



State of Ohio Environm



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Southwest

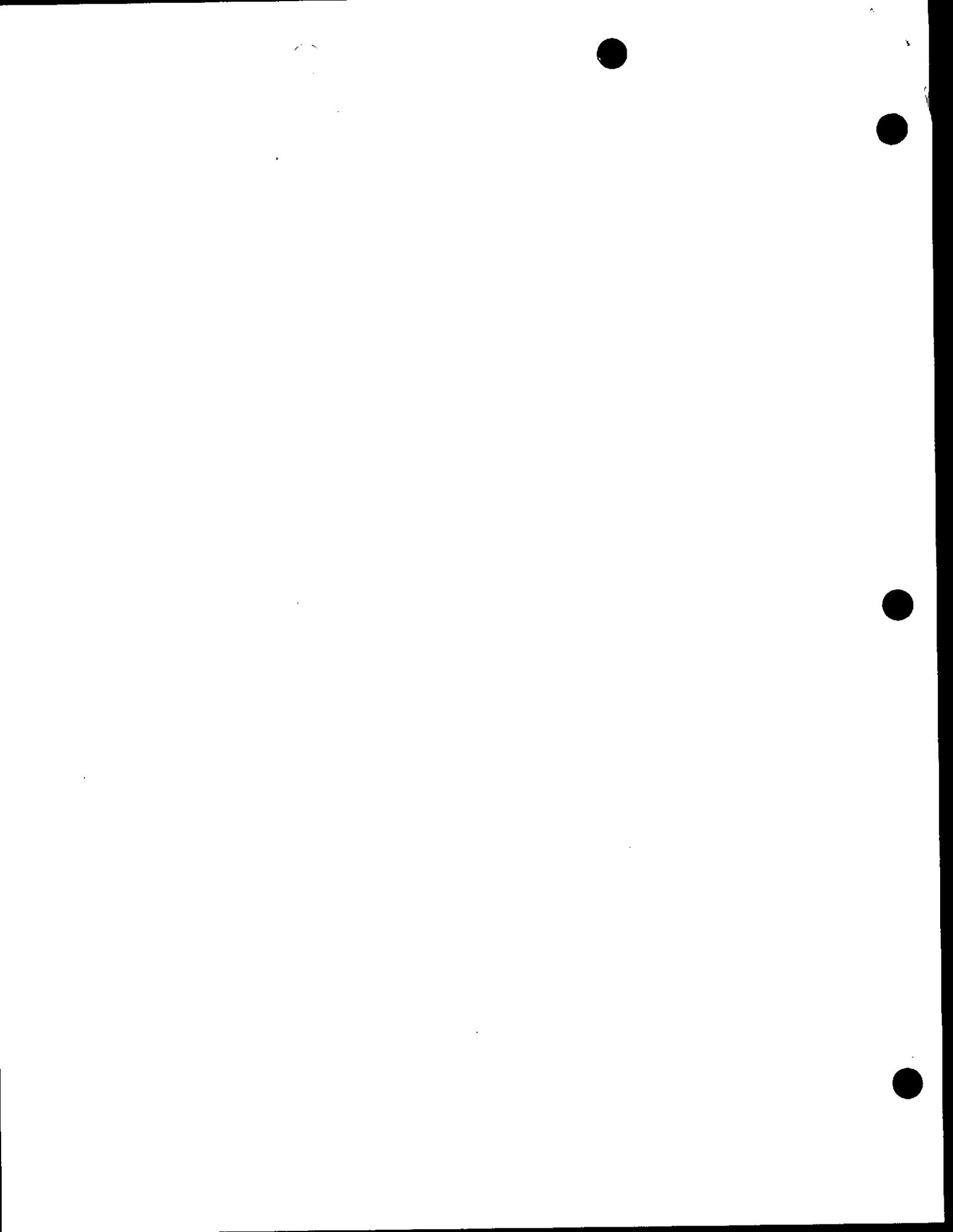
401 East Fifth Street
Dayton, Ohio 45402-2911TELE: (937)285-6357 FAX: (937)285-6249
www.epa.state.oh.usTed Strickland, Governor
Lee Fisher, Lieutenant Governor
Chris Korleski, Director

September 17, 2007

Re: ~~LOGAN COUNTY~~
~~ODNR INDIAN LAKE ST PARK~~
~~MOUNDWOOD RESTROOM~~
TRANSIENT Water System
PWS ID# OH4647012ODNR-Indian Lake State Park
12774 State Route 235 North
Lakeview, Ohio 43331**Subject: Notice of Violation of Monthly Maximum Contaminant Level
for Total Coliform Bacteria**Your public water system incurred a **monthly** violation of rule 3745-81-14 of the Ohio Administrative Code (OAC) in September 2007.

