



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: Allen County  
Southgate Lanes  
TNC Water System  
PWS ID# OH0249812

September 7, 2007

OH0249812 SOUTHGATE LANES

21 09/07/07

CERTIFIED MAIL



Mr. John Dailey  
Southgate Lanes  
9700 Dixie Highway  
Bluffton, Ohio 45817

Dear Mr. Dailey:

**Subject: Notice of Violation of Maximum Contaminant Level for Total Coliform Bacteria (Acute - *E. coli* or fecal coliform positive and a Monthly)**

Your public water system incurred an **acute** and **monthly** violation of Rule 3745-81-14 of the Ohio Administrative Code (OAC) in August 2007 due to the following results:

Sample Date	Sample Tap	Total Coliform	<i>E. coli</i>	Fecal Coliform	Sample Number	Lab Number
08-27-07	Kitchen Sink	Positive	Positive	--	12374	833
09-05-07	Men's Room Sink	Positive	Negative	--	12431	833
09-05-07	Basement Sink	Positive	Negative	--	12430	833

An acute violation occurs when:

- a repeat sample is either fecal or *E. coli*-positive; or
- a repeat sample is total coliform-positive following a fecal or *E. coli* positive routine sample.

A monthly violation of Rule 3745-81-14 occurs when more than one or greater than five percent of your samples within the month are total coliform-positive.

**Actions required as a result of the above violation:**

- Within 24 hours**, consult with Ohio EPA and use the following methods to reach all persons served by the public water system, in accordance with Rule 3745-81-32 of the OAC:

- A. Posting in conspicuous locations (restrooms, drinking fountains, vending areas, restaurants, bulletin boards, etc.).
2. Immediately initiate an investigation to determine and eliminate the cause and extent of bacterial contamination.
3. Fill out the enclosed verification form and send it along with a copy of the public notification issued to the Northwest District Office of Ohio EPA.
4. The public notice water use advisory shall remain in effect until you obtain one complete set of four (4) total coliform-negative (contain no coliforms) repeat samples. Clearly mark each repeat sample slip as "repeat sample."
5. Because you are required to monitor with at least five (5) samples in the next month following any total coliform-positive result you must take at least five (5) total coliform samples in September and October 2007.

If you have any questions, please contact me at (419) 373-3101.

Sincerely,

*Ben Smith*

Ben Smith  
Division of Drinking and Ground Waters

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Enclosure

pc: Toni Buchanan, DDAGW, CO  
Allen County Health Department  
CDDAGW, NWDO File

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:  
*DDAkw - Julie S*  
 MR. JOHN DAILEY  
 SOUTHGATE LANES  
 9700 Dixie Highway  
 BLUFFTON OH 45817

2. 7006 3450 0001 0611 3111

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) *JOHN DAILEY* C. Date of Delivery *9/11 2007*

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PLEASE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.  
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Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 5.38</b>

Ohio EPA



Sent To  
 MR. JOHN DAILEY - SOUTHGATE LANES  
 Street, Apt. No.,  
 or PO Box No. 9700 Dixie Highway  
 City, State, ZIP+4  
 BLUFFTON OH 45817