



Environmental
Protection Agency

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

Re: Ashland County
Coburn Inc.
NPDES Permit

October 11, 2011

Mr. Chuck Zimmerman, President
Coburn Incorporated
P. O. Box 147
636 County Road 30-A
Hayesville, Ohio 44838

Dear Mr. Zimmerman:

On August 19, 2011, an inspection was made of the wastewater treatment facilities serving Coburn Incorporated located at 636 C.R. 30-A, Vermillion Township, Ashland County. At the time of the inspection all major treatment units were in operation and appeared to be functioning normally.

The operators' log at the wastewater plant was reviewed. The log sheet should be edited to include a column for the operator's initials, time in, time out, and a column for comments. This was mentioned in our previous inspection letter. These items are required under OAC 3745-7-09. It was also noted that the yearly calendar was not being filled in by the operator. You are required to have at least the previous three months worth of records available onsite for review. If the operator chooses to use the yearly calendar for this purpose, they both need to be completed. No entries had been made on the calendar since August 1.

A review of the discharge monitoring reports submitted to our office for the months of February through August 2011, revealed seven **violations** of the limits contained in your NPDES permit. The violations were for exceeding the total suspended solids limit and ammonia limit in the March, April and June samples.

The facility is considered to be in significant noncompliance. Please inform our office in writing of the steps that have been taken or will be taken to eliminate these violations. This letter should be submitted by November 1, 2011.

Mr. Chuck Zimmerman, President
October 11, 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

Enclosure

pc: ~~DSW-NWDO File w/enclosure~~
Kevin Dean, Dean's Backflow Service w/enclosure

OHIO ENVIRONMENTAL PROTECTION AGENCY
 OPERATION AND MAINTENANCE INSPECTION
 WWTP'S LESS THAN 25,000 GPD

NPDES Permit No. 2PRO0140

Facility Name Coburn Inc Expiration Date 5/31/2016
 Facility Address 636 C.R. 30A Date 8/19/11 Time 1:00 am
 City Hayesville County Ashtabula Township _____
 Name and Address of Owner _____

Person Contacted _____ Owner Phone _____

Flow: Design 4500 GPD Present 400-6000 GPD (metered - ~~estimated~~)

Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 70° sun

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: not observed

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None		Clear		None		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
<input checked="" type="checkbox"/>	_____ Chlorination Tablets
<input checked="" type="checkbox"/>	_____ Dechlorination Tablets
_____	_____ U.V.

Yes No

4. Compliance with NPDES Permit
 Periodic Violations Y _____ N _____ Parameters: TSS, NH3
 Chronic Violations _____

5. Adequate plant safety
 6. Operation and Maintenance Service Name Dean's Backflow
 Frequency of Visits 2/week

Facility Name: Coburn Inc

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	<input checked="" type="checkbox"/>	Trash Trap	Pumping Frequency: <u>1/3 months</u>
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
		Flow Equalization	
Aeration Equipment	<input checked="" type="checkbox"/>	Plant Timer <u>Y</u> <u>N</u>	Cycle Time:
		Motor/ Blower Unit <u>running</u>	
Secondary Treatment	<input checked="" type="checkbox"/>	Aeration Tank	Color: <u>color okay</u> Adequate Aeration: <u>Y</u> <u>N</u>
Final Settling	<input checked="" type="checkbox"/>	Clarifier	<u>good clarity</u>
	<input checked="" type="checkbox"/>	Sludge Return	In <u>X</u> Out <u> </u>
	<input checked="" type="checkbox"/>	Surface Skimmer	In <u>X</u> Out <u> </u>
		Fixed Media Clarifier	
Tertiary Treatment	<input checked="" type="checkbox"/>	Surface Sand Filter	<u>south bed in use - some sludge, time to switch beds</u>
		Polishing Pond	
		Other	
Disinfection	<input checked="" type="checkbox"/>	Chlorine Tube Feeder	<u>in</u>
	<input checked="" type="checkbox"/>	Dechlorination Tube Feeder	<u>in</u>
		Ultraviolet (UV)	
Flow Metering		Elapsed Pump Time	
	<input checked="" type="checkbox"/>	Recorder (continuous total)	<u>on water well</u>
Pumps		Raw Wastewater (type)	
	<input checked="" type="checkbox"/>	Sand Filter Effluent Dosing	<u>okay</u>
Sludge Handling		Aerated Storage Tank	
		Sludge Drying Bed	
Sludge Disposal	<input checked="" type="checkbox"/>	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	<input checked="" type="checkbox"/>	Post Aeration	<u>on</u>
		Spray Irrigation	
		Other	