



State of Ohio Environmental Protection Agency

Northwest District Office

347 North Dunbridge Road
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: Marion County
Richland Road WWTP
NPDES Permit

January 17, 2008

Marion County Commissioners
222 West Center Street
Marion, Ohio 43302

Dear Commissioners:

On December 6, 2007, Jason Ko conducted a Compliance Evaluation Inspection of the Richland Road Wastewater Treatment Plant (WWTP). Mr. Craig Woodrum and Mr. Roger Dietrich were present and provided information regarding the operation of the facility.

At the time of the inspection, all major treatment components were in service. The mixed liquor in the Orbal aeration tank was brown and the plant effluent was visually clear. We did not collect plant effluent samples to determine the water quality of the discharge during the visit.

Please note that your National Pollutant Discharge Elimination System permit became effective on August 1, 2006 and will expire on January 31, 2011. The permit Schedule of Compliance requires the County to be in compliance with the final effluent limits by August 1, 2009. Per your letter dated June 19, 2007, biological phosphorus removal is the preferred method for meeting final effluent limits.

The US EPA DMR-QA (2007) study indicated that all test parameters were rated acceptable except for phosphorus. Please note that your continued participation in this Quality Assurance program is important to verify the accuracy and reliability of your monthly monitoring data.

Our review of your self-monitoring reports (1/1/2006 to 10/30/2007) for this WWTP showed one effluent violation. Please refer to the enclosed violation table. A copy of our completed inspection report is also included for your review. If you have any questions, please call Mr. Ko at 419-373-3021.

Yours truly,

Allen L. Rupp, P.E.
District Engineer/Section Manager
Division of Surface Water

JK/csl

pc: Roger Dietrich, Marion County Sanitary Engineer
Craig Woodrum, Superintendent
DSW, NWDO File

NPDES COMPLIANCE INSPECTION REPORT

Section A: National Data System Coding

Permit #	NPDES	Yr/Mo/Day	Inspection Type	Inspector	FacType
<u>2PJ00002</u>	<u>OH 0058157</u>	<u>2007/12/06</u>	<u>C</u>	<u>S</u>	<u>I</u>

Section B: Facility Data

Name and Location of Facility Inspected Richland Road WWTP 2160 Richland Rd Marion, Ohio 43302	Entry Time 9:30 a.m.	Permit Effective Date 08/01/2006
	Exit Time 10:30 a.m.	Permit Expiration Date 01/31/2011

Name(s) and Title(s) of On-Site Representative(s)

Phone Number(s)

Mr. Craig Woodrum, Superintendent
 Mr. Roger Dietrich, County Sanitary Engineer

740-389-1526
 740-223-4130

Name, Address and Title of Responsible Official

Phone Number

Marion County Commissioners
 222 W. Center Street
 Marion, OH 43302

740-223-4130

Section C: Areas Evaluated During Inspection

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

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

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

- * DMR-QA Study #27 indicated that all test parameters were rated acceptable except for Phosphorus
- * NPDES permit was effective on 8/1/2006 and will expire on 1/31/2011
- * Schedule of Compliance (Part I.C) of the NPDES permit requires Marion County to be in compliance with the final effluent limits by 8/1/2009
- * The biological phosphorus removal is the preferred treatment method and the chemical addition will be used if phosphorus limits cannot be consistently met by the biological method



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

1/17/08

Ohio EPA, Northwest
 Date District Office


 Elizabeth A. Wick, P.E.
 Name and Signature of Reviewer

12/18/07

Ohio EPA, Northwest
 Date District Office

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>NPDES</u>	___	___	___	___
(e) PERMITTEE IS MEETING COMPLIANCE SCHEDULE	<u>X</u>	___	___	___

COMMENTS/STATUS:

(d) In compliance with the final effluent limits by 8/1/2009

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>X</u> DUAL FEED <u> </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>1</u> DAYS/WEEK <u>5</u>	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(e) OPERATOR HOLDS UNEXPIRED LICENSE OF CLASS REQUIRED BY PERMIT CLASS: <u>III</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> </u>	<u>X</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>X</u>	<u> </u>	<u> </u>
(j) REGULATORY AGENCY NOTIFIED OF BYPASSES <u> </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>X</u>	<u> </u>	<u> </u>	<u> </u>

COLLECTION SYSTEM:

	Yes	No	N/A	N/E
(a) PERCENT COMBINED SYSTEM <u>0</u> %				
(b) ANY COLLECTION SYSTEM OVERFLOWS SINCE LAST INSPECTION (CSO <u> </u> SSO <u> </u>)	<u> </u>	<u> </u>	<u>X</u>	<u> </u>
(c) REGULATORY AGENCY NOTIFIED OF OVERFLOWS (SSOs)	<u> </u>	<u> </u>	<u>X</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> </u>	<u> </u>	<u>X</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>X</u>	<u> </u>	<u> </u>	<u> </u>
(j) ANY COMPLAINTS RECEIVED SINCE LAST INSPECTION OF BASEMENT FLOODING	<u> </u>	<u>X</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:

Treatment Works:

- (a) Standby generator- tested monthly
- (d) WWTP is staffed part-time on weekend.

