



**Environmental
Protection Agency**

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



1PV0012620090126

CLARK TECUMSEH COURT MHP

..... LEIBFRITZ, SANDRA | 2009/01/26



State of Ohio Environmental Protection Agency

Southwest District Office

401 East Fifth Street
Dayton, Ohio 45402-2911

TELE: (937) 285-6357 FAX: (937) 285-6249
www.epa.state.oh.us

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

January 26, 2009

Anthony Zimmerman
9420 Bellfontaine Road
New Carlisle, OH 45344

CERTIFIED LETTER

**Re: Tecumseh Court MHP, Clark County
Self-Monitoring Report NOV – November 2008 and December 2008
NPDES Permit No. 1PV00126*AD/OH0137308**

Dear Mr. Zimmerman:

We have received your self-monitoring reports covering the months of November 2008 and December 2008 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 001

Reporting Period	Parameter	Limit Type	Limit	Reported Value	Violation Date
November 2008	Total Suspended Solids	30D Conc	12.0	50.	11/1/2008
November 2008	Total Suspended Solids	7D Conc	18.0	50.	11/1/2008
November 2008	Nitrogen, Ammonia (NH3)	30D Conc	3.0	50.	11/1/2008
November 2008	Nitrogen, Ammonia (NH3)	7D Conc	4.5	50.	11/1/2008
November 2008	CBOD 5 day	30D Conc	10.0	35.4	11/1/2008
November 2008	CBOD 5 day	7D Conc	15.0	35.4	11/1/2008
November 2008	Dissolved Oxygen	1D Conc	6.0	4.7	11/3/2008
November 2008	Dissolved Oxygen	1D Conc	6.0	4.6	11/10/2008
November 2008	Dissolved Oxygen	1D Conc	6.0	3.9	11/17/2008
November 2008	Dissolved Oxygen	1D Conc	6.0	5.4	11/25/2008
December 2008	Total Suspended Solids	30D Conc	12.0	50.	12/1/2008
December 2008	Total Suspended Solids	7D Conc	18.0	50.	12/1/2008
December 2008	Nitrogen, Ammonia (NH3)	30D Conc	3.0	45.	12/1/2008
December 2008	Nitrogen, Ammonia (NH3)	7D Conc	4.5	45.	12/1/2008
December 2008	CBOD 5 day	30D Conc	10.0	83.	12/1/2008
December 2008	CBOD 5 day	7D Conc	15.0	83.	12/1/2008
December 2008	Dissolved Oxygen	1D Conc	6.0	4.7	12/1/2008

Frequency Violations for Outfall 001

Reporting Period	Parameter	Sample Frequency	Expected	Reported	Violation Date
November 2008	Flow Rate	1/Day	1	0	11/03/2008
November 2008	Flow Rate	1/Day	1	0	11/04/2008
November 2008	Flow Rate	1/Day	1	0	11/05/2008
November 2008	Flow Rate	1/Day	1	0	11/06/2008



