



**Environmental
Protection Agency**

Ted Strickland, Governor
Lee Fisher, Lt. Governor
Chris Korleski, Director

Re: Ashland County
Landoll's Mohican Castle
NPDES permit

Notice of Violation

July 13, 2010

CERTIFIED MAIL

Mr. Jim Landoll
Landoll's Mohican Castle
561 Twp. Rd. 3352
Loudonville, Ohio 44842

Dear Mr. Landoll,

On July 8, 2010, an inspection was conducted of the wastewater treatment facilities serving Landoll's Mohican Castle, 561 T.R. 3352, Hanover Township, Ashland County. At the time of the inspection the plant was operating in a satisfactory condition and a clear final effluent was present in the chlorine contact tank.

The chlorine contact tank continues to leak from one of the joints in the tank. This problem has been occurring since at least August 7, 2008, as documented during our inspection at that time. We have given you several notices to repair the tank but as of this inspection the tank was still leaking. If the tank is not repaired within 60 days of receipt of this letter our office will begin enforcement action for failure to maintain the treatment works in good working order as specified in Part III, 3, A of your NPDES permit. Failure to maintain the chlorine contact tank is a **violation** of this condition of your NPDES permit 2PR00171*BD.

A review of the discharge monitoring reports covering the months of November 2009 through June 2010 revealed no violations of the limits contained in your NPDES permit.

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

Sincerely,

Walter Ariss
Environmental Specialist II
Division of Surface Water

/lb

Enclosure

pc: ~~NWDO-DSW file~~
Kevin Dean, w/ enclosure
7006 0100 0004 1318 4559

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2PR00171

Facility Name Landoll's Castle Expiration Date 1/31/2013
 Facility Address 561 TR 3362 Date 7/8/10 Time 2:15 am
 City Loudonville County Ashland Township _____
 Name and Address of Owner Jim Landoll
 Person Contacted _____ Owner Phone _____
 Flow: Design 13,000 GPD Present 2000-7000 GPD (metered - estimated)
 Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 94° sun
 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) leaking chlorine tank

Disinfection: (Required May 1 thru Oct.31.)	
IN <input checked="" type="checkbox"/>	OUT _____
_____	<input checked="" type="checkbox"/> Chlorination Tablets
_____	_____ Dechlorination Tablets
_____	_____ U.V.

Yes No

4. Compliance with NPDES Permit

Periodic Violations Y N Parameters: _____
 Chronic Violations failure to maintain chlorine tank

5. Adequate plant safety

6. Operation and Maintenance Service Name Dean's Backflow

Frequency of Visits 1/week

Facility Name: Lundell's Castle

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	✓	Trash Trap	Pumping Frequency: ?
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	✓	Flow Equalization	blower blower off / EQ blower should never be off
Aeration Equipment	✓	Plant Timer <u>Y</u> <u>N</u>	Cycle Time:
	✓	Motor/ Blower Unit <u>off</u>	
Secondary Treatment	✓	Aeration Tank	Color: <u>blower off</u> or <u>timer</u> Adequate Aeration: <u>Y</u> <u>N</u>
Final Settling	✓	Clarifier	good clarity
	✓	Sludge Return	In <u> </u> Out <u>✓</u>
	✓	Surface Skimmer	In <u> </u> Out <u>✓</u> need to use skimmer to remove duckweed
	✓	Fixed Media Clarifier	okay - very clear
Tertiary Treatment	✓	Surface Sand Filter	both beds clear
		Polishing Pond	
		Other	
Disinfection	✓	Chlorine Tube Feeder	okay - Chlorine taste still heating
	✓	Dechlorination Tube Feeder	- not in use
		Ultraviolet (UV)	
Flow Metering	✓	Elapsed Pump Time	on filter dosing
		Recorder (continuous total)	
Pumps	✓	Raw Wastewater (50%) flow EQ	okay
	✓	Sand Filter Effluent Dosing	okay
Sludge Handling	✓	Aerated Storage Tank	air off
		Sludge Drying Bed	
Sludge Disposal	✓	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	✓	Post Aeration	off
		Spray Irrigation	
		Other	

DSIW-WA-LB

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Crystal Stacey</p> <p>C. Date of Delivery 7-27</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Mr. Jim Sandell Sandell Mohican Castle 561 Jup Rd 3352 Sandusville Oh 44842</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7006 0100 0004 1318 4559</p>	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