Section H: Sludge Management

(a) SLUDGE MANAGEMENT PLAN (SMP)
SUBMITTED DATE: 1/14/07 APPROVAL # 36-379-pw NOT SUBMITTED N/A

	Yes	No	N/A	N/E
(b) SLUDGE MANAGEMENT PLAN CURRENT	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(c) SLUDGE ADEQUATELY DISPOSED (METHOD: <u>Land application</u>)	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(d) IF SLUDGE IS INCINERATED, WHERE IS ASH DISPOSED OF <u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
(e) IS SLUDGE DISPOSAL CONTRACTED (NAME: <u> </u>)	<u> </u>	<u>X</u>	<u> </u>	<u> </u>
(f) HAS AMOUNT OF SLUDGE GENERATED CHANGED SIGNIFICANTLY SINCE LAST INSPECTION	<u> </u>	<u>X</u>	<u> </u>	<u> </u>
(g) ADEQUATE SLUDGE STORAGE PROVIDED AT PLANT	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(h) LAND APPLICATION SITES MONITORED AND INSPECTED PER SMP	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(i) RECORDS KEPT IN ACCORDANCE WITH STATE AND FEDERAL LAW	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(j) ANY COMPLAINTS RECEIVED IN LAST YEAR REGARDING SLUDGE	<u> </u>	<u>X</u>	<u> </u>	<u> </u>
(k) IS SLUDGE ADEQUATELY PROCESSED (DIGESTION, DEWATERING, PATHOGEN CONTROL)	<u>X</u>	<u> </u>	<u> </u>	<u> </u>

COMMENTS/STATUS:

Section I: Self-Monitoring Program

Part 1. Flow measurement

	Yes	No	N/A	N/E
(a) PRIMARY FLOW MEASURING DEVICE PROPERLY OPERATED & MAINTAINED <u>X</u>	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
TYPE OF DEVICE: <u>X</u> ULTRASONIC & PARSHALL FLUME <u> </u> ULTRASONIC & WEIR <u> </u> WEIR <u> </u> CALCULATED FROM INFLUENT <u> </u> OTHER (Specify <u> </u>)				
(b) CALIBRATION FREQUENCY ADEQUATE (Date of last calibration <u>11/2007</u>) <u>X</u>	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(c) SECONDARY INSTRUMENTS (totalizers, recorders, etc.) PROPERLY OPERATED AND MAINTAINED	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(d) FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGES OF FLOWS	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(e) ACTUAL FLOW DISCHARGED IS MEASURED	<u>X</u>	<u> </u>	<u> </u>	<u> </u>
(f) FLOW MEASURING EQUIPMENT INSPECTION FREQUENCY: <u>X</u> DAILY <u> </u> WEEKLY <u> </u> MONTHLY <u> </u> OTHER				

COMMENTS/STATUS:

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:

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>Ginosko -oil & grease, Nitrates & Nitrite, metals, TKN & Sludge</u> <u>Alloway - Bioassay</u>				
(2) LAB NAME: _____				
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>2007</u> <u>X</u> SATISFACTORY ___ MARGINAL ___ UNSATISFACTORY				

COMMENTS/STATUS:

DMR-QA Study #27 indicated all test parameters were rated acceptable except for phosphorus.

Section J: Effluent/Receiving Water Observations

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	VISIBLE FLOAT SOLIDS	COLOR	OTHER
001	-	-	-	-	-	Clear	-

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. 4710-0047

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

CONDITION OR APPEARANCE		RATING	COMMENTS
General	Ground	S	
	Buildings	S	
	Potable Water Supply Protection	S	
	Safety Features	S	
	Bypasses (self-ed)	---	
	Stormwater overflows	---	
	Alternate Power Source	S	Standby generator-tested monthly (For screw pumps only)
Preliminary	Maintenance of Collection Systems	S	
	Pump Station	IN	3 screw pumps; 1 running
	Ventilation	---	
	Bar Screen	IN	1 mechanical; 1 standby
	Disposal of Screenings	S	Landfill
	Comminutor	---	
	Grit Chamber	IN	
	Disposal of Grit	S	Landfill
	Cyclone Grit Separator	IN	1 unit
Primary	Settling Tanks	---	
	Scum Removal	---	
	Sludge Removal	---	
	Effluent	---	
Sludge Disposal	Digesters (Acrobic)	IN	2 Units
	Temperature and pH	---	
	Gas Production	---	
	Heating Equipment	---	
	Sludge Pumps	IN	2 RAS & WAS
	Sludge storage building	IN	
	Sludge Thickener	IN	2 units
	Disposal of Sludge	S	land application
	Sludge Press	IN	1 unit and running (from November to April)
Sludge Blowers	IN	3 units and 1 running	
Other	Flow Meter and Recorder	IN	
	Records	S	
	Lab Controls	N	
	Chemical Treatment	N/A	
Secondary-Tertiary List items as	Orbal Aeration	IN	1 units; brown
	Secondary Settling	IN	2 units; all in use
Disinfection	Effluent	S	Clear
	Disinfection System	OUT	
	Effective Dosage	OUT	Flow paced
	Contact Time	OUT	
	Contact Tank	IN	
	Dechlorination	OUT	

[Get New Data](#)

Permit No	Reporting Period	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
2PJ00002*FD	May 2007	001	31616	Fecal Coliform			AK	5/7/2007