



MSD

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

December 22, 2008

Ms. Carolena Bentley
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
North Hunting Creek; KPDES No.: KY0029106
Discharge Monitoring Reports – November 2008**

Dear Ms. Prather

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly operator report (MOR) for the Hunting Creek North WTP, KPDES No.: KY0029106 for the month of November 2008

Also included are the November discharge reports.

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

Sincerely,

John Kessel
Process Supervisor - Operations

JMK/HCN 1108

Enclosures

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



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

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

NAME MSD NORTH HUNTING CREEK STP

ADDRESS C/O CEDAR CREEK STP

8408 CEDAR CREEK RD

LOUISVILLE

KY 40211

FACILITY MSD NORTH HUNTING CREEK STP

LOCATION PROSPECT

KY 40069

ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0029108
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL

JEFFE

MUNICIPAL DISCHARGE
EFFLUENT

*** NO DISCHARGE 1/11 ***

NOTE: Read Instructions before completing this form.

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	00	11	01		00	11	00

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	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	*****	*****		7.1	*****	*****	(19)	0	1/7	Grab
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	INST MIN	*****	*****	MG/L		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		6.2	*****	6.1	(12)	0	1/7	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	BU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	430.0	471.0	(26)	*****	223.0	258.0	(19)	0	1/7	Comp
00530 0 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	17.0	25.0	(26)	*****	9.0	12.0	(19)	0	1/7	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	90 MD AVG	134 MX WK AV	LBS/DY	*****	30 MD AVG	45 MX WK AV	MG/L		WEEKLY	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	81.0	96.0	(26)	*****	42.0	47.0	(19)	0	1/7	Comp
00610 0 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MD AVG	REPORT MX WK AV	LBS/DY	*****	REPORT MD AVG	REPORT MX WK AV	MG/L		WEEKLY	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	1.0	3.0	(26)	*****	10.60	1.50	(19)	0	1/7	Comp
00610 1 2 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	15 MD AVG	22 MX WK AV	LBS/DY	*****	5 MD AVG	7.5 MX WK AV	MG/L		WEEKLY	COMPOS
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	0.50	0.50	(19)	0	2/20	Comp
00645 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MD AVG	REPORT MX WK AV	MD/L		WICE/MONTH	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Dennis Thomasson, Sr
H. J. Schalk, Jr
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
[Signature]

TELEPHONE
507 446-4600
DATE
01 12 20

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME: M80 NORTH HUNTING CREEK STP
 ADDRESS: C/O CEDAR CREEK STP
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY: M80 NORTH HUNTING CREEK STP
 LOCATION: PROSPECT KY 40059
 ATTN: DENNIS THOMASSON, SR METRO OPS

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

KY0029106
 PERMIT NUMBER

001 1
 DISCHARGE NUMBER

MINOR
 (SUBR LV)
 F - FINAL
 MUNICIPAL DISCHARGE
 EFFLUENT

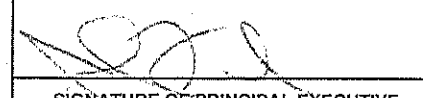
JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	11	01		00	11	30