DSIW-WA-LB

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To
 Mr. Jim Sandell
 Street, Apt. No. or PO Box No. Sandell Mohican Castle
 561 Jup Rd 3352
 City, State, ZIP+4 Sandusville Oh 44842

PS Form 3800, June 2002 See Reverse for Instructions



2PR0017120110301

ASHLAND ILANDOLL'S MOHICAN CASTLE

2PR00171 2011/03/01 ARISS, WALTER

LOUDONVILLE



Environmental
Protection Agency

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

Re: Ashland County
Landoll's Mohican Castle
NPDES permit
Notice of Violation

March 1, 2011

Ms. Marta Landoll
Landoll's Mohican Castle
561 Township Road 3352
Loudonville, Ohio 44842

Dear Ms. Landoll:

On February 17, 2011, an inspection was conducted of the wastewater treatment facilities serving Landoll's Mohican Castle, 561 Township Road 3352, Hanover Township, Ashland County. At the time of the inspection the plant was operating in a satisfactory condition and a clear final effluent was present in the chlorine contact tank.

While the majority of the treatment plant was acceptable, work still needs to be completed on the chlorine contact tank. A large excavation has been made around the tank in order to repair it. The low water level in the tank suggests that repairs have still been unsuccessful. The excavation is beginning to erode the hillside supporting the sand filter bed walls. Due to unfavorable soil conditions this time of year for moving the equipment necessary to repair the tank and fill the excavation, we will allow until April 30, 2011, to complete the repairs and stabilize the area. Our office will re-inspect the facility at that time. If the repairs are not completed and the area stabilized, our office **will pursue enforcement action**, which could include a monetary penalty. You are still in violation for failure to maintain the treatment works in good working order as specified in Part III, 3, A of your NPDES permit. Failure to maintain the chlorine contact tank is a **violation** of this condition of your NPDES permit 2PR00171*BD. Please review the enclosed pictures of the area of concern.

The operators' log should contain the previous three months worth of data. Only the month of February information was present. The log sheet should be edited to include a column for the operator's initials, time in, time out, and a column for comments. These items are required under OAC 3745-7-09.

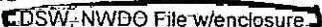
A review of the discharge monitoring reports covering the months of July 2010 through January 2011 revealed two **violations** of the limits contained in your NPDES permit. Both of these violations were for the fecal coliform sampling result from August 2010.

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

Sincerely,

Walter Ariss
Environmental Specialist II
Division of Surface Water

/cs
Enclosure

pc: 
Kevin Dean w/enclosure

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2 PR00171

Facility Name Lundoll's Castle Expiration Date 11/31/2013
 Facility Address 561 TR 3362 Date 2/17/11 Time 11:30 am
 City Landonville County Ashland Township _____
 Name and Address of Owner Jim Lundoll
 Person Contacted _____ Owner Phone _____
 Flow: Design 13,000 GPD Present 2000-8000 GPD (metered - estimated)
 Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 50° clouds
 OEPA Personnel Walter Aris 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 - chlorine tank
 (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.

Yes No

4. Compliance with NPDES Permit

Periodic Violations Y N Parameters: _____
 Chronic Violations failure to maintain system

5. Adequate plant safety

6. Operation and Maintenance Service Name Dean's Backflow

Frequency of Visits 1/week

Facility Name: Londoll's Castle

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	X	Trash Trap	Pumping Frequency: ?
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	X	Flow Equalization	okay
Aeration Equipment	2	Plant Timer X Y ___ N	Cycle Time: motors off during inspection timer okay
		Motor/ Blower Unit	
Secondary Treatment	X	Aeration Tank	Color: okay Adequate Aeration: Y ___ N ___
Final Settling	X	Clarifier	good clarity
	X	Sludge Return	In ___ Out ___ Blower off
	X	Surface Skimmer	In ___ Out ___ Blower off
	X	Fixed Media Clarifier	okay
Tertiary Treatment	X	Surface Sand Filter	filters good / need to stabilize hillside below filter walls
		Polishing Pond	
		Other	
Disinfection	X	Chlorine Tube Feeder	out chlorine tank still leaking
	X	Dechlorination Tube Feeder	out
		Ultraviolet (UV)	
Flow Metering	X	Elapsed Pump Time	on filter dosing station
		Recorder (continuous total)	
Pumps	X	Raw Wastewater (Type) Flow EQ	okay
	X	Sand Filter Effluent Dosing	okay
Sludge Handling	X	Aerated Storage Tank	okay
		Sludge Drying Bed	
Sludge Disposal	X	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	X	Post Aeration	on
		Spray Irrigation	
		Other	

Landoll's Mohican Castle 2-17-2011 photos taken by Walter Ariss Ohio EPA



Area of erosion around chlorine tank encroaching on sand filter walls.



