



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: Ottawa County
Camp Sabroske
NPDES Permit

September 22, 2008

Roger Minier
5319 N. Bodi
Oak Harbor, OH 43449

Dear Mr. Minier:

On August 26, 2008, an inspection was made of the wastewater treatment facilities serving Camp Sabroske in conjunction with the renewal of the NPDES Permit, which expires October 31st. I was disappointed to find the plant completely out of operation and its contents septic. It was obvious that this facility has not recently been attended to. The plant must be returned to operation and properly operated immediately. A review of your NPDES monthly discharge monitoring reports since 2005, indicate chronic violations. A copy of the violations is enclosed for your review. Keep in mind monitoring is only required on a quarterly basis during the summer months, which is May 1st through October 31st.

The permit also contains a schedule of compliance which required plant improvements in the form of surface sand filters and disinfection/dechlorination equipment by July 5, 2005. Camp Sabroske has been in violation of this NPDES permit condition. A copy of the permit is enclosed for your review.

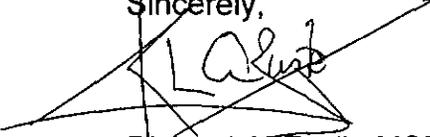
Lastly, as indicated above, the current permit expires on October 31st, 2008, and we have yet to receive an application for renewal. Please find enclosed a copy of a letter dated December 31, 2007 requesting the submittal of a renewal application. This was to be submitted at least six months prior to the expiration date. Mr. Phil Anderson, your consultant was contacted regarding this requirement.

The above noted items of noncompliance are all serious violations and left unaddressed can lead to enforcement action from this agency. During our subsequent telephone conversation you indicated your desire to bring the camp into full compliance with all NPDES requirements. When I receive the renewal application, I will once again contact you to review all necessary actions.

Mr. Roger Minier
September 22, 2008
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Enclosed is my inspection report. If you have any questions, please feel free to call me at (419) 373-3020, or email at rick.zuzik@epa.state.oh.us.

Sincerely,



Richard A. Zuzik, MSE
Division of Surface Water

/csi

pc: Ottawa County Health Dept.
(DSW, NWDO file)

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2P000197

Facility Name Camp Sabroske Expiration Date 10-31-08

Facility Address 4405 N. Toussaint Rd Date 8-26-08 Time 1:05 am pm

City - County Ottawa Township Carroll

Name and Address of Owner Camp Sabroske, Roger Miner, Trustee 5319 N. Bodi, Oak Harbor

Person Contacted none Owner Phone (419) 372-7033(w)

Flow: Design 4000 GPD Present unknown GPD (metered - estimated)

Trib. Pop. 30-40 M-F (actual - estimated) Weather at time of inspection: Temp 80° Clear

OEPA Personnel Rick Zuzik District NWDO

1. Plant Effluent - Mark Severity No. Plant Septic - No Discharge

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

2. Effect of effluent on Receiving Stream Name: Packer Creek - No discharge at time of visit

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 N/A

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) <u>N/A</u>	
IN	OUT
_____	_____
_____	_____
_____	_____
	Chlorination Tablets
	Dechlorination Tablets
	Ultraviolet (U.V.)

Yes No (1/05 - 7/08)

4. Compliance with NPDES Permit
 Periodic Violations Y N Parameters: _____

Chronic Violations < BOD, Ammonia
Bacteria

5. Adequate plant safety

6. _____ Operation and Maintenance Service Name in-house, Matt Bell, Mgr

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Frequency of Visits _____

Facility Name: Camp Sabroske

Process	# Units	Unit	If Needed – Description and Comments
Preliminary	1	Trash Trap	Pumping Frequency
		Grease Trap	Pumping Frequency
		Bar Screen	
		Comminutor	
		Flow Equalization	
Aeration Equipment	1	Plant Timer ___Y ___N	Cycle Time:
		Motor / Blower Unit	
Secondary Treatment	1	Aeration Tank	Color: <i>Black, Septic</i> Adequate Aeration Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Final Settling	1	Clarifier	
		Sludge Return	In ___ Out ___
		Surface Skimmer	In ___ Out ___
		Fixed Media Clarifier	
Tertiary Treatment	/	Surface Sand Filter	
		Polishing Pond	
		Other	
Disinfection	/	Contact Tank	
		Chlorine Tube Feeder	
		Dechlorination Tube Feeder	
		Ultraviolet (UV)	
Flow Metering	/	Elapsed Pump Time	
		Recorder (continuous total)	
Pumps	/	Raw Wastewater (type)	
		Sand Filter Effluent Dosing	
Sludge Handling	/	Aerated Storage Tank	
		Sludge Drying Bed	
Sludge Disposal	/	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	/	Post Aeration	
		Spray Irrigation	
		Other	