



State of Ohio Environmental Protection Agency

Northwest District Office

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Bowling Green, OH 43402-9398

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www.epa.state.oh.us

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

RE: Hancock County
City of Findlay
NPDES Permit

June 22, 2007

Mr. Randy Greeno, Superintendent
Water Pollution Control Center
City of Findlay
1201 South River Road
Findlay, Ohio 45840

Dear Mr. Greeno:

On April 24, 2007, a compliance inspection was made of the Findlay wastewater treatment facility and a "reconnaissance" inspection was made of the City's approved pretreatment program. In addition, Ohio EPA representative Dan Gill completed a checklist created to evaluate the City's progress with their long term control plan and compliance with the nine minimum controls. His findings were addressed in his May 18, 2007 letter.

Compliance Inspection

The compliance inspection consisted of a question and answer session followed by a walk-through of the plant. Overall, the plant appeared to be operating well. At the time of inspection, all major components of the wastewater treatment system were in service. The grounds were well-maintained. Three of the four oxidation ditches were in operation. Four of the five clarifiers were online. Effluent from the clarifiers was clear.

We are in receipt of your self-monitoring reports covering the months of August 2005 through May 2007 for the referenced facility. Our review indicates a violation of the conditions of your NPDES permit. The specific instances of noncompliance are as follows:

Reporting Period	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
May 2007	001	00552	Oil and Grease, Hexane	1D Conc	10	13.59	5/8/2007

You called and reported this violation and indicated that it may have been an error in testing. A retest could not be completed because the sample had already been discarded.

The city has completed a significant amount of testing for mercury out in the system after having several high values. You indicated that you have traced the high levels to several office buildings that contain dentists' offices. You have talked to these dentists, did inspections of their offices, and continue to work with them to lower their mercury levels.

Mr. Randy Greeno
June 22, 2007
Page Two

Pretreatment Reconnaissance Inspection

The pretreatment reconnaissance inspection is an abbreviated inspection used only for select approved programs with a history of compliance with pretreatment regulations. The inspection consisted of an interview utilizing a checklist to evaluate the administration of and compliance with pretreatment regulations. Our comments and recommendations are as follows:

The significant industrial user list has changed with the loss of Findlay Plating. The treatment plant does accept septage, but the haulers have to be licensed through the health department and the treatment plant. The hauler must submit a manifest and a sample is collected from each load.

All industrial user inspections and sampling requirements are being carried out. Your implementation of Findlay's approved pretreatment program remains satisfactory.

The facility's NPDES permit will expire on October 31, 2007. We have received your complete application and completed the facility report as part of this inspection. We are currently working on the fact sheet for this facility and will be drafting your permit in the near future. Please review your draft permit when you receive it as there is a 30 day comment period.

Our completed inspection forms are enclosed for you review. If you have any questions, please contact me at 419-373-3019.

Yours truly,



Michelle Sharp
Environmental Specialist II
Division of Surface Water

/lb

pc: ~~NWDO File with enclosure~~
Steve Orenchuk, CO, DSW, w/enclosure

NPDES COMPLIANCE INSPECTION REPORT

Section A: National Data System Coding

Permit #	NPDES	Yr/Mo/Day	Inspection Type	Inspector	Fac Type
<u>2PD00008*OD</u>	<u>OH0025135</u>	<u>2007/04/24</u>	<u>S</u>	<u>S</u>	<u>1</u>

Section B: Facility Data

Name and Location of Facility Inspected City of Findlay Water Pollution Control Center 1201 South River Road Findlay, Ohio 45840	Entry Time	Permit Effective Date
	9:30 AM	November 1, 2005
	Exit Time	Permit Expiration Date
	12:00 PM	October 31, 2007

Name(s) and Title(s) of On-Site Representative(s) Randy Greeno, Superintendent	Phone Number(s) (419) 424-7187
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Name, Address and Title of Responsible Official Randy Greeno, Superintendent	Phone Number (419) 424-7187
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Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>S</u> Pretreatment
<u>S</u> Records/Reports	<u>S</u> Laboratory	<u>S</u> Compliance Schedules
<u>S</u> Operations & Maintenance	<u>S</u> Effluent/Receiving Waters	<u>S</u> Self-Monitoring Program
<u>S</u> Facility Site Review	<u>S</u> Sludge Storage/Disposal	<u> </u> Other
<u>S</u> Collection System		

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

The plant is well run and maintained. The City continues to take steps to find the source of high levels of mercury in the system that are making it to the plant. Only one violation was reported during the period of August 2005 and May 2007. This value was thought to be erroneous, but the sample was discarded before a retest could be completed.

