



MSD

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

July 25, 2007

Ms. Kathy Thurman
Kentucky Division of Water
14 Reilly Road
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Glenview Acres WTP; KPDES No.: KY0022462
Discharge Monitoring Reports – June 2007**

Dear Ms. Thurman:

Attached is the Discharge Monitoring Reports (DMRs) for the Glenview Acres WTP; KPDES No.: KY0022462 for the month of June 2007.

If you have any questions concerning the attached DMRs, please contact me at (502)241-9093.

Sincerely,

John Kessel
Process Supervisor, East Region

JMK/Glenview Acres 0607

Enclosures

cc: M. Mudd (DOW Louisville)
E. Brady
T. Singleton
P. Burgin
R. Shaw



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

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

NAME ALBANY CO ACRLS STP MSD
ADDRESS 170 LOUISVILLE/JEFF CO MSD
4540 ALBANYVILLE PARK
LOUISVILLE KY 40211-2497
FACILITY CLEVENHAM ACRLS STP MSD
LOCATION LOUISVILLE KY
WITH ALBA E MOVANI, OPER MGR

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

KY0022462
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL
SANITARY WASTEWATER
EFFLUENT

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
07	05	01		07	08	30


*** NO DISCHARGE 1 [] **

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			
NYCEN. DISCHARGE (00)		*****	*****		8.2	*****	*****	(19)	0	1/30	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	INST MIN	*****	*****	MG/L		MONTH	
20900		*****	*****		7.1	*****	7.1	(12)	0	1/30	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	MINIMUM	*****	MAXIMUM	BU		MONTH	
SOLIDS, TOTAL SUSPENDED		1.33	1.33	(25)	*****	20	80	(19)	0	1/30	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.00	8.00	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
NIROGEN, AMMONIA TOTAL (AS N)		0.04	0.04	(25)	*****	0.56	0.56	(19)	0	1/30	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.40	0.80	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	
PHOSPHORUS, TOTAL (AS P)		0.007	0.008	(25)	*****	*****	*****	(19)	0	5/7	Inst.
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	***		DAYS	
SOLIDS, GENERAL		*****	*****		*****	1.0	1.0	(13)	0	1/30	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30DA GED	7 DA GED	100ML		MONTH	
CO. CARBONACEOUS 30 DAY BOC		3.07	3.07	(25)	*****	1.0	1.0	(19)	0	1/30	Comp
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.00	8.00	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
h.b. Schadein
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

TELEPHONE 502 241 9093
DATE 07 07 23
AREA CODE NUMBER YEAR MO DAY

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