



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  
Landoll's Mohican Castle  
NPDES permit

August 24, 2007

Mr. Jim Landoll  
Landoll's Mohican Castle  
561 Township Road 3352  
Loudonville, Ohio 44842

Dear Mr. Landoll:

On August 9, 2007, an inspection was conducted of the wastewater treatment facilities serving Landoll's Mohican Castle, 561 Township Road 3352, Hanover Township, Ashland County. This inspection was conducted as part of the renewal process for your NPDES discharge permit. Mr. Kevin Dean, your certified operator, was present to answer any questions that I had. At the time of the inspection the plant was operating in a satisfactory condition and a clear final effluent was being discharged. No major concerns were noted regarding the plant operation.

We are in receipt of your self monitoring reports covering the months of April 2007, through July 2007, for the referenced facility. A review indicated that data for the parameters of Odor, Color, and Turbidity is still not being recorded every day as required in the permit. This can be done by any member of your staff on the days when Mr. Dean does not visit the wastewater plant. It is essential that these parameters are monitored every day.

We have received your NPDES renewal application and will begin drafting your permit in the next few weeks. Once the permit is drafted you will receive a copy of the draft permit. Please look this draft over and contact our office with any questions.

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

Sincerely,

Walter Ariss  
Environmental Specialist II  
Division of Surface Water

/llr

Enclosure

pc: DSW-NWDO File  
Kevin Dean, Dean's Backflow Services Inc.

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2PR00171

Facility Name Lindall's Mohican Castle Expiration Date 10/31/07  
 Facility Address 561 TR 3352 Date 8/9/07 Time 12:00am  
 City Landonville County Ashland Township Genover  
 Name and Address of Owner James Lindall  
 Person Contacted Kevin Deans Owner Phone \_\_\_\_\_  
 Flow: Design 13,000 GPD Present 2,000-4,000 GPD (metered - estimated)  
 Trib. Pop. \_\_\_\_\_ (actual - estimated) Weather at time of inspection: Temp 85° Sunny  
 OEPA Personnel Walker Aries 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: Wasson's Old Fork Mohican

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

Yes No

4.  Compliance with NPDES Permit

Periodic Violations Y N Parameters: \_\_\_\_\_  
 Chronic Violations  \_\_\_\_\_ odor, color, turbidity

5.  Adequate plant safety

6.  Operation and Maintenance Service

Name Kevin Deans

Frequency of Visits 3/week

Facility Name: Lordoll's Castle

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	<input checked="" type="checkbox"/>	Trash Trap	Pumping Frequency: ?
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	<input checked="" type="checkbox"/>	Flow Equalization	okay
Aeration Equipment	<input checked="" type="checkbox"/>	Plant Timer <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Cycle Time:
	<input checked="" type="checkbox"/>	Motor/ Blower Unit <i>running</i>	okay
Secondary Treatment	<input checked="" type="checkbox"/>	Aeration Tank	Color: good color Adequate Aeration: Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Final Settling	<input checked="" type="checkbox"/>	Clarifier	very good
	<input checked="" type="checkbox"/>	Sludge Return	In <input checked="" type="checkbox"/> Out <input type="checkbox"/>
	<input checked="" type="checkbox"/>	Surface Skimmer	In <input type="checkbox"/> Out <input checked="" type="checkbox"/>
	<input checked="" type="checkbox"/>	Fixed Media Clarifier	looks okay
Tertiary Treatment	<input checked="" type="checkbox"/>	Surface Sand Filter	both filters very clean
		Polishing Pond	
		Other	
Disinfection	<input checked="" type="checkbox"/>	Chlorine Tube Feeder	okay - both have tablets
	<input checked="" type="checkbox"/>	Dechlorination Tube Feeder	okay - both have tablets
		Ultraviolet (UV)	
Flow Metering	<input checked="" type="checkbox"/>	Elapsed Pump Time	on dosing station
		Recorder (continuous total)	
Pumps	<input checked="" type="checkbox"/>	Raw Wastewater (type) <i>Flow EQ pumps</i>	ok
	<input checked="" type="checkbox"/>	Sand Filter Effluent Dosing	ok
Sludge Handling	<input checked="" type="checkbox"/>	Aerated Storage Tank	okay
		Sludge Drying Bed	
Sludge Disposal	<input checked="" type="checkbox"/>	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	<input checked="" type="checkbox"/>	Post Aeration	ok
		Spray Irrigation	
		Other	