


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

NOTICE OF VIOLATION – ACTION REQUIRED

July 27, 2009

RE: Clark County
Melody Cruise-In Theater
Non-Community, Transient
PWS ID: OH1242512

CERTIFIED MAIL

Joe Brooks
222 N Murray St
P O Box 1200
Springfield, OH 45503-1200

**Subject: Violation of Total Coliform Maximum Contaminant Level (MCL)
During Third Quarter of 2009 (ACUTE)**

Melody Cruise-In Theater is in violation of the Maximum Contaminant Level (MCL) for Total Coliform established by Ohio Administrative Code (OAC), Rule 3745-81-14. Water samples have confirmed the presence of *E. colifecal* coliform in the drinking water. *Fecal coliforms and E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes.* This is an Acute MCL violation requiring immediate action.

IMMEDIATE ACTION REQUIRED:

1. **Consult with Ohio EPA within 24 hours** regarding public notice requirements. If you have not already received direction regarding this violation, contact the SWDO at 937-285-6116 .
2. **Issue the enclosed public notice within 24 hours** in accordance with OAC, Rule 3745-81-32 using one or more of the following methods to reach all persons served.
 - Hand delivery to persons served by the water system
 - Posting in conspicuous locations, such as bulletin boards, restrooms, drinking fountains, vending areas
 - Send to parents or guardians of children at schools or day care facilities
 - Another delivery method approved in writing by the director
 - Posted notices must remain in place for as long as the violation exists.
 - Posted notices must remain in place for as long as the violation exists, but in no case for less than seven (7) days (even if the violation is resolved). The language in italics on the enclosed public notice is mandatory and must be included, as written. Do not make changes to the public notice without consulting with Ohio EPA beforehand.

NOTE: Issuance of a Public Notice must be repeated every 30 days for as long as the violation exists, unless directed otherwise by the District Office. A verification form and a copy of the public notice stating the corrective measures completed to date must be submitted to the Ohio EPA.

Melody Cruise-In Theater

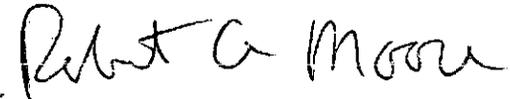
July 27, 2009

Page 2

3. **Investigate and eliminate the cause of bacterial contamination.** Special purpose samples may be collected to investigate the source of contamination or to verify elimination of the problem (these samples cannot be collected to comply with monitoring or MCL requirements; label samples as "special purpose").
4. **Complete the enclosed verification form within 10 days of issuing the Public Notice** and mail it to Ohio EPA - SWDO. Include a copy of each notice distributed, published or posted.
5. **Discontinue the Water Use Advisory** – The water use advisory shall remain in effect until one set of four (4) repeat samples is total coliform-negative. Notify the people served by the water system when the water use advisory is discontinued.
6. **Monitor with at least five (5) routine samples** in the month following a routine total coliform-positive result in accordance with OAC, Rule 3745-81-21(B)(7).

If you have any questions, contact me at 937-285-6476 or Dave Secor at 937-285-6114.

Sincerely,



Robert A. Moore
Environmental Specialist

Enclosures: Tier 1 Public Notification
Public Notice Instructions and Verification Form

ec: Clark County Health Department
Information Management Section, DDAGW, CO

RAM/ca



DRINKING WATER WARNING

Fecal coliform or *E. coli* bacteria were found in the Melody Cruise-In Theater water supply

**BOIL YOUR WATER BEFORE USING
OR USE BOTTLED WATER**

Bottled water is available from _____

What should I do?

- *DO NOT DRINK THE WATER WITHOUT BOILING IT FIRST. Bring all water to a boil, let it boil for at least one minute, and let it cool before using, or use bottled water. Boiled or bottled water should be used for drinking, making ice, brushing teeth, washing dishes and food preparation until further notice. Boiling kills bacteria and other organisms in the water.*
- *Fecal coliforms and E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes can cause short term effects, diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a special health risk for infants, young children, and people with severely compromised immune systems.*
- *The symptoms above are not caused only by organisms in drinking water. If you experience any of these symptoms and they persist, you may want to seek medical advice. People at increased risk should seek advice about drinking water from their health care providers.*

What is being done?

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

For more information, please contact _____ at _____
name of contact phone number
or at _____
mailing address

General guidelines on ways to lessen the risk of infection by microbes are available from the EPA Safe Drinking Water Hotline at 1(800) 426-4791.

