



State of Ohio Environmental Protection Agency

Southeast District Office

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Ted Strickland, Governor
Lee Fisher, Lieutenant Governor
Chris Korleski, Director

August 27, 2009

Re: Guernsey County
Village of Pleasant City WWTP
Compliance Inspection
EPA Permit No. 0PB00088*BD
Correspondence (PWW)

Mayor and Council
Village of Pleasant City
P.O. Box 272
Pleasant City, Ohio 43772

Dear Mayor and Council:

On August 14, 2009, I conducted a compliance inspection at Pleasant City's Wastewater Treatment Plant (WWTP). The purpose of the inspection was to determine the compliance status with the terms and conditions of National Pollutant Discharge Elimination System (NPDES) permit number 0PB00088*BD. Mr. Michael Miser, plant operator, was present at the time of my inspection.

Based on the findings of my inspection and the review of our records, I have the following comments:

1. At the time of my inspection, only one biolac aeration basin and final clarifier were in use due to the low daily wastewater flows. Inspection of the biolac basin showed adequate aeration and mixing provided by the swinging air diffusers. The final clarifier was found to be relatively clean with minimal surface algae which consisted of duckweed. According to Mr. Miser, the algae is skimmed from the clarifier on a routine basis and no algae was observed in the final effluent.
2. Inspection of the UV chamber revealed all lamps to be properly operating and review of past effluent data has shown effective disinfection.
3. Inspection of the effluent composite sampler suction line tubing revealed a moderate buildup of mildew and scum in the line. It was instructed to Mr. Miser that the line should be evaluated monthly and replaced on a quarterly basis upon the buildup of any scum.

At the time of my inspection, the laboratory was found to be clean and orderly with an SOP manual provided for the cBOD and TSS tests which are done in house. Calibration logbooks were also found for all the water quality instruments and proper records maintained. It was noted during the inspection that annual calibration of the digital scales should be conducted with certified weights.

At the time of my inspection, the effluent was clear with very little suspended solids and no objectionable odor. Attached is a copy of my detailed inspection report. If you have any questions, please contact me at (740) 380-5416.

Sincerely,



Jake Greuey
District Representative
Division of Surface Water

JGG/dh

Enclosure

c: Michael Miser, Operator

NPDES
Compliance Inspection Report

A. NATIONAL DATA SYSTEM CODING

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
OPB00088*BD	OH0128023	August 14, 2009	C	S	1

B. FACILITY DATA

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Village of Pleasant City WWTP 11229 Pleasant Road Pleasant City, Ohio 43772	2:30 p.m.	October 1, 2007
	Exit Time	Permit Expiration Date
	3:10 p.m.	September 30, 2012

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Mike Miser	(740) 680-2807
Name, Address and Title of Responsible Official	Phone Number
Mayor and Council Village of Pleasant City P.O. Box 272 Pleasant City, Ohio 43772	

C. AREAS EVALUATED DURING INSPECTION

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>N/A</u> Pretreatment
<u>S</u> Records/Reports	<u>S</u> Laboratory	<u>N/A</u> Compliance Schedules
<u>S</u> Operations & Maintenance	<u>S</u> Effluent/Receiving Waters	<u>S</u> Self-Monitoring Program
<u>S</u> Facility Site Review	<u>S</u> Sludge Storage/Disposal	<u> </u> Other
<u>S</u> Collection System		

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated; N/A = Not Applicable)

D. SUMMARY OF FINDINGS/COMMENTS (attach additional sheets if necessary)

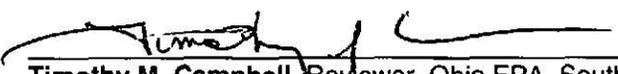
See attached letter.



Jake Greuey, Inspector, Ohio EPA, Southeast District Office

8/28/09

Date



Timothy M. Campbell, Reviewer, Ohio EPA, Southeast District Office

8/28/09

Date

E. PERMIT VERIFICATION

Inspection Observations Verify the Permit	Yes	No	N/A	N/E
a. Correct name and mailing address of permittee	X			
b. Correct name and location of receiving waters	X			
c. Product(s) and production rates conform with permit application (industries)	X			
d. Flows and loadings conform with NPDES permit	X			
e. Treatment processes are as described in permit application/briefing memo	X			
f. New treatment process(es) added since last inspection		X		
g. Notification given to state of new, different, or increased discharges			X	
h. All discharges are permitted	X			
i. Number and location of discharge points are as described in permit	X			

