



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

April 20, 2010

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

**Re: MSD Metro Operations
Shadow Wood WQTC; KPDES No.: KY0031810
Discharge Monitoring Reports –March 2010**

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Shadow Wood WQTC; KPDES No.: KY0031810 for the month of March 2010.

There are no exceedences , bypass reports or overflow 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/Shadow Wood 0310

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 SHADOWWOOD WOTC

ADDRESS 0/0 JOHN KESSEL

3512 HITT LN

LOUISVILLE

KY 40241

FACILITY SHADOWWOOD WOTC

LOCATION LOUISVILLE

KY 40057

ATTN: MARION M GEE

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

PERMIT NUMBER KY0001510

DISCHARGE NUMBER 001

MINOR

(SUBR LV)

F - FINAL

SANITARY WASTEWATER

EFFLUENT

*** NO DISCHARGE ***

Form Approved.
OMB No. 2040-0004

JEFFE

MONITORING PERIOD

FROM	YEAR	MO.	DAY	TO	YEAR	MO.	DAY

NOTE: Read Instructions before completing this form.

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) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	8			8				0	2/31	GR
	PERMIT REQUIREMENT	INST MIN									
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	7.0			7.0		7.2		0	2/31	GR
	PERMIT REQUIREMENT	MINIMUM					MAXIMUM				
SOLIDS, TOTAL SUSPENDED 00500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.2	3.0	LBS/DY		13	19		0	1/7	CP
	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX				
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 2 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.07	0.17	LBS/DY		0.4	1		0	1/7	CP
	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX				
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					0.18	0.21		0	1/7	CP
	PERMIT REQUIREMENT					30DA AVG	DAILY MX				
LEAKS IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.030	MGD					0	C/N	C/N
	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD						VOID	
GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					1	1		0	1/7	GR
	PERMIT REQUIREMENT					30DA GED	7 DA GED	100ML			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
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
DATE
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 SHADOWWOOD WGT
ADDRESS C/O JOHN KESSEL
2516 HITT LN
LOUISVILLE KY 40241
FACILITY SHADOWWOOD WGT
LOCATION LOUISVILLE KY 40087
ATTN: MARION M GEE

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

PERMIT NUMBER
KY00031510

DISCHARGE NUMBER
0011

MINOR
(SUBP LV)
F - FINAL
SANITARY WASTEWATER
EFFLUENT
*** NO DISCHARGE ***

JEJFE

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

FROM

TO

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			
300. CARBONACEOUS 55 DAY, 200 300FS EFFLUENT GROSS VALUE		0.88	1.4	LBS/DY		5	9	MG/L	0	1/7	1P
		300A AVG	DAILY MAX	LBS/DY		300A AVG	DAILY MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
EXECT. VP
H. J. [Signature]
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]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
502 546 6666
AREA CODE NUMBER
DATE
11 4 19
YEAR MO DAY

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

SHADOW WOOD		Report for	Jan-01		Tot. Exc.=		0			
Tot. Flow=	0.689		Concentrations				Pounds		Conc.	
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	T Phos	
1/1/01	0.024									
1/2/01	0.021									
1/3/01	0.022	14	2	0.22	1	2.569	0.367	0.040	0.127	
1/4/01	0.019									
1/5/01	0.022									
1/6/01	0.026									
1/7/01	0.027									
1/8/01	0.023									
1/9/01	0.02									
1/10/01	0.019	19	9	0.11	1	3.011	1.426	0.017	0.193	
1/11/01	0.02									
1/12/01	0.022									
1/13/01	0.022									
1/14/01	0.024									
1/15/01	0.021									
1/16/01	0.019									
1/17/01	0.021	12	6	0.22	1	2.102	1.051	0.039	0.202	
1/18/01	0.019									
1/19/01	0.021									
1/20/01	0.025									
1/21/01	0.025									
1/22/01	0.025									
1/23/01	0.018									
1/24/01	0.02	6	4	1.01	1	1.001	0.667	0.168	0.209	
1/25/01	0.023									
1/26/01	0.025									
1/27/01	0.016									
1/28/01	0.027									
1/29/01	0.03									
1/30/01	0.021									
1/31/01	0.022									
Average	0.022	12.75	5.25	0.39	1.00	2.17	0.88	0.07	0.18	
Maximum	0.030	19.00	9.00	1.01	1.00	3.01	1.43	0.17	0.21	
Exceed.	0	0	0	0	0	0	0	0	0	

LAKE FOREST
C/O ERIC G. BRADY
700 W. LIBERTY STR
LOUISVILLE KY
SHADOW WOOD

ATTN: H. J. SCHARDI

OXYGEN, DISSOLVE
(DO)
00300 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 2 0
EFFLUENT GROSS V
PHOSPHORUS, TOT/
(AS P)

00665 1 0 0
EFFLUENT GROSS V
FLOW, IN CONDUIT C
THRU TREATMENT F

50050 1 0 0
EFFLUENT GROSS V
COLIFORM, FECAL
GENERAL