Michelle M Sharp
 Michelle M. Sharp

6/19/07
 Date

Ohio EPA, Northwest
 District Office

Name(s) and Signature(s) of Inspector(s)

Elizabeth A. Wick, P.E.
 Elizabeth A. Wick, P.E.

6/19/07
 Date

Ohio EPA, Northwest
 District Office

Name and Signature of Reviewer

Sections E thru K: Complete on all inspections as appropriate. N/A - Not Applicable N/E - Not Evaluated

Section E: Permit Verification

	Yes	No	N/A	N/E
INSPECTION OBSERVATIONS VERIFY THE PERMIT				
(a) CORRECT NAME AND MAILING ADDRESS OF PERMITTEE	<u>X</u>	___	___	___
(b) CORRECT NAME AND LOCATION OF RECEIVING WATERS	<u>X</u>	___	___	___
(c) PRODUCT(S) AND PRODUCTION RATES CONFORM WITH PERMIT APPLICATION (INDUSTRIES)	___	___	<u>X</u>	___
(d) FLOWS AND LOADINGS CONFORM WITH NPDES PERMIT PERMIT APPLICATION/BRIEFING MEMO	<u>X</u>	___	___	___
(e) TREAT PROCESSES ARE AS DESCRIBED IN PERMIT APPLICATION/BRIEFING MEMO	___	<u>X</u>	___	___
(f) NEW TREATMENT PROCESS(ES) ADDED SINCE LAST INSPECTION	<u>X</u>	___	___	___
(g) NOTIFICATION GIVEN TO STATE OF NEW, DIFFERENT OR INCREASED DISCHARGES	___	___	<u>X</u>	___
(h) ALL DISCHARGES ARE PERMITTED	<u>X</u>	___	___	___
(i) NUMBER AND LOCATION OF DISCHARGE POINTS ARE AS DESCRIBED IN PERMIT	<u>X</u>	___	___	___

COMMENTS/STATUS:

Section F: Compliance Schedules/Violations

	Yes	No	N/A	N/E
(a) ANY SIGNIFICANT VIOLATIONS SINCE THE LAST INSPECTION	___	<u>X</u>	___	___
(b) PERMITTEE IS TAKING ACTIONS TO RESOLVE VIOLATIONS	___	___	<u>X</u>	___
(c) PERMITTEE HAS COMPLIANCE SCHEDULE	<u>X</u>	___	___	___
(d) COMPLIANCE SCHEDULE CONTAINED IN <u>Permit</u>	___	___	___	___
(e) PERMITTEE IS MEETING COMPLIANCE SCHEDULE	<u>X</u>	___	___	___

COMMENTS/STATUS:

Section G: Operation and Maintenance

TREATMENT WORKS:

	Yes	No	N/A	N/E
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED				
(a) STANDBY POWER AVAILABLE GENERATOR <u> </u> DUAL FEED <u>X</u>	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(b) ADEQUATE ALARM SYSTEM AVAILABLE FOR POWER OR EQUIPMENT FAILURES	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(c) ALL TREATMENT UNITS IN SERVICE OTHER THAN BACKUP UNITS	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(d) SUFFICIENT OPERATING STAFF PROVIDED # SHIFTS <u>3</u> DAYS/WEEK <u>7</u>	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(e) OPERATOR HOLDS UNEXPIRED LICENSE OF CLASS REQUIRED BY PERMIT CLASS: <u>IV</u>	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(f) ROUTINE AND PREVENTIVE MAINTENANCE SCHEDULED/PERFORMED ON TIME	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(g) ANY MAJOR EQUIPMENT BREAKDOWN SINCE LAST INSPECTION	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(h) OPERATION AND MAINTENANCE MANUAL PROVIDED AND MAINTAINED	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(i) ANY PLANT BYPASSES SINCE LAST INSPECTION	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
(j) REGULATORY AGENCY NOTIFIED OF BYPASSES <u>X</u> ON MORS <u> </u> 800 NO.	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
(k) ANY HYDRAULIC AND/OR ORGANIC OVERLOADS EXPERIENCED SINCE LAST INSPECTION	<u> </u>	<u>X</u>	<u> </u>	<u> </u>

COMMENTS/STATUS:

(a) Trying to get a generator for the plant. EMA money was used to buy a portable generator.

