



MSD

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

July 24, 2008

Charlie Roth
Louisville Regional Office (KDOW)
9116 Leesgate Road
Louisville, KY 40222-5084

RE: Jeffersontown Treatment Plant, KPDES No: KY0025194
Discharge Monitoring Report
June 2008

Dear Mr. Roth:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR), for the Jeffersontown WTP, KPDES No.: KY0025194 for the month of June 2008. Also enclosed are the Discharge Reports for JTWTP and the letters associated with each blending event.

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

Sincerely,

James E. Porter Jr.
Process Supervisor Central Region

JEP/Jeffersontown 0608.doc

Enclosures

cc: K. Thurman (KDOW)
R. Shaw
T. Singleton



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

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME MSD JEFFERSONTOWN STP
ADDRESS C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY MSD JEFFERSONTOWN STP
LOCATION JEFFERSONTOWN KY 40299
ATTN DENNIS THOMASSON, SR METRO OPS

KY0025194
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MAJOR (SUBR LV)
F - FINAL JEFFE
FLOW 300 TSS DO PH
EFFLUENT
*** NO DISCHARGE [] ***

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
05	06	01		05	06	30

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	7.6		(19)	7						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	INST MIN									
PH	00400 1 0 0	6.6		(12)	0						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MINIMUM									
SOLIDS, TOTAL SUSPENDED	00500 0 0 0	5196	5874	(26)	198	224	(19)				
RAW SEW/INFLUENT	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY	REPORT	REPORT					
SOLIDS, TOTAL SUSPENDED	00500 1 0 0	310	617	(26)	12.00	24.00	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY	MO AVG	MX WK AV					
NITROGEN, AMMONIA TOTAL (AS N)	00610 0 0 0	435	464	(26)	16.6	17.76	(19)				
RAW SEW/INFLUENT	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY	REPORT	REPORT					
NITROGEN, AMMONIA TOTAL (AS N)	00610 1 1 0	27.02	51.68	(26)	1.01	2.03	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY	MO AVG	MX WK AV					
PHOSPHORUS, TOTAL (AS P)	00665 1 1 1	23.45	38.74	(26)	0.89	1.46	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY	MO AVG	MX WK AV					
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.					TELEPHONE		DATE		
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

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

USE MO AVG FOR 30D/TSS REMV/REPT IN MINIMUM COLUMN.

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

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

Form Approved.
OMB No. 2040-0004

NAME MS0 JEFFERSONTOWN STP
ADDRESS C/O CEDAR CREEK STP
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY MS0 JEFFERSONTOWN STP
LOCATION JEFFERSONTOWN KY 40299
ATTN: DENNIS THOMASSON, SR METRO DPS

KY0025194
PERMIT NUMBER

001 2
DISCHARGE NUMBER

MAJOR (SUBR LV)
F - FINAL
FLOW 300 TSS 10 PH
EFFLUENT
*** NO DISCHARGE [] ***

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
08	05	01		08	05	30

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				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	3.23	4.89	(05)	*****	*****	*****				0	0/1	0/1
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	MGD	*****	*****	*****	****			CONT IN CONT IN	VOUS
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	*****	*****		*****	*****	*****	(13)			0	7/7	3000
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	****			FREE/BRAD	WEEK
BOD, CARBONACEOUS 05 DAY, 20C 80062 0 0 0 RAW SEW/INFLUENT	3419	3621	(26)	*****	*****	*****	(19)			0	7/7	3000
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT MX WK AV	LBS/DY	*****	*****	*****	*****			FREE/COMPOS	WEEK
BOD, CARBONACEOUS 05 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE	95.00	132.0	(26)	*****	*****	*****	(19)			0	7/7	3000
	PERMIT REQUIREMENT	667	1001	LBS/DY	*****	*****	*****	*****			FREE/COMPOS	WEEK
BOD, CARB-5 DAY, 20 DEG C, PERCENT REMVL 80091 0 0 0 PERCENT REMOVAL	*****	*****		*****	*****	*****	(23)			0	1/30	0/1
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	*****			ONCE/	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 0 0 0 PERCENT REMOVAL	*****	*****		*****	*****	*****	(23)			0	1/30	0/1
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	*****			ONCE/	CALCTD
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
H. J. SCHROEDER JR.
BIAOACTIVE 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.