*** 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			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.238	0.338	(03)	*****	*****	*****		0	1/2	CM
50050 1 0 0 EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	*****	****		CONTINUOUS	DUOS
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	<0.010	<0.010	(19)	0	1/2	Grb
50060 1 0 0 EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	*****	*****	*****	0.011	0.019	MG/L		WEEKLY	GRAB
COLIFORM, FECAL GENERAL		*****	*****		*****	1.0	1.0	(13)	0	1/2	Grb
74055 1 0 0 EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	*****	*****	*****	200	400	*/ 100ML		WEEKLY	GRAB
BOD, CARBONACEOUS 05 DAY, 20C		427.0	600.0	(26)	*****	220.0	310.0	(19)	0	1/2	Comp
90082 0 0 0 RAW SEW/INFLUENT		PERMIT REQUIREMENT	REPORT	REPORT	*****	REPORT	REPORT	MG/L		WEEKLY	COMPOS
BOD, CARBONACEOUS 05 DAY, 20C		6.0	8.0	(26)	*****	3.0	4.0	(19)	0	1/2	Comp
90082 1 0 0 EFFLUENT GROSS VALUE		PERMIT REQUIREMENT	30	45	*****	10	15	MG/L		WEEKLY	COMPOS
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL		*****	*****		99.0%	*****	*****	(23)	0	1/30	CL
90091 X 0 0 PERCENT REMOVAL		PERMIT REQUIREMENT	*****	*****	85	*****	*****	PER-CENT		ONCE/ MONTH	CALCUL
SOLIDS, SUSPENDED PERCENT REMOVAL		*****	*****		96.0%	*****	*****	(23)	0	1/30	CL
91011 X 0 0 PERCENT REMOVAL		PERMIT REQUIREMENT	*****	*****	85	*****	*****	PER-CENT		ONCE/ MONTH	CALCUL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	DATE		
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO

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

Hunting Creek North

Date	Flow	INFLUENT Concentration			Pounds		
		TSS	BOD	NH3	TSS	BOD	NH3
11/1/2008	0.233						
11/2/2008	0.24						
11/3/2008	0.227						
11/4/2008	0.235						
11/5/2008	0.227	236	235	34	446.790	444.897	64.368
11/6/2008	0.219						
11/7/2008	0.217						
11/8/2008	0.122						
11/9/2008	0.244						
11/10/2008	0.218						
11/11/2008	0.233						
11/12/2008	0.228	258	316	44	490.592	600.880	83.667
11/13/2008	0.242						
11/14/2008	0.22						
11/15/2008	0.338						
11/16/2008	0.275						
11/17/2008	0.229						
11/18/2008	0.243						
11/19/2008	0.229	172	156	47	328.496	297.938	89.763
11/20/2008	0.228						
11/21/2008	0.216						
11/22/2008	0.23						
11/23/2008	0.246						
11/24/2008	0.295						
11/25/2008	0.253	226	173	41	476.865	365.033	86.511
11/26/2008	0.25						
11/27/2008	0.265						
11/28/2008	0.239						
11/29/2008	0.249						
11/30/2008	0.26						
12/1/2008							
Average	0.238	223	220	41.50	435.686	427.187	81.077
Maximum	0.338	258	316	47.00	490.6	600.88	89.763

Hunting Creek North

TSS Rem BOD Rem

0.970339 0.987234

0.96124 0.990506

0.97093 0.980769

0.946903 0.976879

<hr/> <hr/>	
96%	99%
0	0
0	0



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

KPDES #	Facility ID	Treatment Plant Name	Receiving Stream of Treatment Plant	Region						
KY0029106	MSD0291	HUNTING CREEK NORTH	HARRODS CREEK	EAST						
Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to					
SPL Sewer Treatment Plant	MSD0291	7300 SHADWELL LN		HARRODS CREEK	STREAM					
<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	841287	11/10/08 12:00 PM	MARKS JR	COOMER	REPAIRED - ISSUE RESOLVED	11/10/08	BYPASS AT TREATMENT PLANT	DISCHARGE TO WATERS OF THE US	11/10/08 12:45 PM	

Spot Inspections:

Discharge Amount: 2,555 GAL
Cause: CLOGGED UP SLUDGE RETURN LINE
Clean Up: MSD CONTRACTOR CLEANED AND SANITIZED AREA
Control Zone: TEMP SIGNS POSTED
Impact: SOLIDS OBSERVED IN CREEK
Repair: MSD CONTRACTOR UNCLOGGED SLUDGERETURN LINE SAP WORKORDER # 5199531

Notifications:

11/10/08 02:14 PM DIS PUB temporary signs posted to warn public of discharge
11/10/08 01:00 PM DIS NOT Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov

Total Facilities Printed: 5
Total Work Orders Printed: 5