



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: Williams County
Northland Park MHP
Community Water System
PWS ID # 8601112
STU ID # 8659817

CERTIFIED MAIL

October 19, 2007

OH8601112

NORTHLAND SENIOR COMMUNITY

10/19/2007

Mrs. Dawn Smith, Manager
Midwest Property Management
103 DeGroff Ave., Suite A
Archbold, Ohio 43502



Dear Mrs. Smith:

Subject: Notice of Violation for Failure to Respond to a Significant Deficiency

This letter is notification that Northland Park Mobile Home Park has not complied with requirements issued during this Agency's last survey performed on June 19, 2007, in violation of Ohio Administrative Code, Rule 3745-81-60. Northland Park Mobile Home Park was notified in correspondence dated July 13, 2007 of the requirement to respond in writing within 45 days, with a schedule for corrective actions to address the following:

1. OAC Rule 3745-07-03(B)(3) states that, " A public water system shall be classified as a class A public water system when the public water system meets all of the following criteria: (a) Is a community or nontransient noncommunity public water system that serves a population of no more than two hundred fifty, or a transient noncommunity public water system that serves a population greater than two hundred fifty; (b) Uses only purchased water or a ground water source; (c) Does not provide precipitative softening or treat for a chemical contaminant to meet a maximum contaminant level as defined in rule 3745-81-01 of the Administrative Code; and (d) Has no serious public health or environmental hazard associated with the operation of the public water system."

A certified Class A operator must be placed in responsible charge of your water system as the operator of record. You stated at the time of the survey that the class had been taken and you were waiting on your certificate. Notify me at 419-373-3101 when your certification has been received.

2. OAC Rule 3745-7-09(A) specifies that the owner and operator of a public water system must maintain operation and maintenance records for the public water system. The records must include at a minimum, "(a) Identification of the public water system, sewerage system, or treatment works; (b) Date and times of arrival

and departure for the operator of record and any other operator required by this chapter; (c) Specific operation and maintenance activities that affect or have the potential to affect the quality or quantity of sewage or water conveyed, effluent or water produced; (d) Results of tests performed and samples taken, unless documented on a laboratory sheet; (e) Performance of preventative maintenance and repairs or requests for repair of the equipment that affect or have the potential to affect the quality or quantity of sewage or water conveyed, effluent or water produced; and (f) Identification of the persons making entries.

Operation and maintenance records must be maintained by the Northland Park MHP Public Water System. OAC Rule 3745-7-09(A) states that, "Some formats in which the records can be maintained include...hard bound books with consecutive page numbering, time cards, separate operation and maintenance records, or well organized computer logs."

3. OAC Rule 3745-83-01(D) states that, "All chemicals, substances, and materials added to or brought in contact with water in or intended to be used in a public water system or used for the purpose of treating, conditioning, altering, or modifying the characteristics of such water shall be shown by either the manufacturer, distributor, or purveyor to be non-toxic and harmless to humans when used in accordance with the formulation and concentration as specified by the manufacturer, and shall conform with the "American National Standards Institute/National Sanitation Foundation" (ANSI/NSF) standard 60 Drinking Water Treatment Chemicals – Health Effects (2005 and previous), or standard 61 Drinking Water System Components - Health Effects (2005 and previous).

The bleach used as the disinfectant for the system must be NSF approved. Ensure that an NSF approved Sodium hypochlorite solution is used and that if the concentration varies greatly from the current 6.0 % that is being used the dosage is adjusted accordingly.

4. OAC Rule 3745-81-24(C)(2) states that, each public water system required to monitor for Total Trihalomethanes and Haloacetic Acids, Five (TTHMs and HAA5) shall develop and implement a sample monitoring plan. The public water system shall maintain the plan and make it available for inspection by the director and the general public...The public water system shall modify the plan as required by the director. The plan must include at least the specific locations and schedules for collecting samples for TTHMs and HAA5. Failure to monitor according to the monitoring plan is a monitoring violation.

Submit a copy of the facility Disinfectants / Disinfection Byproducts Sample Monitoring Plan to Ohio EPA, along with the written response to this letter. A template for the Plan was provided at the time of the survey.

5. OAC Rule 3745-85-01 requires that a community water system must prepare and maintain a written contingency plan that must be revised and updated at least annually.

Mrs. Dawn Smith
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Submit a copy of the facility Contingency Plan to Ohio EPA, along with the written response to this letter. A template for the Plan was provided at the time of the survey.

6. OAC Rule 3745-81-21(A) states that, public water systems shall maintain a written bacteriological sample siting plan.

Update the existing copy of the bacteriological sample siting plan for the water system and submit a copy, along with the written response to this letter. A template for the plan was provided at the time of the survey.

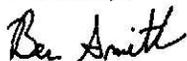
7. Recommended Standards for Water Works (aka. Ten States Standards, TSS) 7.2.3 states that, "The hydropneumatic tank(s) shall have bypass piping to permit operation of the system while the tank is being repaired or painted."

It appears that the current plumbing for the hydropneumatic tanks does not allow for the tanks to be repaired separately without bypassing all three tanks. Add a shut off valve for each of the tanks so each tank can be serviced or repaired while maintaining continuous pressure and without disruption of water to the distribution system. In addition, a separate drain for each tank must also be installed during the installation of the shut-off valves.

The water system must respond in writing within 15 days from the date of this letter with the required information. Failure to comply may result in further enforcement action.

If you have any questions, please contact me at 419-373-3101 or via Email at ben.smith@epa.state.oh.us.

Sincerely,



Ben Smith
Environmental Specialist 2
Division of Drinking and Ground Waters

/lb

pc: Albert Charles, Park Manager
Williams County Health Department
DDAGW, CO, attn: Dave Evans
~~DDAGW, NWDO file~~
Follow up file
7006 3450 0001 0661 2379

ec: Ellen Gerber, DDAGW, NWDO
Linda Benham, DDAGW, NWDO

DDAGW-PS-LB

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>X Dawn Smith</i></p> <p>B. Received by (Printed Name) C. Date of Delivery <i>Dawn Smith</i> <i>10-22-07</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p><i>Mrs. Dawn Smith Manager Midwest Property Management 103 Dehoff Ave Suite A Archbold Oh 43502</i></p>	<p>3. Service Type <input type="checkbox"/> Express Mail</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> C.O.D.</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Yes</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p style="text-align: center;">7006 3450 0001 0661 2379</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

DDAGW-PS-LB

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Total Postage & Fees		<i>\$5.21</i>	
<p>Sent To <i>Mrs. Dawn Smith Manager</i></p> <p>Street, Apt. No. or PO Box No. <i>Midwest Property Management</i></p> <p>City, State, ZIP+4 <i>Archbold OH 43502</i></p>			
PS Form 3800, August 2006		See Reverse for Instructions	

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