James E. [Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE	DATE		
502-540-6000	07	22	
AREA CODE	NUMBER	YEAR	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

NAME OF TREATMENT PLANT JEFFERSONTOWN WTP

COUNTY JEFFERSON

MONTH OF: June 2008

KPDES PERMIT NUMBER KY0025194

PLANT CAPACITY 4.0 MGD

RECEIVING STREAM CHENOWETH RUN

DATE	TOTAL FLOW (MILLION GALLONS)	RAW SEWAGE		pH			SETTLABLE SOLIDS (mg/L)			DISSOLVED OXYGEN (mg/L)			SUSPENDED SOLIDS (mg/L)			5 DAY CBOD (mg/L)			ACTIVATED SLUDGE			AERATION BASIN						SLUDGE HANDLING						FINAL		
		GRIT REMOVED (CUBIC FEET)	SCREENINGS (CUBIC FEET)	RAW	FINAL	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	STREAM ABOVE	FINAL EFFLUENT	STREAM BELOW	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	RAW	PRIMARY EFFLUENT	FINAL EFFLUENT	RETURN			MLVSS (mg/L) X 1000	DISSOLVED OXYGEN (mg/L)	MLSS (mg/L) X 1000	MLVSS (mg/L) X 1000	SETTLED SLUDGE VOLUME		RAW			HAULED			TOTAL PHOS. (mg/L)	NH3-N (mg/L)	FECAL COLIFORM (COLONIES/100ML)	
																		GAL/DAY X 1000	MLSS X 1000	MLVSS X 1000					30 MIN.	60 MIN.	GALLONS X 1000	% DRY SOLIDS	% VOLATILE SOLIDS	% DRY SOLIDS	% VOLATILE SOLIDS	WITHDRAWN GALLONS X 1000				
1	2.78			6.9	7.6				7.6		157		15	112		5	1.58		26	5.4				210	200						0.99	0.73	67			
2	2.82			7.0	7.6				8.5		248		22	162		5	2.47	3.97	10	7.3	2.33	1.89	240	230						1.72	0.84	410				
3	4.16			6.9	7.8				8.2		113		13	74		3	1.63	5.57		6.5	2.74	2.11	230	200						1.77	4.60	31				
4	3.45	3	3	7.1	7.0				8.3		140		38	119		8	1.68	4.34		0.8	2.07	1.6	200	190						1.98	1.90	160				
5	3.04			6.8	7.8				8.2		192		31	186		5	1.63	5.15	11	6.6	2.81	2.18	210	200						1.49	0.06	100				
6	2.87			6.9	7.2				8.4		272		36	192		6	1.64	4.43		6.1	2.72	2.04	190	180						1.13	0.06	113				
7	2.73			6.8	7.0				8.0		211		12	123		4	1.64		11	6			200	200						1.11	0.95	43				
8	2.59			6.9	7.0				8.2		305		23	137		4	1.6		9	6			200	190						1.10	0.84	3				
9	2.68			6.9	6.9				8.2		310		17	277		3	1.62	3.42		5.8	2.63	2.13	190	180						1.36	0.67	165				
10	2.63			6.7	7.5				8.4		242		13	163		3	1.65	3.71		5.9	2.71	2.24	200	190						1.13	0.67	29				
11	2.59	3	3	6.8	7.2				8.2		208		14	149		4	1.61	4.13	25	6.4	2.66	2.05	200	190						0.97	0.84	130				
12	2.57			6.7	6.8				8.2		208		12	161		4	1.6	4.73	36	6.8	3.41	2.52	200	200						0.71	0.50					
13	3.73			6.8	6.9				8.3		156		10	102		3	1.55	5.29		6.7	2.99	2.22	200	190						0.70	0.84	290				
14	3.86			6.7	6.9				9.0		140		7	96		3	1.66		27				210	200						0.45	0.06	2260				
15	2.94			6.9	7.0				8.8		147		7	96		3	1.65		27	6.3			230	200						0.67	0.06	67				
16	3.32			6.7	6.6				8.5		154		8	122		3	1.62	6.41	32	7	2.94	2.19	200	190						0.87	0.06	247				
17	3.11			7.0	6.8				8.6		193		8	121		3	1.62	6.47	36	7.3	2.85	2.09	200	200						0.76	0.06	48				
18	2.84	3	3	6.9	6.8				8.4		202		9	160		3	1.55	5.3	39	6.8	2.9	2.29	220	210						0.60	1.50	43				
19	3.01			6.9	6.7				8.5		232		8	121		3	1.55	7.12	39	7	2.89	2.16	200	200						0.43	0.95	13				
20	4.89			6.7	7.3				8.8		129		5	85		3	1.6	8.18	39	7.3	2.93	2.29	200	200						0.45	0.06	80				
21	3.81			6.8	7.2				8.4		176		4	153		2	1.61		39	7.1			200	200						0.37	0.06	3				
22	3.61			6.7	7.3				8.2		300		6	107		3	1.67		41	7			200	200						0.50	0.06	20				
23	3.62			6.8	6.6				8.3		189		5	115		3	1.6	9.09	41	7.5	2.71	1.98	200	200						0.51	1.40	3				
24	3.07			6.3	6.7				8.2		146		7	95		3	1.62	7.33	47	7.2	3.12	2.31	210	200						0.64	3.60	40				
25	2.89	3	3	6.7	6.8				8.4		204		7	142		3	1.71	6.23	44	7.2	2.81	2.03	200	200						0.83	5.40	3				
26	3.26			6.8	7.1				8.3		161		6	92		3	1.41	7.29	39	6.8	3.03	2.25	200	200						0.86	3.40	5				
27	3.77			6.7	7.4				8.4		264		6	137		3	1.58	8.13	39	7	3.28	2.49	200	190						0.80	0.06	7				
28	4.27			6.8	7.3				8.1		144		5	82		3	1.23		39	6.7			190	190						0.70	0.06	10				
29	3.34			7.0	7.3						149		3	81		3	1.66		39	7.1			190	190						0.52	0.06	10				
30	3.09			6.8	7.7				8.0		238		4	167		3	1.69	8.97	38	6.7	2.73	1.98	200	190						0.49	0.06	18				
31																																				
Tot.	97.34	12	12														48.91																			
Avg.	3.24	3	3	6.8	7.1				8.3		198		12	131		4	1.63	5.985	32.21	6.493	2.822	2.145	204	196.7						0.89	1.01	37				