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly. You can do this by posting this notice in a public place or distributing copies by hand or mail.

PWSID# OH1242512

Date Distributed:

Tier 1: Fecal coliform or *E. coli* Notice – Non community (boil option)



11

PUBLIC NOTICE INSTRUCTIONS AND VERIFICATION FORM FOR TIER 1 VIOLATIONS

The owner or operator of a public water system with a Tier 1 violation or situation that may pose an acute risk to human health is required to notify the persons served by the public water system. Notice shall be issued as soon as practical but **no later than 24 hours** after the system learns of the violation. Public notice shall be repeated as established during consultation with Ohio EPA.

I HEREBY CERTIFY THAT THE PUBLIC WAS NOTIFIED BY THE FOLLOWING METHOD(S) INDICATED BELOW, AS DESCRIBED IN THE OHIO ADMINISTRATIVE CODE RULE 3745-81-32:

Required Method of Public Notification	Actual Method of Public Notification
<p>Use one or more of the following methods to reach all persons served by the public water system:</p> <p>1. Public notice issued by appropriate broadcast media (such as radio and television stations)</p> <p>2. Public notice issued by continuous posting in conspicuous places throughout the area served by the water system (required to remain posted for as long as the violation exists)</p> <p>3. Public notice issued by hand delivery to persons served by the water system</p> <p>4. Public notice issued by another delivery method approved in writing</p>	<p>Describe actual methods used to notify public of the violation:</p> <p>1A. Name of station(s) _____</p> <p>1B. Date provided to station(s) _____</p> <p>2A. Dates of posting _____</p> <p>2B. Locations of posting _____ _____ _____</p> <p>3. Date of delivery _____</p> <p>4A. Method _____</p> <p>4B. Date _____</p>
<p>Additional methods established in consultation with Ohio EPA</p>	<p>A. Method(s) _____ _____</p> <p>B. Date(s) _____</p>

Please indicate below what public notice was used. INCLUDE A COPY OF THE PUBLIC NOTICE.

_____ A public notice as provided was issued without changes.

_____ A different public notice was issued.

 Signature of Responsible Person Date

 Printed Name and Title of Responsible Person

Melody Cruise-In Theater
 OH1242512
 Clark County
 Third Quarter of 2009
 Total Coliform Acute MCL (Vio. Type 21)

For Ohio EPA use only:
 Date PN received: _____
 PN acceptable: _____ PN not acceptable: _____



11-11-11

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage)

For delivery information visit our website at www.usps.com

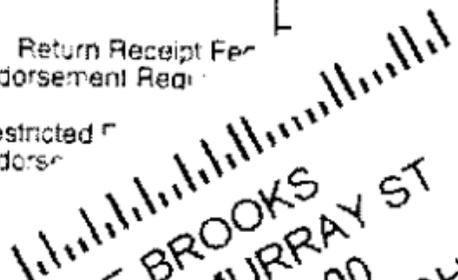
7004 2890 0000 3024 8243

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Mail Fee
(Endorsement Required)



Street
or PO

City, State

JOE BROOKS

222 N MURRAY ST

P O BOX 1200

SPRINGFIELD OH 45503 1200

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. Internet access to delivery information is not available on mail addressed to APOs and FPOs.

Also complete address on the reverse
to the back of the mailpiece,
if space permits.

JOE BROOKS
222 N MURRAY ST
P O BOX 1200
SPRINGFIELD OH 45503 1200

PLACE STICKER IN TOP OF ENVELOPE OR
ON THE REVERSE OF MAILER
FOR MAILING

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Joe Brooks

B. Received by (Printed Name)

C. Date of Delivery
7/30/09

Agent
 Addressee

Yes
 No

2. Article Number
(Transfer from service label)
PS Form 3811, August 2001

7004 2890 0000

Registered Mail
 Insured Mail

4. Restricted Delivery? (Extra Fee)
 Yes

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

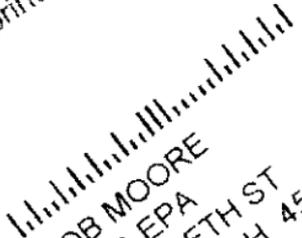
Domestic Return Receipt

10248243

UNITED STATES POSTAL SERVICE

POSTNET

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


BOB MOORE
OHIO EPA
401 E FIFTH ST
DAYTON OH 45402 2911