

**Environmental  
Protection Agency**

Ted Strickland, Governor  
Lee Fisher, Lt. Governor  
Chris Kanesha, Director  
September 21, 2010

Mississinawa Valley Local Schools  
1469 State Route 47  
Union City, OH 45390  
Lisa Wendel, Superintendent

**RE: Compliance Evaluation Investigation (CEI)/ NOTICE OF VIOLATION  
Mississinawa Valley Local Schools Wastewater Treatment Plant  
NPDES Permit 1PT00095\*BD/OH0127434  
Jackson Township, Darke County**

Dear Ms. Wendel,

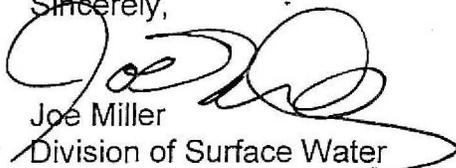
On September 15, 2010, I conducted a Compliance Evaluation Investigation at the Mississinawa Valley Local School wastewater treatment works. This inspection was conducted to determine compliance with the NPDES discharge permit.

Overall, the wastewater facility was rated as "Satisfactory", however, effluent violations were noted that require attention. A detailed inspection report is attached.

A review of the monitoring reports indicates effluent violations during the period of March 2008 to August 2010. These violations appear to be due to an inability to provide consistent effluent disinfection. This is likely a result of clogging of chlorination and dechlorination tablets and therefore the failure to provide adequate bacteria kill (Fecal Coliform violations) or failure to dechlorinate (Chlorine violations). The installation of ultraviolet disinfection (or similar) is recommended to eliminate these effluent limitation violations. A permit to install would be required to install new disinfection equipment.

Provide a response to this inspection by **October 18, 2010** to the items listed below the heading "Items Requiring a Response." If you have any questions, I can be reached at (937) 285-6109.

Sincerely,

  
Joe Miller  
Division of Surface Water

CC: Darke County Health Department  
Michael Niekamp, Wastewater Operator  
Ron Stiver and Richard Yount, Mississinawa Schools Maintenance  
Southwest District Office  
401 East Fifth Street  
Dayton, OH 45402-2911  
937 | 285 6357  
937 | 285 6249 (fax)  
www.epa.ohio.gov

## **ITEMS REQUIRING A RESPONSE**

1. Disinfection – Provide a plan and schedule to correct ongoing effluent disinfection violations. Permit to Install forms can be obtained at Ohio EPA's website: <http://www.epa.state.oh.us/dsw/pti/PTIForms.aspx>
2. Operator of Record – Submit Operator of Record Notification. For your convenience, an Operator of Record form is enclosed.

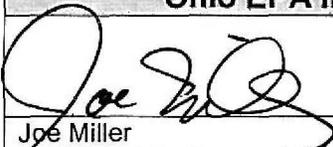
Permit # : 1PT00095\*BD  
 NPDES # : OH0127434

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
1PT00095*BD	OH0127434	9/15/2010	C	S	1

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Mississinawa Local Schools WWTP 1469 State Route 47 Union City, OH 45390	11:55 AM	February 1, 2008
	Exit Time	Permit Expiration Date
	12:10 PM	January 31, 2013
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)	
N/A		
Name(s), Address and Title(s) of Operator of Record	Phone Number(s)	
Need to submit ORC form		
Name, Address and Title of Responsible Official	Phone Number	
Mississinawa Local School District Lisa Wendel, Superintendent 1469 State Route 47 Union City, OH 45390	937-968-5656	

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
9/21/10 Date	9/23/10 Date

Average Daily Design Flow:	<b>19,820 Gallons/Day</b>
Plant Serves:	K-12 School complex
Average Daily Flow: (Period of Review):	<b>4,000 gpd (March 2008 to August 2010)</b>
Method of flow monitoring:	<b>Flow Totalizer</b>
Type of alarms for plant:	<b>Visual</b>

**Pretreatment**

Type of Pretreatment: **Trash Trap**  
 Does the Trash Trap need pumped: **Unknown**  
 Maintenance of pretreatment components is: **Satisfactory**

**Comments/Status:**

**Secondary Treatment  
(Aeration)**

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

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

Maintenance of aerating equipment is...**Satisfactory**

**Secondary Treatment  
(Settling)**

Clarity: **Clear**  
 Condition of Weir: **Satisfactory**  
 Weir is level: **Yes**  
 Effluent in weir: **Clear**  
 Clarifier walls need scraped: **Yes**

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

**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 checked="" type="checkbox"/>	<input type="checkbox"/>
Sand filters overgrown	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chlorination present	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UV present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dechlorination present	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Overall maintenance of components is: **Satisfactory**

Comments/Status:

Due to fecal coliform and chlorine violations, UV disinfection should be considered for installation.

**Sludge Handling/Storage Disposal**

Hauler name: Todd Frech  
 Disposal Site: unknown  
 Sludge wasted from: Sludge holding tank

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

Overall maintenance of components is: **Satisfactory**

Comments/Status:

**Plant Discharge**

Discharge point is a: **Field tile**  
 Name of discharge point: **unnamed tributary of the South Fork of the Stillwater River**  
 Discharge is visible: **No**                      Quality of Effluent: **Clear**



**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: _____	

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### Mississinawa Local Schools WWTP Effluent Limitation Violations (March 2008 to August 2010)

Reporting Period	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
August 2008	00530	Total Suspended Solids	30D Conc	12.0	13.	8/1/2008
August 2008	50060	Chlorine, Total Residual	1D Conc	0.019	.088	8/5/2008
October 2008	31616	Fecal Coliform	7D Conc	2000	2700.	10/1/2008
October 2008	50060	Chlorine, Total Residual	1D Conc	0.019	.11	10/21/2008
May 2009	50060	Chlorine, Total Residual	1D Conc	0.019	.08	5/22/2009
June 2009	50060	Chlorine, Total Residual	1D Conc	0.019	.057	6/16/2009
September 2009	31616	Fecal Coliform	30D Conc	1000	1531.66	9/1/2009
September 2009	31616	Fecal Coliform	7D Conc	2000	10200.	9/1/2009
September 2009	50060	Chlorine, Total Residual	1D Conc	0.019	.075	9/15/2009



Figure 1, Mississinawa Local Schools WWTP sand filters, JGM 9/15/2010

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Figure 2, Mississinawa Local Schools WWTP, JGM 9/15/2010

# Mississinawa Local Schools Effluent Flow (MGD) March 2008 to August 2010

