



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

January 14, 2010

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 -December 2009**

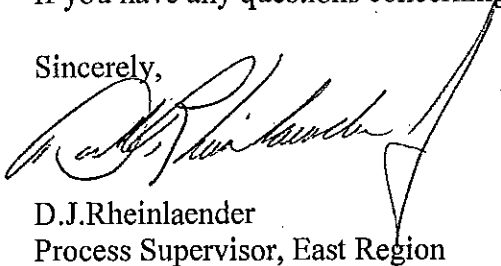
Dear Ms. Bentley

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 December 2009.

There are no exceedences, overflow reports or Bypass reports for 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 0110

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: KEN CARLA WOTC MSD
 ADDRESS: C/O CEDAR CREEK WOTC
 8405 CEDAR CREEK RD
 LOUISVILLE KY 40211

FACILITY: KEN CARLA WOTC MSD

LOCATION: LOUISVILLE KY

ATTN: DENNIS THOMASSON, SR METRO OPS

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

PERMIT NUMBER: KY00022497

DISCHARGE NUMBER: 0011

MINOR (SUBR LV)
 F - FINAL

Form Approved
 OMB No. 2040-0004

JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	12	07	TO	07	12	07

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			
OXYGEN, DISSOLVED (DO)	00300 1 0 0	*****	*****		7	*****	*****	(19)	0	2/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	INST MIN	*****	*****	MG/L		MONTH	GRAB
BOD, 5-DAY (20 DEG. C)	00310 1 0 0	0.07	0.07	(25)	*****	2	2	(19)	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.50	5.00	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	COMPOS
PH	00400 1 0 0	*****	*****		7.4	*****	7.9	(12)	0	2/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	MINIMUM	*****	MAXIMUM	SU		MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	00530 1 0 0	0.37	0.37	(25)	*****	11	11	(19)	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.50	5.00	LBS/DY	*****	30DA AVG	DAILY MX	MG/L		MONTH	COMPOS
NITROGEN, AMMONIA TOTAL (AS N)	00610 1 0 0	0.002	0.002	(25)	*****	0.1	0.1	(19)	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1.07	3.34	LBS/DY	*****	20	40	MG/L		MONTH	COMPOS
PHOSPHORUS, TOTAL (AS P)	00665 1 0 0	*****	*****		*****	0.36	0.36	(19)	0	1/31	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT	REPORT	MG/L		MONTH	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	00050 1 0 0	0.003	0.006	(03)	*****	*****	*****	*****	0	0/1	0/1
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	*****		WEEK	INST MAX

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Eric Ditt
 H. J. Schaefer
 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: 40 546 4000
 DATE: 10 / 1 / 14
 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 **KEN CARLA WQTC MSD**
 ADDRESS **C/O CEDAR CREEK WQTC**
8405 CEDAR CREEK RD
LOUISVILLE
 FACILITY **KEN CARLA WQTC MSD**
 LOCATION **LOUISVILLE**
 ATTN: **DENNIS THOMASSON, SR METRO OPS**

KY 40211

KY

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

PERMIT NUMBER **0002247**

DISCHARGE NUMBER **001 1**

MINOR
 (SUBR LV)
 F - FINAL
 SANITARY WASTEWATER
 EFFLUENT

Form Approved.
 OMB No. 2040-0004

JEFFE

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
07	12	31		07	12	31

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			
COLIFORM, FECAL GENERAL		*****	*****		*****						
74055 1 0 0		*****	*****	***	*****	200	400	#/	0	1/31	GR
EFFLUENT GROSS VALUE		*****	*****	****	*****	300A GED	7 0A GED	100ML		ONCE MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 DATE

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

Ken Carla		Report for	Dec-09		Tot. Exc.=		0			
Tot. Flow=	0.105		Concentrations				Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	
12/1/09	0.003									
12/2/09	0.004	11	2	0.056	1	0.367	0.067	0.002	0.36	
12/3/09	0.004									
12/4/09	0.003									
12/5/09	0.003									
12/6/09	0.003									
12/7/09	0.004									
12/8/09	0.006									
12/9/09	0.006									
12/10/09	0.005									
12/11/09	0.005									
12/12/09	0.003									
12/13/09	0.003									
12/14/09	0.003									
12/15/09	0.003									
12/16/09	0.003									
12/17/09	0.003									
12/18/09	0.003									
12/19/09	0.003									
12/20/09	0.003									
12/21/09	0.003									
12/22/09	0.003									
12/23/09	0.003									
12/24/09	0.003									
12/25/09	0.003									
12/26/09	0.003									
12/27/09	0.003									
12/28/09	0.004									
12/29/09	0.003									
12/30/09	0.003									
12/31/09	0.001									
Average	0.003	11.00	2.00	0.06	1.00	0.37	0.07	0.00	0.36	
Maximum	0.006	11.00	2.00	0.06	1.00	0.37	0.07	0.00	0.36	
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