Jeffries@ky.gov

Total Facilities Printed: 2
Total Work Orders Printed: 2