A monthly violation of rule 3745-81-14 occurs when more than one or greater than five percent of your samples within the month were total coliform-positive.

| Actions required as a result of the above violation | |
|---|--|
| Step 1 | <p>Within 30 days issue the attached public notice of the violation in accordance with rule 3745-81-32 of the Ohio Administrative Code by the following method(s) to reach all persons served by the public water system:</p> <p>Posting in conspicuous locations (restrooms, drinking fountains, vending areas, restaurants, bulletin boards, etc.)</p> <p>The language in italics on the attached public notice is mandatory and must be included as written.</p> |
| Step 2 | Immediately initiate an investigation to determine and eliminate the cause and extent of bacterial contamination. |
| Step 3 | Fill out the attached verification form and send along with a copy of the public notification issued within 10 days to the Southwest District Office of the Ohio EPA. |
| Step 4 | Because you are required to monitor with at least five (5) samples in the next month following any total coliform-positive result you must take at least five (5) total coliform samples in October 2007. |



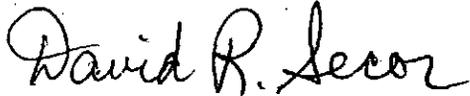
ODNR-Indian Lake State Park

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If you have any questions, please contact me at (937) 285-6114.

Sincerely,

A handwritten signature in cursive script that reads "David R. Secor". The signature is written in black ink and is positioned above the typed name and title.

David R. Secor
Compliance Coordinator
Division of Drinking and Ground Waters

Enclosures

cc: Toni Buchanan, DDAGW, CO
Logan County Health Department

DS/cja



DRINKING WATER NOTICE
Tests showed coliform bacteria in
ODNR INDIAN LAKE STATE PARK
MOUNDWOOD RESTROOM water

We routinely monitor for the presence of drinking water contaminants. We took Five (5) samples for coliform bacteria during September 2007. Five (5) of those samples showed the presence of coliform bacteria. No more than [1 sample per month/5 percent of our samples] may show the presence of coliform bacteria during a month.

What should I do?

- **You do not need to boil your water or take other corrective actions.** However, if you have specific health concerns, consult your doctor. People with severely compromised immune systems, infants, and some elderly people may be at increased risk. These people should seek advice about drinking water from their health care providers.
- Total coliform bacteria are generally not harmful themselves. Usually, coliforms are a sign that there could be a problem with the system's treatment or distribution systems.
- *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*

Fecal coliform or *E. coli*, which are bacteria of greater concern, were not detected in the follow-up testing.

What is being done?

We are still detecting coliform bacteria. We are investigating and taking the necessary steps to correct the problem as soon as possible.

For more information, please contact _____ at _____ or _____.
name of contact phone number mailing address

General guidelines on ways to lessen the risk of infection by microbes are available from the EPA Safe Drinking Water Hotline at 1(800) 426-4791.

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail.

PWS ID# OH4647012 Date distributed: _____



**PUBLIC NOTICE INSTRUCTIONS AND VERIFICATION FORM FOR
NONCOMMUNITY PUBLIC WATER SYSTEMS WITH TIER 2 VIOLATIONS**

The owner or operator of a community public water system with a Tier 2 violation or situation shall notify the persons served by the public water system as soon as practical but **no later than 30 days** after the system learns of the violation. Public notice shall be repeated every 3 months as long as the violation or situation persists.

I HEREBY CERTIFY THAT THE PUBLIC WAS NOTIFIED BY THE FOLLOWING METHOD(S) INDICATED BELOW, AS DESCRIBED IN THE OHIO ADMINISTRATIVE CODE RULE 3745-81-32:

| Required Method of Public Notification | Actual Method of Public Notification |
|--|--|
| <p>Use one or more of the following methods to reach all persons served by the public water system:</p> <p>1. Public notice issued by posting in conspicuous locations throughout the distribution system (required to remain posted for as long as the violation exists, but in no case less than 7 days) Schools should also send a copy of the notice to the parents of all students.</p> <p>2. Public notice issued by mail or other direct delivery to each customer and service connection (where known).</p> | <p>1A. Dates of posting _____</p> <p>1B. Locations of posting _____</p> <p>1C. Date of notice to parents _____</p> <p>2A. Date of mailing/delivery _____</p> |
| <p>If the above methods do not reach all persons served, also use any other method reasonably calculated to reach other persons served by the system (e.g. publication in a local newspaper or newsletter, use of e-mail to notify employees or students, or delivery of multiple copies to central locations)</p> | <p>A. Method(s) _____</p> <p>B. Date(s) _____</p> |

Please check if the public notice used was provided by Ohio EPA (other side of this form) or another acceptable notice was used:

- A public notice as shown on the other side of this sheet was issued without changes.
- A different public notice was issued. **INCLUDE A COPY OF THE PUBLIC NOTICE.**

Signature of Responsible Official Date

Printed Name and Title of Responsible Official

**ODNR INDIAN LAKE ST PK MOUNDWOOD
RESTROOM**

NAME OF PUBLIC WATER SYSTEM

PWSID NUMBER: OH4647012

COUNTY NAME: LOGAN

For OEPA use only

Date PN Received: _____

PN acceptable: PN not acceptable:

VIOLATION TYPE: 22

MONITORING PERIOD September 2007

