



State of Ohio Environmental Protection Agency

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Columbus, Ohio 43215

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P.O. Box 1049  
Columbus, OH 43216-1049



\*1PT0011420080814\*

MIAMI

BETHEL LOCAL SCH DIST WWTP

MILLER, JOSEPH

2008/08/14

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

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State of Ohio Environmental Protection Agency

**Southwest District Office**

401 E. Fifth St.  
Dayton, Ohio 45402

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

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

August 14, 2008

Bethel Local Schools  
7490 State Route 201  
Tipp City, OH 45371  
Bob Hoover, Superintendent

**RE: Compliance Evaluation Investigation (CEI)  
NOTICE OF VIOLATION  
Bethel Local Schools Wastewater Treatment Plant  
NPDES Permit 1PT00114\*BD/OH0133876  
Bethel Township, Miami County**

Dear Mr. Hoover,

On August 13, 2008, Jessica Burt and I conducted a Compliance Evaluation Investigation at the Bethel Local Schools wastewater treatment works. This inspection was conducted to determine compliance with the NPDES discharge permit.

Overall, the wastewater facility was rated as "Marginal". Operation and Maintenance of this facility needs to be improved. A detailed inspection report is attached.

I have reviewed the discharge monitoring reports for the period of January 2006 to May 2008 for the above referenced facility. A number of effluent limitation violations were noted during this time period (attached). This wastewater treatment facility was installed in 2005 and includes all of the components necessary to consistently comply with the effluent limitation in the NPDES permit.

Improved maintenance and operation is necessary to bring this facility into compliance with the NPDES permit. At the time of inspection, the blowers for the aeration plant were not operable and both the upflow filters and the slow surface sand filters needed cleaned. Sludge was surfacing in the clarifier, another indication of poor operation. The area of the wastewater treatment plant was overgrown with weeds.

At the time of inspection, we discussed the requirements for a certified wastewater operator at this facility and the responsibilities of this operator. When you have contracted with a wastewater operator, an Operator of Record form will need to be submitted to the Ohio EPA (enclosed).

#### ITEMS REQUIRING A RESPONSE

- 1) Wastewater Operation – A new wastewater facility should not have the compliance issues noted above. Wastewater operation needs to be improved. At the time of inspection, Brenda and Joe Sweeney of Unified Laboratories were present. I understand they have been hired to bridge the gap until the school can accept bids for the wastewater operator contract. Unified Laboratories should complete the Operator of Record (ORC) form and submit it to Ohio EPA. In the future, if there is a change in operator, a new ORC form will need to be submitted.
- 2) Operation Log Book - A log book needs to be maintained on-site by the wastewater operator. Entries in the log book need to be completed by the wastewater operator noting time of visit, work performed, observations, and other pertinent information. Entries should include the operator's initials as well.
- 3) Wastewater Maintenance - The school maintenance staff assigned to the wastewater plant need to keep the plant in good operating condition. Daily checks of the effluent noting color, odor, and turbidity need to be done. The sand filters need to be kept clear of vegetation. Daily checks need to be noted in the operation log book.
- 4) Thermometer – A means to monitor effluent temperature needs to be provided.
- 5) WWTP Repairs – Provide the date the aeration blowers were repaired and the filters were cleaned.
- 6) Effluent Limitation Violations – Provide the reasons for the listed violations, as well as a description of the action taken or proposed to prevent further violations. Future violations need to be reported as per your NPDES Permit. See Part III, Item 12 of your NPDES Permit, entitled "Non-Compliance Notification".

A response to the above items is requested by **September 1, 2008**. If you have any questions, I can be reached at (937) 285-6109.

Sincerely,



Joe Miller  
Division of Surface Water  
Compliance and Enforcement

CC: Miami County Health Department  
Unified Laboratories

Permit # : 1PT00114\*BD  
 NPDES # : OH0133876

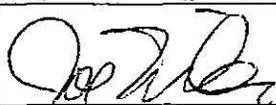
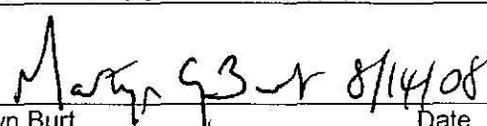


State of Ohio Environmental Protection Agency  
 Southwest District Office

NPDES Compliance Inspection Report  
 Semi-Public Sewage Disposal Inspection Form

Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
1PT00114*BD	OH0133876	8/13/2008	C	S	1

