



Environmental  
Protection Agency

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

Re: Marion County  
Whetstone Golf Club  
NPDES Permit

October 7, 2011

Certified Mail 7009 1410 0001 1834 0685

Mr. Richard Smith, Owner  
Mr. Clarence Perry, Owner  
Whetstone Golf Club  
5211 Marion-Mt. Gilead Road  
Caledonia, Ohio 43314

Dear Mr. Smith and Mr. Perry:

On September 15, 2011, a follow-up inspection was made of the wastewater treatment facilities serving Whetstone Golf Club. The facility is located at 5211 Marion-Mt. Gilead Road, Claridon Township, Marion County. This inspection was conducted as part of your National Pollutant Discharge Elimination System (NPDES) permit No. 2PR00260.

Our last inspection was conducted on June 21, 2011, and a certified letter dated June 29, 2011, was sent to your attention. On September 22, 2011, our office received a response letter from your engineer dated September 20, 2011. This response letter was subsequently revised on September 26, 2011. The letter states that you plan to install a new on-site septic system and abandon the existing treatment system. A proposed project schedule was included with a date of submitting the Permit-to-Install to our office by February 20, 2012. Construction of the new on-site system should be completed by October 1, 2012.

At the time of this inspection, the wastewater treatment plant (WWTP) was still not in operation. The contents in the aeration tank were black and septic. The conditions of the grounds at the WWTP were unsatisfactory. All wastewater must be hauled to a local POTW and all discharges ceased immediately per the revised response letter. Receipts documenting the amount of sewage hauled must be submitted to our office each month. In addition, you must still submit discharge monitoring reports each month indicating that no discharge occurred if that is truly the case.

Please be advised that failure to comply with your NPDES permit or make satisfactory progress towards compliance will result in enforcement action pursuant to Ohio Revised Code, Chapter 6111. Our completed inspection report is also included for your records. Should you have any questions, please contact Mr. Jason Ko at (419) 373-3021.

Yours truly,

Elizabeth A. Wick, P.E.  
District Engineer/ Section Manager  
Division of Surface Water

JCK/cs

Enclosures

pc: Marion County Health Department  
↳ DSW NWDO File ↳

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Richard Smith  
 Whetstone Golf Club  
 5111 Merion - Mt. Gilead  
 Caledonia, Ohio 43314

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
 10-8

D. Is delivery address different from item 1?  Yes  
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3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. 7009 1410 0001 1834 0685

*Ann Johnson/CA*

PS Form 3811, February 2004

Domestic Return Receipt

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*Mr. Richard Smith*

Postage	\$ .74
Postage Fee	3.85
Return Receipt Fee (Endorsement not required)	
Restricted Delivery Endorsement Fee (Endorsement Required)	1.00
Total Postage & Fees	\$ 5.59

Postmark Here

Whetstone Golf Club  
 5111 Merion - Mt. Gilead  
 Caledonia, Ohio 43314

PS Form 3800, August 2006

See Reverse for Instructions

5990 0685 1834 0001 1410 7009



Facility Name: Whestone Golf Course

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	1	Trash Trap	Pumping Frequency:
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
		Flow Equalization	
Aeration Equipment	1	Plant Timer ___Y___ N Motor/ Blower Unit	Cycle Time: Not in operation
Secondary Treatment	1	Aeration Tank	Color : Black & Septic Adequate Aeration: Y ___ N ___ X ___
Final Settling	1	Clarifier	
	1	Sludge Return	In ___ Out ___ X
	1	Surface Skimmer	In ___ Out ___ X
		Fixed Media Clarifier	
Tertiary Treatment		Surface Sand Filter	
		Polishing Pond	
		Other	
Disinfection	OUT	Chlorine Tube Feeder	
	OUT	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	