



State of Ohio Environmental Protection Agency

STREET ADDRESS:

Lazarus Government Center
50 W Town Street, Suite 700
Columbus, OH 43215

TELE: (614) 644-31

OH3935212 LYME ELEMENTARY SCHOOL 2950 02 06/07/07



March 30, 2007

CERTIFIED MAIL

7001 1940 0000 6930 2897

Re: Huron County
Lyme Elementary School
Nontransient Noncommunity Water System
PWS ID: OH3935212

BELLEVUE CITY SCHOOLS
125 NORTH ST
PO BOX 8003
BELLEVUE, OH 44811

RE: TOTAL TRIHALOMETHANES (TTHM) MAXIMUM CONTAMINANT LEVEL EXCEEDANCE

Dear Public Water System Owner:

This letter is notification that your public water system is in violation of rule 3745-81-12 of the Ohio Administrative Code (OAC). Lyme Elementary School has exceeded the maximum contaminant level (MCL) for TTHM within the October 1 through December 31, 2006 time period.

Paragraph B of rule 3745-81-12 establishes an MCL of 0.080 milligrams per liter (mg/L) for TTHM. Compliance with the MCL is based on the running annual average of four consecutive quarters of samples. The current running annual average for TTHM is 0.088 mg/L.

As a result of this violation, rule 3745-81-32 of the OAC requires that a public notice be issued by your facility informing your consumers of the violation. Included with this violation is a public notice containing the mandatory health effects language that must appear in the notice. If you wish to make additional statements in the notice, this office must be contacted first. The public notice must be issued within 30 days as specified in the enclosed "Public Notice Instructions and Verification Form for Community Public Water Systems with Tier 2 Violations". Please complete and return this form along with a copy of the public notice, once it is issued.

Lyme Elementary School public water system is required to continue monitoring according to your most recent Chemical Monitoring Distribution Schedule. For questions concerning the public notice requirement, please contact me at (614) 644-2752.

Sincerely,

Kenneth Baughman
Compliance Assurance Section
Division of Drinking and Ground Waters

Enclosures: Public Notice and Verification Form for Tier 2 Violations

cc: Superintendent/Manager; NWDO, DDAGW; DDAGW; Huron County Health Department

DRINKING WATER NOTICE

Lyme Elementary School Has Levels of total trihalomethanes Above Drinking Water Standards

Our water system recently violated the maximum contaminant level (MCL) for total trihalomethanes (TTHM). The sample(s) collected on December 7, 2006 show TTHM at 0.074 mg/L. The average level of TTHM over the last year was 0.088 mg/L. The standard for TTHM is 0.080 mg/L.

What Should I Do?

You do not need to use an alternative (e.g., bottled) water supply. However, if you have specific health concerns, consult your doctor.

What Does This Mean?

The levels detected do not pose an immediate risk to your health. However, some people who drink water containing trihalomethanes in excess of the MCL over many years may experience problems with their liver, kidneys, or central nervous system, and may have an increased risk of getting cancer.

What Is Being Done?

We are investigating and taking the necessary steps to correct the problem as soon as possible.

Additional information may be obtained by contacting Lyme Elementary School at:

Contact Person: _____

Phone Number: _____

Mailing Address: _____

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.

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.

BELLEVUE CITY SCHOOLS
 125 NORTH ST
 PO BOX 8003
 BELLEVUE OH 44811

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Evelyn Woodruff* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

...ent from item 1? Yes
 ...dress below: No

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

2. A

7001 1940 0000 6930 2897

0511215

UNITED STATES POSTAL SERVICE

MANSFIELD OH 449



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

01 APR 2007 PM 2 T

• Sender: Please print your name, address, and ZIP+4 in this box •

OHIO EPA - DDAGW

APR - 4 AM 9:53

OHIO EPA - DDAGW
P.O. BOX 1049
COLUMBUS, OH 43216-1049



048