



Louisville and Jefferson County Metropolitan Sewer District  
700 West Liberty Street  
Louisville Kentucky 40203-1911  
502-540-6000  
[www.msdlouky.org](http://www.msdlouky.org)

November 17, 2009

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

**Re: MSD Metro Operations  
Ken Carla WQTC; KPDES No.: KY0022497  
Discharge Monitoring Reports –October 2009**

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Ken Carla WQTC; KPDES No.: KY0022497 for the month of October 2009.

There are no exceedences, overflow reports or Bypass reports to report this month.

If you have any questions concerning the attached DMRs, please contact me at (502)587-5856.

Sincerely,

D.J. Rheinlaender  
Process Supervisor, East Region

DJR/Ken Carla 1009

Enclosures

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



*Beneficial Use of Louisville's Biosolids*  
[www.louisvillegreen.com](http://www.louisvillegreen.com)

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

NAME: MEN CARLA WOTC MSD  
 ADDRESS: C/O CEDAR CREEK WOTC  
 8405 CEDAR CREEK RD  
 LOUISVILLE KY 40211  
 FACILITY: MEN CARLA WOTC MSD  
 LOCATION: LOUISVILLE KY  
 ATTN: DENNIS THOMASOVA SR METRO OPS

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

PERMIT NUMBER: KY00022477  
 DISCHARGE NUMBER: 0011

MINOR (SUBR LV)  
 7 - FINAL  
 SANITARY WASTEWATER EFFLUENT  
 \*\*\* NO DISCHARGE \*\*\*

Form Approved.  
 OMB No. 2040-0004

JENFIE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	08	01		07	08	01

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	*****	*****		9	*****	*****	MG/L	0	1/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	INST MIN		*****	*****	MG/L		1/31	GR
BOD, 5-DAY (20 DEG. C)	00310	0.15	0.15	LBS/DY		6	6	MG/L	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L		1/31	CP
PH	00400	*****	*****		7.4	*****	*****	SU	0	1/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MINIMUM		*****	*****	SU		1/31	GR
SOLIDS, TOTAL SUSPENDED	00500	0.10	0.10	LBS/DY		4	4	MG/L	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L		1/31	CP
NITROGEN, AMMONIA TOTAL (AS N)	00610	0.003	0.003	LBS/DY		0.1	0.1	MG/L	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L		1/31	CP
PHOSPHORUS, TOTAL (AS P)	00665	0.004	0.008	MGD		0.28	0.28	MG/L	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD		30DA AVG	DAILY MX	MG/L		1/31	CP
PHENOL, IN CONDUCT OR THRU TREATMENT PLANT	00050	0.004	0.008	MGD				MG/L	0	C/W	C/W
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD				MG/L		C/W	C/W

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 EX-101  
 H. J. Sabadun 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

TELEPHONE: 502 546 1000  
 DATE: 07 11 17  
 AREA CODE: 502  
 NUMBER: 546 1000  
 YEAR: 07  
 MO: 11  
 DAY: 17

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

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

NAME KEN CARLA WQTC MSD  
 ADDRESS C/O CEDAR CREEK WQTC  
 8405 CEDAR CREEK RD  
 LOUISVILLE KY 40211  
 FACILITY KEN CARLA WQTC MSD  
 LOCATION LOUISVILLE KY  
 ATTN: DENNIS THOMASSEN, SR METRO OPS

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

PERMIT NUMBER KY00022497			DISCHARGE NUMBER 0011			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	10	01		07	10	01

MINOR (SUBR LV)  
 F - FINAL JEFFE  
 SANITARY WASTEWATER  
 EFFLUENT  
 \*\*\* NO DISCHARGE ( ) \*\*\*

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			
COLIFORM, FECAE GENERAL 74055 L O O EFFLUENT GROSS VALUE		*****	*****		*****	1	1	1000 #/100ML	0	1/31	GR
	PERMIT REQUIREMENT	*****	*****	***	*****	3000 GGD	7 DA GGD	100ML		1/31	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 EXCPT. N/A  
 H.C. Schaefer, 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

TELEPHONE  
 AREA CODE NUMBER  
 DATE  
 YEAR MO DAY  
 502 546 6886 09 11 17

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

Ken Carla	Report for	Oct-09			Tot. Exc.=	0				
Tot. Flow=	0.113	Concentrations								
Date	Flow	TSS	BOD	NH3	Fecal	TSS	Pounds BOD	NH3	Tot. Phos.	
10/1/09	0.003									
10/2/09	0.003									
10/3/09	0.004									
10/4/09	0.003									
10/5/09	0.003	4	6	0.11	1	0.100	0.150	0.003	0.28	
10/6/09	0.002									
10/7/09	0.004									
10/8/09	0.006									
10/9/09	0.007									
10/10/09	0.002									
10/11/09	0.003									
10/12/09	0.004									
10/13/09	0.003									
10/14/09	0.003									
10/15/09	0.004									
10/16/09	0.003									
10/17/09	0.003									
10/18/09	0.002									
10/19/09	0.004									
10/20/09	0.003									
10/21/09	0.003									
10/22/09	0.003									
10/23/09	0.004									
10/24/09	0.003									
10/25/09	0.003									
10/26/09	0.003									
10/27/09	0.005									
10/28/09	0.004									
10/29/09	0.003									
10/30/09	0.005									
10/31/09	0.008									
Average	0.004	4.00	6.00	0.11	1.00	0.10	0.15	0.00	0.28	
Maximum	0.008	4.00	6.00	0.11	1.00	0.10	0.15	0.00	0.28	
Exceed.	0	0	0	0	0	0	0	0		

KEN CARLA STP MSE  
C/O ERIC G. BRADY  
4522 ALGONQUIN PA  
LOUISVILLE KY  
KEN CARLA STP MSE  
LOUISVILLE KY  
ATTN: H. J. SCHARDI

OXYGEN, DISSOLVEI  
(DO)  
00300 1 0 0  
EFFLUENT GROSS V  
BOD, 5-DAY  
(20 DEG. C)  
00310 1 0 0  
EFFLUENT GROSS V  
PH

00400 1 0 0  
EFFLUENT GROSS V  
SOLIDS, TOTAL  
SUSPENDED  
00530 1 0 0  
EFFLUENT GROSS V  
NITROGEN, AMMONI.  
TOTAL (AS N)  
00610 1 0 0  
EFFLUENT GROSS V  
PHOSPHORUS, TOT/  
(AS P)

00665 1 0 0  
EFFLUENT GROSS V  
FLOW, IN CONDUIT C  
THRU TREATMENT P  
50050 1 0 0  
EFFLUENT GROSS V  
COLIFORM, FECAL