COLLECTION SYSTEM:

	Yes	No	N/A	N/E
(a) PERCENT COMBINED SYSTEM <u>10 - 15%</u>				
(b) ANY COLLECTION SYSTEM OVERFLOWS SINCE LAST INSPECTION (CSO <u>X</u> SSO <u> </u>)	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(c) REGULATORY AGENCY NOTIFIED OF OVERFLOWS (SSOs)	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(d) CSO O AND M PLAN PROVIDED AND IMPLEMENTED	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
(e) CSOs MONITORED AND REPORTED IN ACCORDANCE WITH PERMIT	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(f) PORTABLE PUMPS USED TO RELIEVE SYSTEM	<u> </u>	<u>X</u>	<u> </u>	<u> </u>
(g) LIFT STATION ALARM SYSTEMS PROVIDED AND MAINTAINED	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(h) ARE LIFT STATIONS EQUIPPED WITH PERMANENT STANDBY POWER OR EQUIVALENT	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(i) IS THERE AN INFLOW INFILTRATION PROBLEM (SEPARATE SEWER SYSTEM) OR WERE THERE ANY MAJOR REPAIRS TO COLLECTION SYSTEM SINCE LAST INSPECTION	<u> </u>	<u>X</u>	<u> </u>	<u> </u>
(j) ANY COMPLAINTS RECEIVED SINCE LAST INSPECTION OF BASEMENT FLOODING	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(k) ARE ANY PORTIONS OF THE SEWER SYSTEM AT OR NEAR CAPACITY	<u> </u>	<u>X</u>	<u> </u>	<u> </u>

COMMENTS/STATUS:

(i) Continuing to separate sewers.

(j) The City experienced 4 flood in 3 months.

Section H: Sludge Management

(a) SLUDGE MANAGEMENT PLAN (SMP)	SUBMITTED DATE _____	APPROVAL # _____	NOT SUBMITTED _____	N/A _____	X _____
			Yes	No	N/A
(b) SLUDGE MANAGEMENT PLAN CURRENT			_____	_____	X _____
(c) SLUDGE ADEQUATELY DISPOSED (METHOD: <u>Haul to Landfill</u>)			X _____	_____	_____
(d) IF SLUDGE IS INCINERATED, WHERE IS ASH DISPOSED OF _____			_____	_____	_____
(e) IS SLUDGE DISPOSAL CONTRACTED (NAME: _____)			_____	X _____	_____
(f) HAS AMOUNT OF SLUDGE GENERATED CHANGED SIGNIFICANTLY SINCE LAST INSPECTION			_____	X _____	_____
(g) ADEQUATE SLUDGE STORAGE PROVIDED AT PLANT			X _____	_____	_____
(h) LAND APPLICATION SITES MONITORED AND INSPECTED PER SMP			_____	_____	X _____
(i) RECORDS KEPT IN ACCORDANCE WITH STATE AND FEDERAL LAW			X _____	_____	_____
(j) ANY COMPLAINTS RECEIVED IN LAST YEAR REGARDING SLUDGE			_____	X _____	_____
(k) IS SLUDGE ADEQUATELY PROCESSED (DIGESTION, DEWATERING, PATHOGEN CONTROL)			X _____	_____	_____

COMMENTS/STATUS:

(g) They don't store sludge on site. They use three dump trucks to take pressed sludge to the landfill.

(k) Sludge press to Hancock County Landfill.