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Bethel Local Schools WWTP 7490 State Route 201 Tipp City, OH 45371	9:20 AM	December 1, 2007
	Exit Time	Permit Expiration Date
	12:30 PM	September 30, 2008
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)	
Bob Hoover, Superintendent Joe and Brenda Sweeney	937-845-9414 937-605-2748	
Name(s), Address and Title(s) of Operator of Record	Phone Number(s)	
ORC form needs to be submitted		
Name, Address and Title of Responsible Official	Phone Number	
Bethel Local School District Bob Hoover, Superintendent 7490 S. State Route 201 Tipp City, OH 45371	937-845-9414	

Ohio EPA Inspector	Ohio EPA Reviewer
 Joe Miller Division of Surface Water Southwest District Office	 Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office
8/14/08 Date	8/14/08 Date

Permit #: 1PT00114\*BD  
 NPDES #: OH0133876

Average Daily Design Flow:	30,000 Gallons/Day
Plant Serves:	K-12 School
Average Daily Flow: (Period of Review):	2500 Gallons/Day (August 2006 to April 2008)
Method of flow monitoring:	Hour meter on dosing
Type of alarms for plant:	Visual

**Pretreatment**

Type of Pretreatment: **Trash Trap**  
 Does the Trash Trap need pumped: **Unknown**  
 Maintenance of pretreatment components is: **Not Checked**

**Comments/Status:**

**Secondary Treatment  
(Aeration)**

Color of sludge: **Light Brown**  
 Quality of Sludge: **Thin**  
 Foam: **None present**  
 Odor: **No objectionable odor present**

	Yes	No		Yes	No
Aeration is taking place	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant is septic	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Blowers are operating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Blowers are on a timer	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skimmers are operating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant is flooded	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diffusers are operating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Grating is present	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sludge return is operating	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

Maintenance of aerating equipment is...**Poor**

**Comments/Status:**

**Secondary Treatment  
(Settling)**

Clarity: **Bulking/Rising Sludge**  
 Condition of Weir: **Some Solids**  
 Weir is level: **Yes**  
 Effluent in weir: **None**

Permit # : 1PT00114\*BD  
NPDES # : OH0133876

Clarifier walls need scraped: **Yes**

Overall maintenance of settling components is: **Poor**

**Comments/Status:**

\_\_\_\_\_

**Tertiary Treatment**

	Yes	No		Yes	No
Surface sand Filters: <b>Slow</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Subsurface</b>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution box operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Beds alternated	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are filters ponding/flooding	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Beds raked	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sand filters overgrown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chlorination present	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UV present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Dechlorination present	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Overall maintenance of components is: **Needs improved**

**Comments/Status:**

\_\_\_\_\_

**Sludge Handling/Storage Disposal**

Hauler name: Unknown  
Disposal Site: City of Springfield  
Sludge wasted from: Clarifier to sludge waste tank

Sludge drying beds: **No**                      Sludge holding tank: **Yes**

Overall maintenance of components is: **Satisfactory**

**Comments/Status:** Sludge not reported as hauled since WWTP installation. Sludge was hauled earlier this year. Sludge is required to be reported on both the monitoring reports and the annual sludge report. It appeared that sludge needed to be wasted from the clarifier to the sludge holding tank. Check sludge with sludge judge or equivalent to determine wasting frequency.

\_\_\_\_\_

**Plant Discharge**

Discharge point is a: **Field tile**  
Name of discharge point: **Unnamed trib Mud Run via tile**  
Discharge is visible: **No**                      Quality of Effluent: **Clear**

