



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)

March 18, 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 –February 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 February 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](http://www.louisvillegreen.com)

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

NAME SHADOWWOOD WGTG  
ADDRESS C/O JOHN KESSEL  
5512 HETT LN  
LOUISVILLE KY 40291  
FACILITY SHADOWWOOD WGTG  
LOCATION LOUISVILLE KY 40059  
ATTN: MARTIN M GEE

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

PERMIT NUMBER 170031210  
DISCHARGE NUMBER 001

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

MONITORING PERIOD						
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			
DRYWEIGHT DISSOLVED (DD) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	11 INST MIN	***** *****	***** *****	MG/L	0	1/7	GR
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	7.0 MINIMUM	***** *****	7.4 MAXIMUM	BU	0	1/7	GR
SOLIDS, TOTAL SUSPENDED 00500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	1.2 30DA AVG	2.7 DAILY MX	LBS/DY	***** *****	7 30DA AVG	13 DAILY MX	MG/L	0	1/7	CP
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 2 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	0.14 30DA AVG	0.48 DAILY MX	LBS/DY	***** *****	0.8 30DA AVG	3 DAILY MX	MG/L	0	5/28	CP
PHOSPHORUS, TOTAL (AS P) 00625 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	***** *****	0.15 30DA AVG	0.17 DAILY MX	MG/L	0	1/7	CP
FLOW, IN COMBINATION THRU TREATMENT PLANT 00650 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	0.024 30DA AVG	0.038 INST MAX	MGD	***** *****	***** *****	***** *****	***** *****	0	C/N	C/N
CALIFORNIA, FECALE GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	***** *****	6 30DA GED	147 7 DA GED	100ML	0	1/7	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
EXEC. DIR  
H.J. Scherwin  
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  
504 546 6000  
DATE  
10 3 16  
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 SHADDAWOOD WGTG  
ADDRESS C/O JOHN KESSEL  
2512 HITT LN  
LOUISVILLE KY 40241  
FACILITY SHADDAWOOD WGTG  
LOCATION LOUISVILLE KY 40059  
ATTN: MARION M GEE

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

KT0031210	001 E
PERMIT NUMBER	DISCHARGE NUMBER

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

JEPFE

MONITORING PERIOD						
YEAR	MO-	DAY	TO	YEAR	MO-	DAY

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			
BOD, CARBONACEOUS 5 DAY, 20C 80082 1 0 0 EFFLUENT GROSS VALUE		0.68	1.3	LBS/DY		4	6	MG/L	0	1/9	CP
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	30DA AVG	DAILY MX			30DA AVG	DAILY MX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
*Exec. Dir*  
*A. J. Schardin*  
TYPED OR PRINTED

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*[Signature]*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE	DATE			
502 548 6666	10	3	16	
AREA CODE	NUMBER	YEAR	MO	DAY

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

SHADOW WOOD		Report for	Jan-01			Tot. Exc.=		0		
Tot. Flow=	0.681		Concentrations					Pounds	Conc.	
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	T Phos	
1/1/01	0.019									
1/2/01	0.022			2.6						
1/3/01	0.016	4	2	0.17	1	0.534	0.267	0.477	0.169	
1/4/01	0.018									
1/5/01	0.038									
1/6/01	0.038									
1/7/01	0.028									
1/8/01	0.023									
1/9/01	0.024									
1/10/01	0.022	2	3	0.28	1	0.367	0.550	0.051	0.112	
1/11/01	0.021									
1/12/01	0.019									
1/13/01	0.019									
1/14/01	0.027									
1/15/01	0.023									
1/16/01	0.021									
1/17/01	0.02	7	4	0.17	8	1.168	0.667	0.028	0.141	
1/18/01	0.019									
1/19/01	0.019									
1/20/01	0.029									
1/21/01	0.028									
1/22/01	0.03									
1/23/01	0.024									
1/24/01	0.025	13	6	0.56	147	2.711	1.251	0.117	0.173	
1/25/01	0.03									
1/26/01	0.025									
1/27/01	0.027									
1/28/01	0.027									
1/29/01										
1/30/01										
1/31/01										
Average	0.024	6.50	3.75	0.76	5.86	1.19	0.68	0.14	0.15	
Maximum	0.038	13.00	6.00	2.60	147.00	2.71	1.25	0.48	0.17	
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, DISSOLVEI  
(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 P

50050 1 0 0  
EFFLUENT GROSS V  
COLIFORM, FECAL  
GENERAL