



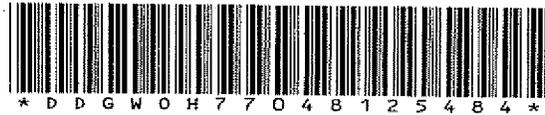
Environmental
Protection Agency

John R. Kasich, Governor
Mary Taylor, Lt. Governor
Scott J. Nally, Director

OH7704812

Seasons Rehab and Care Center

2/22/2011



February 22, 2011

NOTICE OF VIOLATION – ACTION REQUIRED

Meredith Flaherty
Seasons Rehab And Care Center
456 Seasons Road,
Stow, OH 44224

Summit County
Seasons Rehab And Care Center
COMMUNITY PWS
PWS ID: OH7704812

Subject: Failure to Monitor Drinking Water

Seasons Rehab And Care Center is in violation of Ohio Administrative Code Rule (OAC) 3745-81-23 for failing to monitor your drinking water during the October 1 to December 31, 2010 monitoring period and/or report results for the following contaminant: NITRATE.

In order to return to compliance, Seasons Rehab And Care Center must take the following actions:

1. Immediately collect a sample of your drinking water from the entry point (first tap after treatment).
2. Submit the sample for analysis to a certified laboratory on the enclosed list.
3. Notify your customers using the enclosed instructions and public notice.
4. Complete and return the enclosed verification form to this office.

Your prompt attention to this matter is greatly appreciated. Continued noncompliance may lead to enforcement actions. If you have any questions, or if the required sample analysis was performed, please call me at (614) 644-2752.

Sincerely,

Wendy Sheeran

Division of Drinking and Ground Waters

Enclosure: Laboratory List, Public Notice, Verification Form

cc: Manager; DDAGW NEDO file; DDAGW CO file

DRINKING WATER NOTICE

Monitoring requirements not met for Seasons Rehab And Care Center

We are required to monitor your drinking water for specific contaminants on a regular basis. Results of regular monitoring are an indicator of whether or not our drinking water meets health standards. During the October 1 to December 31, 2010 time period we did not monitor for the following contaminant and therefore cannot be sure of the quality of our drinking water during that time:
NITRATE.

What Should I Do?

This notice is to inform you that Seasons Rehab And Care Center did not monitor and report results for the presence of the contaminant listed above in the public drinking water system during the October 1 to December 31, 2010 time period, as required by the Ohio Environmental Protection Agency. You do not need to take any actions in response to this notice.

What Is Being Done?

Upon being notified of this violation, the water supply was required to have the drinking water analyzed for the above mentioned parameters. The water supplier will take steps to ensure that adequate monitoring will be performed in the future.

Additional information may be obtained by contacting Seasons Rehab And Care Center at:

Contact Person: _____

Phone Number: _____

Mailing Address: _____

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail.

PWSID: OH7704812 Facility ID: 7758634

Date Distributed: _____