Frequency Violations for Outfall 001

Reporting Period	Parameter	Sample Frequency	Expected	Reported	Violation Date
November 2008	Flow Rate	1/Day	1	0	11/07/2008
November 2008	Flow Rate	1/Day	1	0	11/10/2008
November 2008	Flow Rate	1/Day	1	0	11/11/2008
November 2008	Flow Rate	1/Day	1	0	11/12/2008
November 2008	Flow Rate	1/Day	1	0	11/13/2008
November 2008	Flow Rate	1/Day	1	0	11/14/2008
November 2008	Flow Rate	1/Day	1	0	11/17/2008
November 2008	Flow Rate	1/Day	1	0	11/18/2008
November 2008	Flow Rate	1/Day	1	0	11/19/2008
November 2008	Flow Rate	1/Day	1	0	11/20/2008
November 2008	Flow Rate	1/Day	1	0	11/21/2008
November 2008	Flow Rate	1/Day	1	0	11/24/2008
November 2008	Flow Rate	1/Day	1	0	11/25/2008
November 2008	Flow Rate	1/Day	1	0	11/26/2008
November 2008	Flow Rate	1/Day	1	0	11/28/2008
December 2008	Chlorine, Total Residu	1/2Weeks	1	0	12/15/2008
December 2008	pH	1/Week	1	0	12/08/2008
December 2008	pH	1/Week	1	0	12/15/2008
December 2008	pH	1/Week	1	0	12/22/2008
December 2008	Flow Rate	1/Day	1	0	12/01/2008
December 2008	Flow Rate	1/Day	1	0	12/02/2008
December 2008	Flow Rate	1/Day	1	0	12/03/2008
December 2008	Flow Rate	1/Day	1	0	12/04/2008
December 2008	Flow Rate	1/Day	1	0	12/05/2008
December 2008	Flow Rate	1/Day	1	0	12/08/2008
December 2008	Flow Rate	1/Day	1	0	12/09/2008
December 2008	Flow Rate	1/Day	1	0	12/10/2008
December 2008	Flow Rate	1/Day	1	0	12/11/2008
December 2008	Flow Rate	1/Day	1	0	12/12/2008
December 2008	Flow Rate	1/Day	1	0	12/15/2008
December 2008	Flow Rate	1/Day	1	0	12/16/2008
December 2008	Flow Rate	1/Day	1	0	12/17/2008
December 2008	Flow Rate	1/Day	1	0	12/18/2008
December 2008	Flow Rate	1/Day	1	0	12/19/2008
December 2008	Flow Rate	1/Day	1	0	12/22/2008
December 2008	Flow Rate	1/Day	1	0	12/23/2008
December 2008	Flow Rate	1/Day	1	0	12/24/2008
December 2008	Flow Rate	1/Day	1	0	12/26/2008
December 2008	Flow Rate	1/Day	1	0	12/29/2008
December 2008	Flow Rate	1/Day	1	0	12/30/2008
December 2008	Flow Rate	1/Day	1	0	12/31/2008
December 2008	Dissolved Oxygen	1/Week	1	0	12/08/2008
December 2008	Dissolved Oxygen	1/Week	1	0	12/15/2008
December 2008	Dissolved Oxygen	1/Week	1	0	12/22/2008

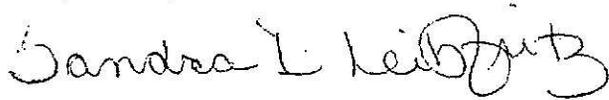
Mr. Zimmerman
Page 3

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

Please inform this office, in writing, within ten days of receipt of this notification as to the reason for the final effluent 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". The signature is written in black ink and is positioned above the typed name.

Sandra D. Leibfritz
Division of Surface Water

cc: Clark County Health Department
Winelco

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:

ANTHONY ZIMMERMAN
9420 BELLFONTAINE ROAD
NEW CARLISLE OH 45344_X

2. Article Number
(Transfer from service label)

7007 0220 0001 2491 9428

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Nicole Smoother* Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

e

Mail

 Express Mail

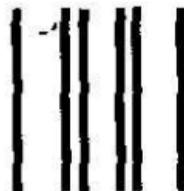
ed

 Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

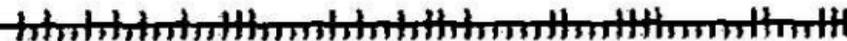
UNITED STATES POSTAL SERVICE



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

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

**OEPA SWDO
SANDY LEIBFRITZ DSW
401 EAST FIFTH STREET
DAYTON OH 45402 2911**



7007 0220 0001 2491 9428

Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance; Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To **Anthony Zimmerman** **MAB**
 Street, Apt. No.,
 or PO Box No. **9420 Bellfontaine Rd.**
 City, State, ZIP+4 **New Carlisle OH 45344**

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may **ONLY** be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047