



Environmental
Protection Agency

John R. Kasich, Governor
Mary Taylor, Lt. Governor
Scott J. Nally, Director

Re: Richland County
Butler/Mohican KOA
NPDES Permit

June 15, 2011

Mr. Dan Wiencek
351 Whetstone Drive West
Powell, Ohio 43065

Dear Mr. Wiencek:

On June 8, 2011, an inspection was made of the wastewater treatment facilities serving the Butler/Mohican KOA campground located at 6918 Bunkerhill Road South, Butler, Richland County. Mr. Jim Machin, your certified operator, was present during the inspection to answer any questions. The treatment plant appeared to be functioning correctly at the time of the inspection. A slightly turbid effluent was being discharged to the pond.

During the inspection we discussed the need to keep a log book of the operations of the treatment plant. This log is required as part of your NPDES permit. The log should contain the name or initials of the person making an entry, time in and time out for the visits by the certified operator, as well as the results of any samples taken (i.e. daily checks of odor, color, turbidity, and flow rate). A minimum of three months of data should be available at the treatment plant for review

A review of the discharge monitoring reports submitted to our office for the months of July 2010, through April 2011, revealed four **violations** of the limits contained in your NPDES permit. All of the **violations** were for exceeding the fecal coliform limits in the September and October 2010 sample.

Please be aware that your National Pollutant Discharge Elimination System (NPDES) permit contains a compliance schedule to construct upgrades at the treatment plant. The next milestone in the schedule is to begin construction of the approved upgrades no later than January 1, 2012. Our office has received a request from you to extend the deadline to begin construction. It would be acceptable to Ohio EPA to extend the date to begin construction to no later than August 11, 2012. This is the date that your approved Permit to Install for the upgrades expires.

Mr. Dan Wiencek
June 15, 2011
Page 2

If you have any questions, please contact me at 419-373-3070.

Sincerely,



Walter Ariss
Environmental Specialist II
Division of Surface Water

/llr

Enclosure

pc: (DSW-NWDO w/enclosure...)
Jim Machin

OHIO ENVIRONMENTAL PROTECTION AGENCY

OPERATION AND MAINTENANCE INSPECTION
 WWTP'S LESS THAN 25,000 GPD

NPDES Permit No. 2PR200266

Facility Name Butler Mohican KOA Expiration Date 6/30/2014

Facility Address 6918 Bunkerhill Road Date 6/8/11 Time 11:00 am

City Butler County Richland Township _____

Name and Address of Owner Dan Wlenczek

Person Contacted Jim Machin Owner Phone _____

Flow: Design 7500 GPD Present 450-9000 GPD (metered - estimated)

Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 85° sun

OEPA Personnel Walter Ariss District NWDO

1. Plant Effluent - Mark Severity No.

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None		Clear		None		Colorless
1	Mild			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
2	Moderate	<input checked="" type="checkbox"/>	Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

2. Effect of effluent on Receiving Stream Name: Pond

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None		Clear		None	<input checked="" type="checkbox"/>	Colorless
1	Mild			<input checked="" type="checkbox"/>			
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme	<input checked="" type="checkbox"/>	Heavy Solids		Septic		Black

3. a. Plant has _____ excellent good _____ fair _____ poor operation
 b. Plant has _____ excellent good _____ fair _____ poor maintenance
 c. Sand filters have _____ excellent _____ good _____ fair _____ poor maintenance
no filters
 d. Not operating at expected efficiency due to:

- (1) _____ hydraulic overload
 (2) _____ organic/ solids overload
 (3) _____ personnel inefficiency
 (4) _____ equipment failure
 (5) _____ wastes
 (6) _____

Disinfection: (Required May 1 thru Oct.31.)

<input checked="" type="checkbox"/>	IN	<input checked="" type="checkbox"/>	OUT
_____	Chlorination Tablets	_____	Dechlorination Tablets
_____	U.V.	_____	<u>none</u>

Yes No

4. Compliance with NPDES Permit

Periodic Violations N Parameters: Fecal coliform
 Chronic Violations _____

5. Adequate plant safety

6. Operation and Maintenance Service Name Jim Machin

Frequency of Visits 1/week

Facility Name: Butter Mountain KOA

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	2	Trash Trap	Pumping Frequency: <i>not pumped yet this year</i>
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
		Flow Equalization	
Aeration Equipment		Plant Timer <u>2Y</u> <u>—</u> N	Cycle Time:
	2	Motor/ Blower Unit <i>running</i>	
Secondary Treatment	2	Aeration Tank	Color: <i>good color</i> Adequate Aeration: Y <u>2</u> N <u>—</u>
Final Settling	2	Clarifier	<i>slightly turbid</i>
	2	Sludge Return	In <u>2</u> Out <u>—</u>
	2	Surface Skimmer	In <u>2</u> Out <u>—</u>
		Fixed Media Clarifier	
Tertiary Treatment		Surface Sand Filter	
		Polishing Pond	
		Other	
Disinfection		Chlorine Tube Feeder	
		Dechlorination Tube Feeder	
		Ultraviolet (UV)	
Flow Metering		Elapsed Pump Time	
		Recorder (continuous total)	
Pumps		Raw Wastewater (type)	
		Sand Filter Effluent Dosing	
Sludge Handling		Aerated Storage Tank	
		Sludge Drying Bed	
Sludge Disposal		Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment		Post Aeration	
		Spray Irrigation	
		Other	