



2PR0014020090305

ASHLAND COBURN INC

2PR00140 2009/03/05 ARISS, WALTER

HAYESVILLE



State of Ohio Environmental Protection Agency

Northwest District Office

347 North Dunbridge Road
Bowling Green, OH 43402-9398

TELE: (419) 352-8461 FAX: (419) 352-8468
www.epa.state.oh.us

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

Re: Ashland County
Coburn Inc.
NPDES Permit 2PR00140

March 5, 2009

Chuck Zimmerman, President
Coburn Incorporated
P.O. Box 147
636 C.R. 30-A
Hayesville, Ohio 44838

Dear Mr. Zimmerman,

On February 5, 2009, an inspection was made of the wastewater treatment facilities serving Coburn Incorporated located at 636 C.R. 30-A, Vermillion Township, Ashland County. At the time of the inspection all major treatment units were in operation and appeared to be functioning normally. It was noted that the level of water in the chlorine contact tank appeared to be below the discharge pipe. The chlorine tank should be checked to make sure it is not leaking again.

A review of the discharge monitoring reports submitted to our office for the months of August 2008 through January 2009 revealed two *violations* of the limits contained in your NPDES permit. Both violations were for results below the minimum dissolved oxygen concentration in September 2008.

The review revealed that the daily odor, color, and turbidity are still not being recorded as required by the permit. The code "AN" is being reported on days when the daily checks are not being completed. The "AN" should only be used on Saturdays, Sundays or other recognized Holidays. This code should not be used instead of actual data on weekdays. Our office is perplexed and dismayed as to why the daily flow reporting requirement is being met, however the odor, color, and turbidity checks continue to be neglected. Formal enforcement action against you remains an option in order to achieve compliance with this condition of your permit.

If you have any questions please contact me at 419-373-3070.

Sincerely,

Walter Ariss
Environmental Specialist II
Division of Surface Water

/lb
Enclosed

pc: NWD@DSW.Hle.w/enclosure
Kevin Dean, Dean's Backflow Service w/enclosure

OHIO ENVIRONMENTAL PROTECTION AGENCY

OPERATION AND MAINTENANCE INSPECTION
 WWTP'S LESS THAN 25,000 GPD

NPDES Permit No. 2 PR 00140

Facility Name Coburn Inc Expiration Date 4/30/2011

Facility Address 636 C.D. 30A Date 2/5/09 Time 3:00 am

City Hayesville County Ashland Township _____

Name and Address of Owner _____

Person Contacted _____ Owner Phone _____

Flow: Design 4500 GPD Present 500-2000 GPD (metered - estimated)

Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 340 sunny

OEPA Personnel Walter Ariss District NWDO

1. Plant Effluent - Mark Severity No.

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None	<input checked="" type="checkbox"/>	Clear	<input checked="" type="checkbox"/>	None	<input checked="" type="checkbox"/>	Colorless
1	Mild						
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

2. Effect of effluent on Receiving Stream Name: not observed

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None		Clear		None		Colorless
1	Mild						
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

3. a. Plant has _____ excellent good _____ fair _____ poor operation
 b. Plant has _____ excellent good _____ fair _____ poor maintenance
 c. Sand filters have _____ excellent good _____ fair _____ poor maintenance

- d. Not operating at expected efficiency due to:
- (1) _____ hydraulic overload
 - (2) _____ organic/ solids overload
 - (3) _____ personnel inefficiency
 - (4) _____ equipment failure
 - (5) _____ wastes
 - (6) _____

Disinfection: (Required May 1 thru Oct.31.)

IN	OUT	
_____	<input checked="" type="checkbox"/>	Chlorination Tablets
_____	<input checked="" type="checkbox"/>	Dechlorination Tablets
_____	_____	U.V.

4. Yes No Compliance with NPDES Permit

Periodic Violations Y N Parameters: _____
 Chronic Violations odor, color, turbidity

5. Adequate plant safety

6. Operation and Maintenance Service Name Open's Back Plan

Frequency of Visits 1/week

Facility Name: Coburn Inc

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	<input checked="" type="checkbox"/>	Trash Trap	Pumping Frequency: ?
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
		Flow Equalization	
Aeration Equipment	<input checked="" type="checkbox"/>	Plant Timer <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Cycle Time: <i>appears adequate</i>
		Motor/ Blower Unit <i>blower running</i>	
Secondary Treatment	<input checked="" type="checkbox"/>	Aeration Tank	Color: <i>good color</i> Adequate Aeration: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> <i>significant amount of white foam</i>
Final Settling	<input checked="" type="checkbox"/>	Clarifier	<i>fairly clear / middle section frozen</i>
	<input checked="" type="checkbox"/>	Sludge Return	In <input checked="" type="checkbox"/> Out <input type="checkbox"/>
		Surface Skimmer	In <input type="checkbox"/> Out <input checked="" type="checkbox"/> <i>either frozen or turned off</i>
		Fixed Media Clarifier	
Tertiary Treatment	<input checked="" type="checkbox"/>	Surface Sand Filter	<i>partially frozen / appear to still be working okay</i>
		Polishing Pond	
		Other	
Disinfection	<input checked="" type="checkbox"/>	Chlorine Tube Feeder	<i>no tablets</i>
	<input checked="" type="checkbox"/>	Dechlorination Tube Feeder	<i>no tablets</i>
		Ultraviolet (UV)	
Flow Metering		Elapsed Pump Time	
	<input checked="" type="checkbox"/>	Recorder (continuous total)	<i>on drinking water well</i>
Pumps		Raw Wastewater (type)	
	<input checked="" type="checkbox"/>	Sand Filter Effluent Dosing	<i>okay</i>
Sludge Handling		Aerated Storage Tank	
		Sludge Drying Bed	
Sludge Disposal	<input checked="" type="checkbox"/>	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	<input checked="" type="checkbox"/>	Post Aeration	<i>level in chlorine tank</i>
		Spray Irrigation	<i>is below outlet pipe</i>
		Other	