Section I: Self-Monitoring Program

Part 1. Flow measurement

	Yes	No	N/A	N/E
(a) PRIMARY FLOW MEASURING DEVICE PROPERLY OPERATED & MAINTAINED	X _____	_____	_____	_____
TYPE OF DEVICE: _____ ULTRASONIC & PARSHALL FLUME _____ ULTRASONIC & WEIR _____ WEIR _____ CALCULATED FROM INFLUENT X OTHER (Specify <u>Magmeter</u>)				
(b) CALIBRATION FREQUENCY ADEQUATE (Date of last calibration <u>12-06</u>)	X _____	_____	_____	_____
(c) SECONDARY INSTRUMENTS (totalizers, recorders, etc.) PROPERLY OPERATED AND MAINTAINED	X _____	_____	_____	_____
(d) FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGES OF FLOWS	X _____	_____	_____	_____
(e) ACTUAL FLOW DISCHARGED IS MEASURED	X _____	_____	_____	_____
(f) FLOW MEASURING EQUIPMENT INSPECTION FREQUENCY: X DAILY _____ WEEKLY _____ MONTHLY _____ OTHER				

COMMENTS/STATUS:

a) 601 - electronic magnetic flow meter used for flow reporting

b) Twice per year

Part 2. Sampling

	Yes	No	N/A	N/E
(a) SAMPLING LOCATION(S) ARE AS SPECIFIED BY PERMIT	<u>X</u>	___	___	___
(b) PARAMETERS AND SAMPLING FREQUENCY AGREE WITH PERMIT	<u>X</u>	___	___	___
(c) PERMITTEE USES REQUIRED SAMPLING METHOD	<u>X</u>	___	___	___
(d) SAMPLE COLLECTION PROCEDURES ARE ADEQUATE	<u>X</u>	___	___	___
(i) SAMPLES REFRIGERATED DURING COMPOSITING	<u>X</u>	___	___	___
(ii) PROPER PRESERVATION TECHNIQUES USED	<u>X</u>	___	___	___
(iii) CONTAINERS AND SAMPLE HOLDING TIMES PRIOR TO ANALYSES CONFORM WITH 40 CFR 136.3	<u>X</u>	___	___	___
(e) MONITORING RECORDS (e.g., flow, pH, D.O., etc.) MAINTAINED FOR A MINIMUM OF THREE YEARS INCLUDING ALL ORIGINAL STRIP CHART RECORDINGS (e.g., continuous monitoring instrumentation, calibration and maintenance records)	<u>X</u>	___	___	___
(f) ADEQUATE RECORDS MAINTAINED OF SAMPLING DATE, TIME, EXACT LOCATION, ETC.	<u>X</u>	___	___	___

COMMENTS/STATUS:

(d)(i) BOD5 refridgerated, preservatives used for metals

Part 3. Laboratory

	Yes	No	N/A	N/E
GENERAL				
(a) EPA APPROVED ANALYTICAL TESTING PROCEDURES USED (40 CFR 136.3)	<u>X</u>	___	___	___
(b) IF ALTERNATE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED	___	___	<u>X</u>	___
(c) ANALYSES BEING PERFORMED MORE FREQUENTLY THAN REQUIRED BY PERMIT	<u>X</u>	___	___	___
(d) IF (c) IS YES, ARE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT	<u>X</u>	___	___	___
(e) COMMERCIAL LABORATORY USED	<u>X</u>	___	___	___
(1) PARAMETERS ANALYZED BY COMMERCIAL LAB				
<u>Alloway - Metals</u>				
<u>Ginosko - Low level mercury</u>				

(2) LAB NAME: Alloway and Ginosko

QUALITY CONTROL/QUALITY ASSURANCE

(f) QUALITY ASSURANCE MANUAL PROVIDED AND MAINTAINED	<u>X</u>	___	___	___
(g) SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT	<u>X</u>	___	___	___
(h) ADEQUATE RECORDS MAINTAINED	<u>X</u>	___	___	___
(i) RESULTS OF LATEST USEPA QUALITY ASSURANCE PERFORMANCE SAMPLING PROGRAM DATE : <u>2006</u> <u>X</u> SATISFACTORY ___ MARGINAL ___ UNSATISFACTORY				

COMMENTS/STATUS:

Section J: Effluent/Receiving Water Observations

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	VISIBLE FLOAT SOLIDS	COLOR	OTHER
001	None	None	Clear	White	None	None	

COMMENTS/STATUS:

Section K: Multimedia Observations

	Yes	No	N/A	N/E
(a) ARE THERE INDICATIONS OF SLOPPY HOUSEKEEPING OR POOR MAINTENANCE IN WORK AND STORAGE AREAS OR LABORATORIES	___	<u>X</u>	___	___
(b) DO YOU NOTICE STAINING OR DISCOLORATION OF SOILS, PAVEMENT, OR FLOORS	___	<u>X</u>	___	___
(c) DO YOU NOTICE DISTRESSED (UNHEALTHY, DISCOLORED, DEAD) VEGETATION	___	<u>X</u>	___	___
(d) DO YOU SEE UNIDENTIFIED DARK SMOKE OR DUSTCLOUDS COMING FROM SOURCES OTHER THAN SMOKESTACKS	___	<u>X</u>	___	___
(e) DO YOU NOTICE ANY UNUSUAL ODORS OR STRONG CHEMICAL SMELLS	___	<u>X</u>	___	___
(f) DO YOU SEE ANY OPEN OR UNMARKED DRUMS, UNSECURED LIQUIDS, OR DAMAGED CONTAINMENT FACILITIES?	___	<u>X</u>	___	___

IF ANY OF THE ABOVE ARE OBSERVED, ASK THE FOLLOWING QUESTIONS:

- (1) WHAT IS THE CAUSE OF THE CONDITION?
- (2) IS THE OBSERVED CONDITION OR SOURCE A WASTE PRODUCT?
- (3) WHERE IS THE SUSPECTED CONTAMINANT NORMALLY DISPOSED?
- (4) IS THIS DISPOSAL PERMITTED?
- (5) HOW LONG HAS THE CONDITION EXISTED AND WHEN DID IT BEGIN?

COMMENTS/STATUS:

F. GUIDE - VISUAL OBSERVATION - UNIT PROCESS

Form Approved

OMB No. 158-R0035

RATING CODES: S = Satisfactory; U = Unsatisfactory; M = Marginal; IN = In Operation; OUT = Out of Operation

CONDITION OR APPEARANCE		RATING	COMMENTS
General	Grounds	S	
	Buildings	S	
	Potable Water Supply Protection		
	Safety Features	S	
	Bypasses		
	Stormwater Overflows		
	Alternate Power Source	S	Duel feed
Preliminary	Maintenance of Collection Systems	S	
	Pump Station	IN	6 Pumps, variable speed (4 operational) Replacing all 6.
	Ventilation		
	Bar Screen		
	Disposal of Screenings		
	Comminutor	IN	
	Grit Chamber		
	Disposal of Grit		
Primary	Settling Tanks		
	Scum Removal		
	Sludge Removal		
	Effluent		
Sludge Disposal	Digesters	IN	4 Units, aerobic, three online used to thicken sludge
	Temperature and pH		
	Gas Production		
	Heating Equipment		
	Sludge Pumps		
	Drying Beds		
	Vacuum Filter		
	Disposal of Sludge	S	Landfill
Sludge Press	OUT	4 units	
Other	Flow Meter and Recorder	IN	Influent meter flow reported
	Records	S	
	Lab Controls	S	
	Chemical Treatment	S	Ferrous Chloride for oxidation ditches, polymer for sludge
Secondary-Tertiary List items as	Oxidation Ditches	IN	3 of 4 units in service
	Clarifiers	IN	4 of 5 in service
Disinfection	Effluent	S	Clear
	Disinfection System	IN	UV
	Effective Dosage		
	Contact Time		
	Contact Tank		
	Dechlorination		

OHIO EPA PRETREATMENT RECONNAISSANCE INSPECTIONS CRITERIA & PROCEDURES

A Pretreatment Reconnaissance Inspection(RI) can be done as an alternative to the Pretreatment Compliance Inspection(PCI) at POTWs with Approved Pretreatment Programs. The district inspector determines if a RI can be performed based on the following criteria:

1. The entity has 50 or less significant industrial users.
2. The approved program has not been in RNC/SNC for the last two years.
3. The entity does not have active Findings and Orders, an AGO case, or a USEPA enforcement action pending.
4. The entity has not had any effluent metal violations and has not been in SNC for any other effluent parameters since the last inspection.
5. Sludge metal concentrations have been below 503 "clean" criteria (Table 3) since the last inspection.
6. The current Pretreatment Coordinator has been in the position for at least two years.
7. During a five year NPDES permit cycle, no more than 2 RIs can be performed and must be alternated between the entity's PCIs and audits. An RI can not be conducted during the first three years following initial approval of the POTW's pretreatment program.