F. COMPLIANCE SCHEDULES/VIOLATIONS

	Yes	No	N/A	N/E
a. Any significant violations since the last inspection		X		
b. Permittee is taking actions to resolve violations			X	
c. Permittee has compliance schedule		X		
d. Compliance schedule contained in: <u>NPDES</u>			X	
e. Permittee is meeting compliance schedule			X	

G. OPERATION AND MAINTENANCE

Treatment Facility Properly Operated and Maintained	Yes	No	N/A	N/E
a. Standby power available: Generator: <u>X</u> Dual Feed: _____	X			
b. Adequate alarm system available for power or equipment failures	X			
c. All treatment units in service other than backup units	X			
d. Sufficient operating staff provided: No. of shifts: <u>2/7</u> Days/Week: _____	X			
e. Operator holds unexpired license of class required by permit Class: <u>II</u>	X			
f. Routine and preventive maintenance schedule/performed on time	X			
g. Any major equipment breakdown since last inspection		X		
h. Operation and maintenance manual provided and maintained	X			
i. Any plant bypasses since last inspection		X		
j. Regulatory agency notified of bypasses: _____ on MORS _____ 800 No.			X	
k. Any hydraulic and/or organic overloads experienced since last inspection		X		

Collection System	Yes	No	N/A	N/E
a. Percent combined system: <u>0</u> %			X	
b. Any collection system overflows since last inspection: CSO _____ SSO: _____		X		
c. Regulatory agency notified of overflow (SSOs)			X	
d. CSO O and M plan provided and implemented			X	
e. CSOs monitored and reported in accordance with permit			X	
f. Portable pumps used to relieve system			X	
g. Lift station alarm systems provided and maintained	X			
h. Are lift stations equipped with permanent standby power or equivalent	X			
i. Is there an inflow/infiltration problem (separate sewer system), or were there any major repairs to collection system since last inspection		X		
j. Any complaints received since last inspection of basement flooding		X		
k. Are any portions of the sewer system at or near capacity		X		

H. SLUDGE MANAGEMENT

	Yes	No	N/A	N/E
a. Sludge adequately disposed (Method: <u>Pump & Haul to another POTW - not done to date</u>)			X	
b. If sludge is incinerated, where is ash disposed of? _____			X	
c. Is sludge disposal contracted (Name: _____)		X		
d. Has amount of sludge generated changed significantly since last inspection		X		
e. Adequate sludge storage provided at facility	X			
f. Land application sites monitored and inspected per state rules			X	
g. Records kept in accordance with state rules	X			
h. Any complaints received in last year regarding sludge		X		
i. Is sludge adequately processed (digestion, dewatering, pathogen control) in accordance with Ohio EPA rules	X			

Comments: This facility has only been in operation since 2005 and receives average daily flows of less than .025 MGD and has a large aerated sludge lagoon designed for a plant of .270 MGD. Due to the small average daily flows and adequate storage, no sludge has ever been hauled off site.

I. SELF-MONITORING PROGRAM

Part 1 - Flow Measurement	Yes	No	N/A	N/E
a. Primary flow measuring device properly operated & maintained. Type of device: <input checked="" type="checkbox"/> ultrasonic & parshall flume _____ calculated from influent <input type="checkbox"/> weir _____ other <input type="checkbox"/> ultrasonic & weir _____ specify: *Flowmotion 900 Ultrasonic	X			
b. Calibration frequency adequate (date of last calibration: <u>June 2009</u>)	X			
c. Secondary instruments (totalizers, recorders, etc.) properly operated and maintained	X			
d. Flow measurement equipment adequate to handle expected ranges of flows	X			
e. Actual flow discharged is measured	X			
f. Flow measuring equipment inspection frequency: <input checked="" type="checkbox"/> Daily _____ Weekly <input type="checkbox"/> Monthly _____ Other				

K. MULTIMEDIA OBSERVATIONS

	Yes	No	N/A	N/E
a. Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories		X		
b. Do you notice staining or discoloration of soils, pavement, or floors		X		
c. Do you notice distressed (unhealthy, discolored, dead) vegetation		X		
d. Do you see unidentified dark smoke or dustclouds coming from sources		X		
e. Do you notice any unusual odors or strong chemical smells		X		
f. Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities		X		

If any of the above are observed, ask the following questions:

1. What is the cause of the conditions?
2. Is the observed condition or source a waste product?
3. Where is the suspected contaminant normally disposed?
4. Is this disposal permitted?
5. How long has the condition existed and when did it begin?