Chlorine tank excavation and erosion.



2PR0022720070824

ASHLAND LONG LAKE PARK & CAMPGROUND E 2PR00227 2007/08/24 ARISS, WALTER LAKEVILLE



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
Long Lake Campground
NPDES Permit

August 24, 2007

Mr. Doug Hawkins
Long Lake Campground
8974 Long Lake Drive
Lakeville, Ohio 44638

Dear Mr. Hawkins:

On August 9, 2007, an inspection was made of the wastewater treatment facilities serving the Long Lake Campground located at 8974 Long Lake Drive, Lake Township, Ashland County. At the time of the inspection all major treatment units were operational and appeared to be functioning normally. You were present during the inspection to answer any questions that I had.

It was noted that the sludge return line was not working. The air supply to the return appeared to be on, however no sludge was returning. You indicated that you would consult with Kevin Dean, your certified operator, regarding the return. The color of the water in the aeration tank was a very weak brown. Ideally the water should be a chocolate brown color. This is most likely due to the fact that the plant is still underloaded compared to the design flow. The lack of sludge return could also be adversely affecting the color.

You mentioned that you have plans to expand the sewers within the park. I informed you of the need to apply for a Permit to Install (PTI) for any new sewers throughout the park. An approved PTI is required before any installation of new sewers takes place.

A review of the monthly operating reports for the months of October 2006, through July 2007, indicated numerous violations of the limits contained in your NPDES permit. These violations are most likely caused by the plant being underloaded and should cease once the treatment plant receives increased flow on a regular basis.

Please call me if you have any questions at 419-373-3070.

Sincerely,

Walter Ariss
Environmental Specialist II
Division of Surface Water

Enclosure

pc: Kevin Dean, Dean's Backflow Services w/ enclosure
DSW: NWDO File

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2 PR00227

Facility Name Long Lake Park Expiration Date 7/31/2011
 Facility Address 8974 Long Lake Dr Date 8/9/07 Time 1:45 am/pm
 City Lakeville County Ashland Township Lake
 Name and Address of Owner Doug Hawkins
 Person Contacted Doug Hawkins Owner Phone _____
 Flow: Design -8000 GPD Present 21000-5000 GPD (metered - estimated)
 Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 90° 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: unnamed trib long lake

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

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
 Dechlorination Tablets
 U.V.

Yes No

4. Compliance with NPDES Permit

Periodic Violations Y N Parameters: _____
 Chronic Violations _____ TSS, NH₃

5. Adequate plant safety

6. Operation and Maintenance Service Name Dennis Backflow

Frequency of Visits ?

Facility Name: Long Lake Campground

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	✓	Trash Trap	Pumping Frequency: <i>has not been pumped yet</i>
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	✓	Flow Equalization	<i>ok</i>
Aeration Equipment		Plant Timer ___Y___N?	Cycle Time: ?
	✓	Motor/ Blower Unit <i>running</i>	
Secondary Treatment	✓	Aeration Tank	Color: <i>very weak</i> Adequate Aeration: Y <input checked="" type="checkbox"/> N ___
Final Settling	✓	Clarifier	<i>okay</i>
	✓	Sludge Return	In ___ Out <input checked="" type="checkbox"/> <i>air supply on, but nothing returning</i>
	✓	Surface Skimmer	In <input checked="" type="checkbox"/> Out ___
		Fixed Media Clarifier	
Tertiary Treatment	✓	Surface Sand Filter	<i>Both filters look great</i>
		Polishing Pond	
		Other	
Disinfection		Chlorine Tube Feeder	
		Dechlorination Tube Feeder	
	✓	Ultraviolet (UV)	<i>okay</i>
Flow Metering	✓	Elapsed Pump Time	<i>on pump station by stower house</i>
		Recorder (continuous total)	
Pumps	✓	Raw Wastewater (type) <i>Flow EQ</i>	<i>ok</i>
	✓	Sand Filter Effluent Dosing	<i>ok</i>
Sludge Handling	✓	Aerated Storage Tank	<i>no sludge wasted yet</i>
		Sludge Drying Bed	
Sludge Disposal		Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment		Post Aeration	
		Spray Irrigation	
		Other	