RI Procedures:

1. Complete Pre-Inspection Worksheet prior to inspection.
2. Complete RI checklist, WENDB/RNC form, and USEPA 3560 form.
3. Send follow-up letter to the POTW.
4. Transmit copies of the completed inspection checklist, WENDB/RNC form, USEPA 3560 form, and follow-up letter to Central Office (Pretreatment Unit).

Reconnaissance Inspection Checklist

Facility: *Galion WWTP*

NPDES Permit Number: *2PD00030*

Inspector(s): *Michelle Sharp*

Date of Inspection: *November 28, 2006*

Facility Representative(s): *Tim Parks, WWTP Superintendent*

* Explain all "Yes" answers on following sheets

	Question	Yes*	No	N/A
1	Do you have any pending program modifications?		X	
2	Are you planning to submit any program modifications in the next year?		X	
3	Have there been any changes to your SIU list?	X		
4	Were any SIUs not inspected or sampled at least once in the past year?		X	
5	Has an IU been placed on a compliance schedule in the past year?		X	
6	Has any IU been subject to a Show Cause hearing, Permit Revocation, Filing of a Civil or Criminal suit, or subject to termination of service in the past year?		X	
7	Does the WWTP accept hauled wastes, including septage?	X		
8	Has the WWTP or collection system experienced any of the following in the past year?			
8a	Interference		X	
8b	Pass through		X	
8c	Fire or explosions		X	
8d	Corrosive structural damage		X	
8e	Flow obstructions		X	
8f	Heat problems		X	
8g	Oil and grease interference		X	
8h	Toxic fumes		X	
8i	Illicit dumping of hauled waste		X	
8j	Excessive flow rates or pollutant concentrations		X	
8k	Any worker health and safety issues		X	
8l	Other (specify)		X	
9	Are you having any problems implementing your MIPP?		X	

Further information for "Yes" responses

1	Brief description and status	
2	Planned modification; reason	
3	Changes; why made	<i>Lost Findlay Plating.</i>
4	Explain why	
5	Brief history; current status	
6	Brief history; current status	
7	How does WWTP control?	<i>Licensed through health department and WWTP. Haulers must submit a manifest and the treatment plant collects a sample.</i>
8	Describe event, WWTP response	
9	Describe problem, planned response	

WENDB AND RNC WORKSHEET

PCI Checklist

FACILITY INFORMATION	
Name City of Findlay WWTP	
OH Number OH0025135	NPDES Number 2PD00008
Date of Inspection 4/24/2007	

I. WENDB DATA ENTRY WORKSHEET

INSTRUCTIONS: Enter the data provided by the specific checklist questions that are referenced.

	Data	Checklist Reference	PCS Code
Number of SIUs	8	II.B.2.a	SIUS
Number of CIUs	6	II.B.2.a	CIUS
Number of SIUs without Control Mechanisms	0	II.C.1.b	NOCM
Number of SIUs not inspected or sampled	0	II.E.2	NOIN
Number of SIUs in SNC with standards or reporting	0		PSNC
Number of SIUs in SNC with self-monitoring	0		MSNC
Number of SIUs in SNC with self-monitoring and not inspected or sampled	0		SNIN

II. RNC/SNC WORKSHEET

INSTRUCTIONS: Place a check in the appropriate box on the left if the CA is found to be in RNC or SNC

	RNC	Level	Reference
Failure to enforce against pass through and/or interference	<input type="checkbox"/>	I	II.F.6.b&9
Failure to submit required reports within 30 days	<input type="checkbox"/>	I	
Failure to meet compliance schedule milestone date within 90 days	<input type="checkbox"/>	I	
Failure to issue/reissue control mechanisms to 90% of SIUs within 6 months	<input type="checkbox"/>	II	II.C.1.b&2
Failure to inspect or sample 80% of SIUs within the last 12 months	<input type="checkbox"/>	II	II.E.2
Failure to enforce pretreatment standards and reporting requirements	<input type="checkbox"/>	II	II.F.2
Other (specify)	<input type="checkbox"/>	II	
SNC			
Control Authority in SNC for violation of any Level I criterion	<input type="checkbox"/>		
Control Authority in SNC for violation of two or more Level II criterion	<input type="checkbox"/>		