



**Environmental
Protection Agency**

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

Re: Ottawa County
S. Bass Island
The Skyway
NPDES Permit

September 23, 2011

Ms. Susan Thwaite, Owner
The Skyway
P. O. Box 217
Put-in-Bay, Ohio 43456

Dear Ms. Thwaite:

On September 14, 2010, an inspection was made of the wastewater treatment facilities serving The Skyway. At the time of my visit, all major treatment components were in operation and clear final effluent was observed in the contact tank. The surface sand filters remain heavily weeded and need cleaned. Disinfection and dechlorination tablets were present in the tube feeders.

NPDES discharge monitoring reports are being received and indicate improved compliance this season, with violations reported only in the month of July. The NPDES permit renewal was recently drafted and you should receive a copy soon. You should review it carefully, as there is a 30 day comment period to respond to any permit conditions. Once issued as a final document, it will remain in effect for another five year period.

Please find enclosed my completed inspection report. If you have any questions, please call me at (419) 373-3020 or email at rick.zuzik@epa.state.oh.us.

Sincerely,

Richard A. Zuzik, MSE
Division of Surface Water

/llr

pc: Ottawa County Health Department
DSW-NWDO File

OHIO ENVIRONMENTAL PROTECTION AGENCY

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

NPDES Permit No. 2PR00222
 Facility Name The Skyway Expiration Date 9-30-10 (Renewal drafted)
 Facility Address 1248 Tri Motor Dr. Date 9-17-10 Time 1:40 am pm
 City S. Bass Island County Ottawa Township PIB
 Name and Address of Owner Susan Thwaite P.O. Box 217, PIB
 Person Contacted - Owner Phone (419) 341-0621
 Flow: Design 10,600 GPD Present _____ GPD (metered - estimated)
 Trib. Pop. Restaurant & 8 Condos (actual - estimated) Weather at time of inspection: Temp 75° clear
 OEPA Personnel Rick Zuzik District NWDO

1. Plant Effluent - Mark Severity No. - In Contact Tank

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
<input checked="" type="radio"/> 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: L. Erie

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
<input checked="" type="radio"/> 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"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Chlorination Tablets
	Dechlorination Tablets
	Ultraviolet (U.V.)

4. Yes No (5/10 - 8/10) Compliance with NPDES Permit
 Periodic Violations Y N Parameters: Ammonia
 Chronic Violations _____
 5. Adequate plant safety
 6. Operation and Maintenance Service Name Mike Mewhorter
 Frequency of Visits _____

Facility Name: SKYWAY

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		Plant Timer <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Cycle Time:
	1	Motor / Blower Unit	
Secondary Treatment	1	Aeration Tank	Color: <i>Brown</i> Adequate Aeration <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Final Settling	1	Clarifier	
	1	Sludge Return	In <input checked="" type="checkbox"/> Out
	1	Surface Skimmer	In <input checked="" type="checkbox"/> Out
		Fixed Media Clarifier	
Tertiary Treatment	2	Surface Sand Filter	<i>weeded</i>
		Polishing Pond	
		Other	
Disinfection	1	Contact Tank	<i>Clear</i>
	1	Chlorine Tube Feeder	<i>IN</i>
	1	Dechlorination Tube Feeder	<i>IN</i>
		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	1	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment		Post Aeration	
		Spray Irrigation	
		Other	