



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

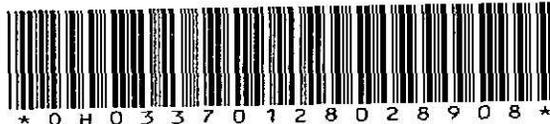
Ted Strickland, Governor  
Lee Fisher, Lieutenant Governor  
Chris Korleski, Director

Re: Ashland County  
Hickory Lakes Campground  
TNC Public Water System  
PWS ID# OH0337012.

November 7, 2007

OH0337012 HICKORY LAKE CAMPGROUND B-AREA 25 11/07/07

**CERTIFIED MAIL**  
7006 0100 0003 7708 5831



Mr. Randy Burkhead  
Hickory Lakes Campground  
23 Township Road 1300  
West Salem, Ohio 44287

Dear Mr. Burkhead:

**Subject: Notice of Violation of Maximum Contaminant Level for Total Coliform Bacteria (Acute & Failure to Monitor with four repeat samples)**

During November 2007, your public water system incurred an **acute** violation of Rule 3745-81-14(D) of the Ohio Administrative Code (OAC) and a **monitoring** violation of Rule 3745-81-21(B)(1) of the OAC for failure to collect a total of four (4) repeat samples within the required time period.

Our records indicate that a total coliform-positive sample was collected from this water system on November 1, 2007, and that either no repeat samples were collected or only some repeat samples were collected.

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

1. **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. hand delivery of notice to each campsite;
  - B. delivery to each new visitor;
  - C. posting in conspicuous locations (restrooms, drinking fountains, vending areas, bulletin boards, etc.); and
  - D. PA announcements (if applicable).
  
2. Immediately initiate an investigation to determine and eliminate the cause and extent of bacterial contamination.

Mr. Randy Burkhead  
November 7, 2007  
Page 2

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. 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 before opening for the season in May 2008.

If you have any questions, please contact me at (419) 373-3102.

Sincerely,



Dean A. Twining  
Division of Drinking and Ground Waters

/csf

Enclosures

pc: Toni Buchanan, DDAGW, CO  
Ashland County Health Department  
◀DDAGW, NWDO File ▶

# DRINKING WATER WARNING

Tests show coliform bacteria in Hickory Lake Campground - B Area's water

## BOIL YOUR WATER BEFORE USING OR USE BOTTLED WATER

Sampling conducted for our water system showed total coliform bacteria were found in a sample collected on November 1, 2007. We were required to collect four (4) repeat samples within 24 hours of notification of any total coliform positive result to determine if *E. coli* or fecal coliform bacteria were present. These bacteria can make you sick, and are a particular concern for people with weakened immune systems. We did not collect all of the required repeat samples, and therefore cannot be sure that the drinking water does not pose an acute risk to human health.

### What should I do?

- **DO NOT DRINK THE WATER WITHOUT BOILING IT FIRST.** Bring all water to a boil, let it boil for at least one minute, and let it cool before using, **or use bottled water.** Boiled or bottled water should be used for drinking, making ice, brushing teeth, washing dishes, and food preparation until further notice. Boiling kills bacteria and other organisms in the water.
- *Fecal coliforms and E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes can cause diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a special health risk for infants, young children, some of the elderly, and people with severely compromised immune systems.*
- The symptoms above are not caused only by organisms in drinking water. If you experience any of these symptoms and they persist, you may want to seek medical advice. People at increased risk should seek advice about drinking water from their health care providers.

### What happened? What is being done?

Bacterial contamination can occur when increased run-off enters the drinking water source (for example, following heavy rains). It also can happen due to a break in the distribution system (pipes) or a failure in the water treatment process.

We are investigating and taking the necessary steps to correct the problem as soon as possible.

For more information, please contact \_\_\_\_\_ at \_\_\_\_\_ or \_\_\_\_\_  
mailing address name of contact phone number

General guidelines on ways to lessen the risk of infection by microbes are available from the EPA Safe Drinking Water Hotline at 1(800) 426-4791.

*Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail.*

PWS ID# OH0337012	Date Distributed:
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Tier 1: Total Coliform (no repeats taken)

**\*\* Complete this form along with the Verification Form and send them both back to the Ohio EPA \*\***

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PWS ID# OH0337012

Date Distributed:

Tier 1: Total Coliform (no repeats taken)

# PUBLIC NOTICE INSTRUCTIONS AND VERIFICATION FORM FOR TIER 1 VIOLATIONS

The owner or operator of a public water system with a Tier 1 violation or situation that may pose an acute risk to human health is required to notify the persons served by the public water system. Notice shall be issued as soon as practical but **no later than 24 hours** after the system learns of the violation. Public notice shall be repeated as established during consultation with Ohio EPA.

I HEREBY CERTIFY THAT THE PUBLIC WAS NOTIFIED BY THE FOLLOWING METHOD(S) INDICATED BELOW, AS DESCRIBED IN THE OHIO ADMINISTRATIVE CODE RULE 3745-81-32:

Required Method of Public Notification	Actual Method of Public Notification
<p><b>Use one or more of the following methods to reach all persons served by the public water system:</b></p> <ol style="list-style-type: none"> <li>1. Public notice issued by continuous posting in conspicuous places throughout the area served by the water system (required to remain posted for as long as the violation exists)</li> <li>2. Public notice issued by hand delivery to persons served by the water system</li> <li>3. Public notice issued by another delivery method approved in writing</li> </ol>	<p><b>Describe actual methods used to notify public of the violation:</b></p> <p>1A. Dates of posting _____</p> <p>1B. Locations of posting _____</p> <p>2A. Date of delivery _____</p> <p>3A. Method _____</p> <p>3B. Date _____</p>
<p><b>Additional methods established in consultation with Ohio EPA</b></p>	<p>A. Method(s) _____</p> <p>B. Date(s) _____</p>

Please check if the public notice used was provided by Ohio EPA or another acceptable notice was used:

### INCLUDE A COPY OF THE PUBLIC NOTICE

\_\_\_ A public notice as enclosed with this letter was issued without changes.

\_\_\_ A different public notice was issued.

\_\_\_\_\_  
Signature of Responsible Official      Date

\_\_\_\_\_  
Printed Name and Title of Responsible Official

Hickory Lake Campground - B Area  
PWS ID# OH0337012  
Ashland County  
VIOLATION TYPE: 21 & 25  
MONITORING PERIOD: Oct. - Dec. 2007

For Ohio EPA use only

Date PN Received: \_\_\_\_\_

PN acceptable:              PN not acceptable:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>MR RANDY BURKHEAD HICKORY LAKES CAMPGROUND 23 TOWNSHIP RD 1300 WEST SALEM OH 44287</p> <p>DDAGW/TWINING/csl</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>3. Service Type  <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7006 0100 0003 7708 5831</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

U.S. Postal Service™ <b>CERTIFIED MAIL™ RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)											
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>											
<b>OFFICIAL USE</b> MR RANDY BURKHEAD											
<table border="1"> <tr> <td>Postage</td> <td>\$ 1.58</td> </tr> <tr> <td>Certified Fee</td> <td>2.65</td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td>2.15</td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td><b>Total Postage &amp; Fees</b></td> <td><b>\$ 5.38</b></td> </tr> </table>	Postage	\$ 1.58	Certified Fee	2.65	Return Receipt Fee (Endorsement Required)	2.15	Restricted Delivery Fee (Endorsement Required)		<b>Total Postage &amp; Fees</b>	<b>\$ 5.38</b>	<p>Ohio EPA            GREEN            NOV 7 2007            DDAGW/Dean T            csl/PS</p>
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<p>Sent To: HICKORY LAKES CAMPGROUND</p> <p>Street, Apt. No., or PO Box No. 23 TOWNSHIP RD 1300</p> <p>City, State, ZIP+4 WEST SALEM OH 44287</p>											
<p>PS Form 3800, June 2002 See Reverse for Instructions</p>											