



**Environmental
Protection Agency**

Ted Strickland, Governor
Lee Fisher, Lt. Governor
Chris Korleski, Director



1PV0011220100908

CLARK

BRIDGEWOOD MHP

LEIBFRITZ, SANDRA | 2010/09/08

**Environmental
Protection Agency**

Ted Strickland, Governor
Lee Fisher, Lt. Governor
Chris Korleski, Director

September 8, 2010

Ross Chaney
2480 Newlove Road
South Charleston, OH 45368

CERTIFIED LETTER

**Re: Bridgewood MHP WWTP, Clark County
Self-Monitoring Report NOV – February through July 2010
NPDES Permit No. 1PV00112/OH0131792**

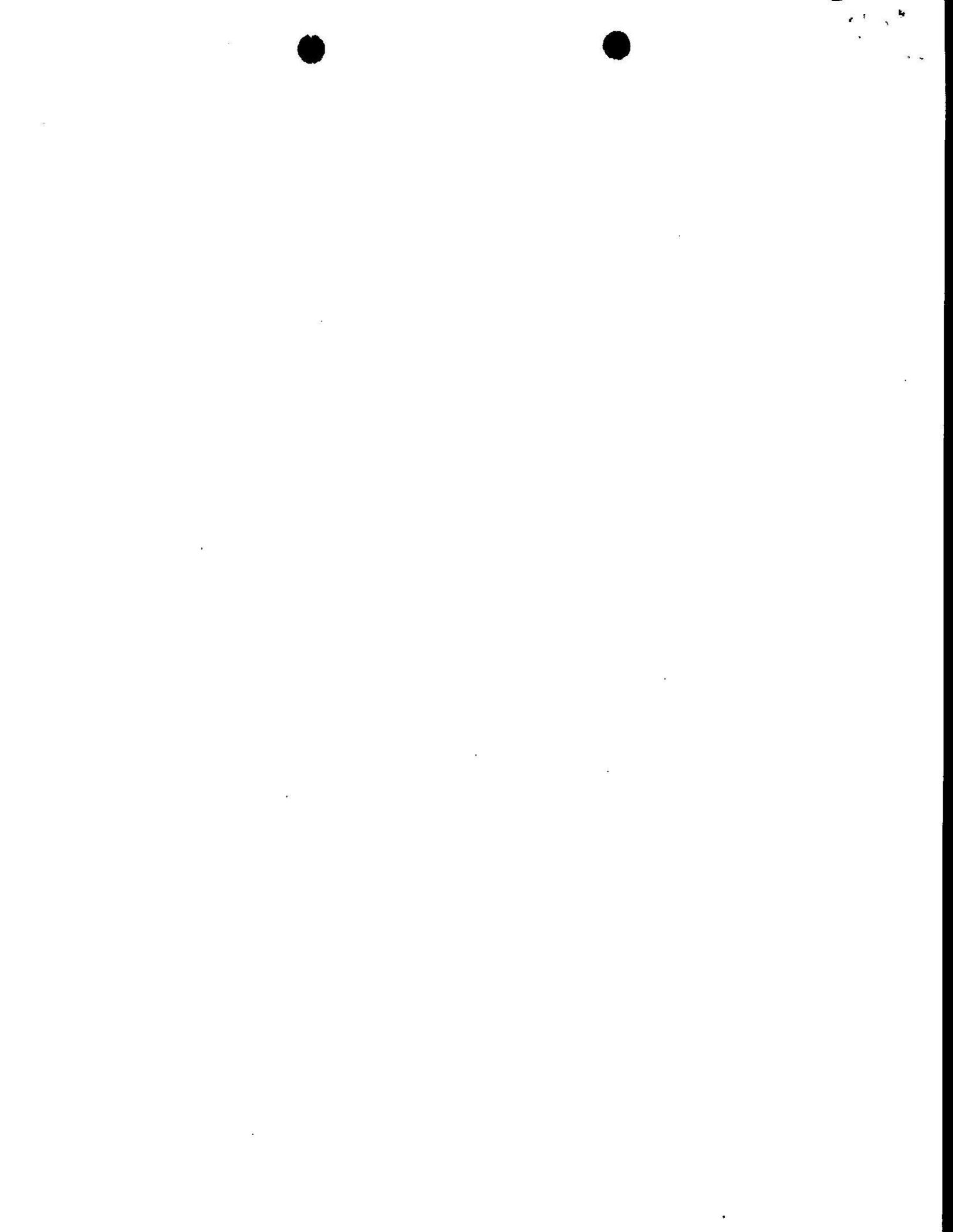
Dear Mr. Chaney:

We have received your self-monitoring reports covering the months of February through July 2010 for the above-referenced facility. Our review indicates violations of the conditions of your NPDES permit. The specific instances of noncompliance and deficiencies were as follows:

Final Effluent Limitation Violations for Outfall 1PV00112001					
Reporting Period	Parameter	Limit Type	Limit	Reported Value	Violation Date
February 2010	Total Suspended Solids	30D Conc	12.0	59.	2/1/2010
February 2010	Nitrogen, Ammonia (NH3)	30D Conc	3.0	34.	2/1/2010
February 2010	CBOD 5 day	30D Conc	10.0	85.	2/1/2010
February 2010	Total Suspended Solids	1D Conc	18.0	59.	2/28/2010
February 2010	Nitrogen, Ammonia (NH3)	1D Conc	4.5	34.	2/28/2010
February 2010	CBOD 5 day	1D Conc	15.0	85.	2/28/2010

Part III, Item 12 (Noncompliance Notification). The permittee has failed to report noncompliance of the above-reference final effluent limitations in violation of Part III, Item 12. Immediately provide noncompliance notification for the above-reference violations.

Please be advised that failure to comply with the effluent limitations or to satisfy the monitoring or reporting requirements of your NPDES permit may be cause for enforcement action pursuant to the Ohio Revised Code Chapter 6111.

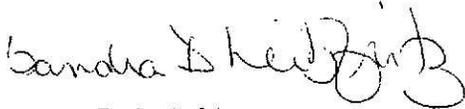


Mr. Chaney
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Please inform this office, in writing, within ten days of receipt of this notification as to the reason for violations, as well as a description of the actions taken or proposed to prevent any further violations. Your response should include the dates, either actual or proposed, for completion of the actions.

If you have any questions regarding the above, please contact me at (937) 285-6104.

Respectfully,

A handwritten signature in cursive script that reads "Sandra D. Leibfritz".

Sandra D. Leibfritz
Division of Surface Water

cc: Clark County Health Department
bsweeney4@woh.rr.com



Handwritten marks and scribbles in the top right corner.

Small handwritten marks or characters on the right edge of the page.

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ROSS CHANEY
 2480 NEWLOVE ROAD
 SOUTH CHARLESTON OH 45368

2. Article Number

(Refer to service label)

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 Agent Addressee

Delivered by (Printed Name)

Sherry L. Chaney

C. Date of Delivery

Sept 10, 10

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 If YES, enter delivery address below: No

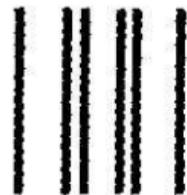
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