Permit # : 1PT00114\*BD  
 NPDES # : OH0133876

**Effluent Limit Violations Bethel Local Schools WWTP  
 January 2006 to May 2008**

Reporting Period	Parameter	Limit Type	Limit	Reported Value	Violation Date
January 2006	Total Suspended Solids	30D Conc	30.0	33.	1/1/2006
January 2006	Dissolved Oxygen	1D Conc	5.0	4.31	1/20/2006
April 2006	Total Suspended Solids	30D Conc	30.0	35.	4/1/2006
May 2006	Total Suspended Solids	30D Conc	30.0	60.	5/1/2006
May 2006	Total Suspended Solids	7D Conc	45.0	60.	5/8/2006
June 2006	Total Suspended Solids	30D Conc	30.0	125.	6/1/2006
June 2006	Total Suspended Solids	7D Conc	45.0	125.	6/8/2006
July 2006	Total Suspended Solids	30D Conc	30.0	52.	7/1/2006
July 2006	Total Suspended Solids	7D Conc	45.0	52.	7/8/2006
October 2006	Total Suspended Solids	30D Conc	12.0	16.	10/1/2006
December 2006	Nitrogen, Ammonia (NH3)	30D Conc	3.0	15.68	12/1/2006
December 2006	Nitrogen, Ammonia (NH3)	7D Conc	4.5	15.68	12/1/2006
January 2007	Total Suspended Solids	30D Conc	12.0	15.	1/1/2007
January 2007	Dissolved Oxygen	1D Conc	6.0	5.	1/12/2007
February 2007	Nitrogen, Ammonia (NH3)	30D Conc	3.0	10.015	2/1/2007
February 2007	Nitrogen, Ammonia (NH3)	7D Conc	4.5	17.4	2/1/2007
February 2007	CBOD 5 day	30D Conc	10.0	93.27	2/1/2007
February 2007	CBOD 5 day	7D Conc	15.0	175.8	2/1/2007
February 2007	CBOD 5 day	7D Qty	1.1	1.39735	2/1/2007
June 2007	Total Suspended Solids	30D Conc	12.0	91.	6/1/2007
June 2007	Total Suspended Solids	7D Conc	18.0	91.	6/8/2007
July 2007	Total Suspended Solids	30D Conc	12.0	22.	7/1/2007
July 2007	Total Suspended Solids	7D Conc	18.0	22.	7/15/2007
December 2007	Nitrogen, Ammonia (NH3)	30D Conc	3.0	5.69	12/1/2007
December 2007	Nitrogen, Ammonia (NH3)	7D Conc	4.5	5.69	12/8/2007
February 2008	Nitrogen, Ammonia (NH3)	30D Conc	3.0	22.86	2/1/2008
February 2008	Nitrogen, Ammonia (NH3)	7D Conc	4.5	22.86	2/1/2008
May 2008	Total Suspended Solids	30D Qty	1.4	32929.5	5/1/2008
May 2008	Nitrogen, Ammonia (NH3)	30D Conc	1.0	4.18	5/1/2008
May 2008	Nitrogen, Ammonia (NH3)	30D Qty	0.1	45881.7	5/1/2008
May 2008	CBOD 5 day	30D Qty	1.1	72444.9	5/1/2008
May 2008	Total Suspended Solids	7D Qty	2.0	32929.5	5/8/2008
May 2008	Nitrogen, Ammonia (NH3)	7D Conc	1.5	4.18	5/8/2008
May 2008	Nitrogen, Ammonia (NH3)	7D Qty	0.2	45881.7	5/8/2008
May 2008	CBOD 5 day	7D Qty	1.7	72444.9	5/8/2008



Ohio Environmental Protection Agency  
 Division of Drinking and Ground Waters  
 Operator Certification Unit

**Operator of Record (ORC) Notification Form**

Ohio Environmental Protection Agency  
 Division of Drinking and Ground Waters  
 Operator Certification Unit  
 50 West Town St, Suite 700  
 P.O. Box 1049  
 Columbus, OH 43216-1049

Phone: (614) 644-2752  
 1- 866 - 411-OPCT (6728)  
 Fax: (614) 644-2909  
 email: opcert@epa.state.oh.us  
 website: www.epa.state.oh.us/ddagw/opcert.html

**I. SYSTEM INFORMATION**

Name of System: \_\_\_\_\_ Phone Number: \_\_\_\_\_

PWS ID/NPDES Permit #: \_\_\_\_\_ STU # \_\_\_\_\_ Classification: \_\_\_\_\_

Name of Facility Owner or Permittee, Title (Print) \_\_\_\_\_ Facility Owner or Permittee (Signature) \_\_\_\_\_

**II. SYSTEM TYPE (Check only one of the following. Use additional sheets if necessary.)**

Public Water System (PWS)	Distribution System	Treatment Works	Collection System

**III. OPERATOR OF RECORD INFORMATION**

Add Additional(A), New (N) or Remove(R)	Name of Operator of Record	Certification Number & Expiration Date	I verify that I am the onsite certified operator responsible for the technical operation of the above referenced facility. (Signature of certified operator)*

\* A signature by an operator of record who is being removed is not required.  
 (Attach additional sheets if necessary.)

Amount of time an ORC spends onsite at the Facility: \_\_\_\_\_

For Internal Use Only	
Reviewed by:	Date of SDWIS update:
Date of Compliance Status Letter:	