RESIDENTIAL
COMMERCIAL
INDUSTRIAL

INDUSTRIAL WASTE POPULATION EQUIVALENT

30902 20847 25471

FLOW CBOD TSS

OPERATOR

CERT. NO.

TOTAL NUMBER OF SEWER CONNECTIONS

0

SEWER CONNECTIONS

0 X 4 =

0 SEWERED POPULATION

PLANT TELEPHONE



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

KPDES #	Facility ID	Treatment Plant Name	Receiving Stream of Treatment Plant	Region					
KY0025194	MSD0255	JEFFERSONTOWN	CHENOWETH RUN	CENT					
Facility Type	Facility ID	Facility Address	If Pump Station, Name of Pump Station:	Receiving Stream	Discharge to				
SPL Sewer Treatment Plant	MSD0255	10725 OLD TAYLORSVILLE RD		CHENOWETH RUN	STREAM				
Activity Code / Description	WO #	Initiated	Initiated By	Assigned To	Disch Status	Event Date	Problem	Result	Completed
DISDW: DRY WEATHER DISCHARGE	791771	06/09/08 01:37 AM	SINGLETON	LAMB DIN JR	DOCUMENTED	01/14/07	BYPASS AT TREATMENT PLANT	DISCHARGE TO WATERS OF THE US	06/09/08 01:44 AM

Spot Inspections:

Discharge Amount: 9,916 GAL
 Cause: UV TRIPPED
 Clean Up: NO DEBRIS
 Control Zone: NO CONTROL ZONE WAS SET UP
 Impact: NO VISUAL IMPACT OBSERVED
 Repair: PLACED UV LIGHTS IN MANUAL WO#4012914

Notifications:

06/09/08 12:58 AM Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
 07/11/08 10:22 AM No notification required, permanent signs posted.



MSD

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

June 12, 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 Jeffersontown WTP – KPDES Permit KY0025194

Dear Mr. Roth:

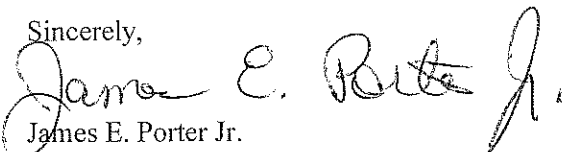
This plant experienced a bypass event and has been reported through our electronic notification system at approximately 07:00 AM on June 09, 2008, referencing Work Order 791771 as a bypass. This letter serves as a written report of the bypass as required by 401 KAR 5:065.

Provided below are the details of the bypass event:

- Description of the noncompliance and its cause: UV system tripped and would not re-start automatically causing 9,916 gallons of treated wastewater to be discharged without disinfection.
- Period of noncompliance: Starting 01:37 AM on June 09, 2008 and stopping 01:44 AM on June 09, 2008.
- Steps taken or planned to reduce, eliminate and prevent recurrence: The maintenance department has been unable to determine the cause of UV shutdown. We will continue to investigate and observe the UV system to try and prevent this from reoccurring in the future.

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

