



State of Ohio Environmental Protection Agency

Northwest District Office

347 North Dunbridge Road
Bowling Green, OH 43402-9398

TELE: (419) 352-8461 FAX: (419) 352-8468
www.epa.state.oh.us

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

Re: Richland County
Econolodge
NPDES Permit

November 5, 2007

Raman Patel, Owner
Econolodge
1017 Koogle Road
Mansfield, Ohio 44903

Dear Mr. Patel,

On October 11, 2007, an inspection was made of the wastewater treatment facilities serving the Econolodge Hotel, J Appleseeds Restaurant, and the Rainbow Spa located at 1017 Koogle Road, Richland County. At the time of the inspection all major treatment units appeared to be in working order.

It was observed that the area around the aeration and flow EQ tanks needs maintained. The grass needs to be cut back for ease of maintenance and safety of the operator. It was also observed that no chlorine or dechlorination tablets were present in the tablet feeders. Disinfection of the effluent is required from May 1 through October 31. Only tablets approved specifically for use on wastewater treatment plants should be used for disinfection. The use of swimming pool chlorine tablets to achieve disinfection is not approved.

A review of your monthly operating reports for the period of March through September 2007 has revealed three **violations** of the chlorine residual limitation in your NPDES permit. This is most likely caused by insufficient dechlorination. The amount of tablets in the dechlorination chamber needs to be observed more frequently. As stated above no dechlorination tablets were observed during the inspection.

The review of the reports also revealed that the reporting for flow rate is typically the same value for everyday of the month. More accurate reporting of the flow rate needs to occur. The dosing pumps to the sand filters have hour run meters on the control box. The meters should be read every week by the operator and the weekly average should be reported instead of a monthly average.

If you have any questions please give me a call at 419-373-3070.

Sincerely,

Walter Ariss
Environmental Specialist II
Division of Surface Water

/lb

Enclosed

pc: ~~NWDO:DSW:File~~
Lonnie McGhee, McGhee's Technical Water Service Inc. w/enclosure

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2PR00136

Facility Name Econo Lodge Expiration Date 7/31/2010
 Facility Address 1017 Kangle Rd Date 10/11/07 Time 11:15 am
 City Manfield County Richland Township _____
 Name and Address of Owner Roman Hotel

Person Contacted _____ Owner Phone _____

Flow: Design 15,000 GPD Present 26,000 GPD (metered - estimated)

Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 65° rain

OEPA Personnel Walter Ariss District NWDO

1. Plant Effluent - Mark Severity No.

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

2. Effect of effluent on Receiving Stream Name: Unnamed tri's Charles Hill Lake

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

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.)	
IN	OUT
<u>_____</u>	<u><input checked="" type="checkbox"/></u>
<u>_____</u>	<u><input checked="" type="checkbox"/></u>
<u>_____</u>	<u>_____</u>

Chlorination Tablets
 Dechlorination Tablets
 U.V.

Yes No

4. _____ Compliance with NPDES Permit
 Periodic Violations _____ _____ Parameters: residual chlorine
 Chronic Violations _____ _____ _____

5. _____ Adequate plant safety

6. _____ Operation and Maintenance Service Name McGhee's TWSI

Frequency of Visits 1/week

Facility Name: Economolodge

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	<input checked="" type="checkbox"/>	Trash Trap	Pumping Frequency: ?
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	<input checked="" type="checkbox"/>	Flow Equalization	okay
Aeration Equipment	<input checked="" type="checkbox"/>	Plant Timer <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Cycle Time: okay
		Motor/ Blower Unit <i>running</i>	
Secondary Treatment	<input checked="" type="checkbox"/>	Aeration Tank	Color: <i>good color</i> Adequate Aeration: Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Final Settling	<input checked="" type="checkbox"/>	Clarifier	<i>inlet baffle to clarifier tank has deteriorated, new baffle needs installed</i>
	<input checked="" type="checkbox"/>	Sludge Return	In <input checked="" type="checkbox"/> Out <input type="checkbox"/>
	<input checked="" type="checkbox"/>	Surface Skimmer	In <input type="checkbox"/> Out <input checked="" type="checkbox"/>
		Fixed Media Clarifier	
Tertiary Treatment	<input checked="" type="checkbox"/>	Surface Sand Filter	<i>western filter needs weeded</i>
		Polishing Pond	
		Other	
Disinfection	<input checked="" type="checkbox"/>	Chlorine Tube Feeder	<i>no tablets</i>
	<input checked="" type="checkbox"/>	Dechlorination Tube Feeder	<i>no tablets</i>
		Ultraviolet (UV)	
Flow Metering	<input checked="" type="checkbox"/>	Elapsed Pump Time	<i>on filter dosing pumps</i>
		Recorder (continuous total)	
Pumps	<input checked="" type="checkbox"/>	Raw Wastewater (type) <i>Flow EQ</i>	okay
	<input checked="" type="checkbox"/>	Sand Filter Effluent Dosing	okay
Sludge Handling	<input checked="" type="checkbox"/>	Aerated Storage Tank	<i>air off to tank</i>
		Sludge Drying Bed	
Sludge Disposal	<input checked="" type="checkbox"/>	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment		Post Aeration	
		Spray Irrigation	
		Other	