



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

September 16, 2011

Cheryl Edwards
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
Timber Lake WQTC; KPDES No.: KY 0043087
Discharge Monitoring Reports for Aug. 2011.**

Dear Ms. Edwards:

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Timber Lake WQTC; KPDES No.: KY0043087 for the month of Aug. 2011.

There were no exceedences, overflows or bypasses to report for this month.

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

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Thompson", written over a horizontal line.

Kevin Thompson
Process Supervisor, East Region

RM/ Timber Lake 8.11

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: WINDERMERE WASTE MFG
 ADDRESS: 400 CEDAR CREEK WGTG
 400 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY: WINDERMERE WASTE MFG
 LOCATION: PROSPECT KY 40059
 ATTN: DEANIS THOMPSON, BE METRO EPS

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

Form Approved
 OMB No. 2040-0004

PERMIT NUMBER: KY0043037

DISCHARGE NUMBER: 7 - FINAL

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

WINDERMERE WASTE MFG (SUBS LV)
 7 - FINAL
 MUNICIPAL DISCHARGE
 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			
DISSOLVED SOLIDS (DD)					7					1/1	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			****	INST MIN			MG/L			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				64		7.5			1/1	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			****	MINIMUM		MAXIMUM	SU			
RAW SEWAGE INFLUENT	SAMPLE MEASUREMENT	196	432			400	864			1/7	CP
RAW SEWAGE INFLUENT	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK AV	MG/L			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	7.0	9.2			14	18			1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK AV	MG/L			
RAW SEWAGE INFLUENT	SAMPLE MEASUREMENT	12	14			25	27			1/7	CP
RAW SEWAGE INFLUENT	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK AV	MG/L			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.2	0.2			0.4	0.5			1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	MX WK AV	LBS/DY		MO AVG	MX WK AV	MG/L			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					0.7	1.0			1/7	CP
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			****		MO AVG	MX WK AV	MG/L		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 D.J. Schardain TR
 Executive 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.

Kevin Thompson

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
502	546-6000	11	09	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: HEMER LAKE WGTG MGD
 ADDRESS: 400 CEDAR CREEK WGTG
 4000 CEDAR CREEK RD
 LOUISVILLE KY 40211
 FACILITY: HEMER LAKE WGTG MGD
 LOCATION: PROSPECT KY 40059
 ATTN: DENNIS THOMPSON, SR. METRO OPS

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

MINOR (SUBR LV)
 F - FINAL
 MUNICIPAL DISCHARGE EFFLUENT
 *** NO DISCHARGES ***

Form Approved
 OMB No. 2040-0004

PERMIT NUMBER

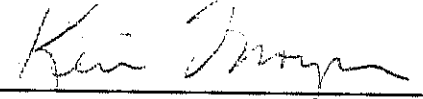
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

FROM

TO

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			
THRU TREATMENT PLANT	0.000	0.000	0.000	MGD							
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX	MGD							
THRU TREATMENT PLANT	0.000	0.000	0.000	MGD							
RESIDUAL						0.010	0.010	MG/L		1/1	GR
EFFLUENT GROSS VALUE						30DA AVG	DAILY MX	MG/L			
GENERAL	0.000	0.000	0.000	MGD		2	8	MG/L		1/7	GR
EFFLUENT GROSS VALUE						30DA AVG	DAILY MX	MG/L			
RAW SEW INFLUENT	0.000	0.000	0.000	MGD		236	350	MG/L		1/7	CP
EFFLUENT GROSS VALUE						MG AVG	MG WK AVG	MG/L			
RAW SEW INFLUENT	0.000	0.000	0.000	MGD		4	4	MG/L		1/7	CP
EFFLUENT GROSS VALUE						MG AVG	MG WK AVG	MG/L			
PERCENT REMOVAL	99									1/31	CA
PERCENT REMOVAL											
PERCENT REMOVAL	96									1/31	CA
PERCENT REMOVAL											
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.				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

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

Timberlake

INFLUENT

Date	Flow	Concentration			Pounds		
		TSS	BOD	NH3	TSS	BOD	NH3
8/1/2011	0.056						
8/2/2011	0.06	864	350	27	432.346	175.140	13.511
8/3/2011	0.063						
8/4/2011	0.048						
8/5/2011	0.055						
8/6/2011	0.067						
8/7/2011	0.08						
8/8/2011	0.069						
8/9/2011	0.055	378	218	26	173.389	99.997	11.926
8/10/2011	0.063						
8/11/2011	0.05						
8/12/2011	0.057						
8/13/2011	0.051						
8/14/2011	0.089						
8/15/2011	0.062						
8/16/2011	0.061	258	212	24	131.255	107.853	12.210
8/17/2011	0.065						
8/18/2011	0.062						
8/19/2011	0.068						
8/20/2011	0.071						
8/21/2011	0.075						
8/22/2011	0.058						
8/23/2011	0.057	98	162	24	46.587	77.012	11.409
8/24/2011	0.063						
8/25/2011	0.058						
8/26/2011	0.059						
8/27/2011	0.061						
8/28/2011	0.061						
8/29/2011	0.058						
8/30/2011	0.054						
8/31/2011	0.057						
Average	0.062	399.50	235.50	25.25	195.89	115.00	12.26
Maximum	0.089	864.00	350.00	27.00	432.35	175.14	13.51