OhioEPA
State of Ohio Environmental Protection Agency

Northwest District Office
347 North Dunbridge Rd.
Bowling Green, OH 43402-9398
TELE: (4

OH0345512 MOHICAN CASTLE RESORT PWS 23 02/01/10

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NOTICE OF VIOLATION – ACTION REQUIRED

Re: Ashland County
Mohican Castle Resort
Non-Community, Transient
PWS ID: OH0345512

February 4, 2010

Mr. Jim Landoll
Mohican Castle Resort
561 Township Road 3352
Loudonville, Ohio 44842

Subject: Failure to Sample Drinking Water for Total Coliforms as Required

Mohican Castle Resort is in violation of Ohio Administrative Code (OAC), Rule 3745-81-21 for failure to comply with the total coliform monitoring.

Monitoring Period:	Fourth Quarter of 2009
Required Coliform Monitoring:	One (1) routine sample per quarter
Sample Results Submitted:	None

To ensure the safety of drinking water provided by your system monitoring for total coliforms is essential.

ACTION REQUIRED:

1. **Notify the people served by this water system** using one or more of the methods and the timing as required by OAC, Rule 3745-81-32 to reach all persons served.

   Timing: As soon as practical, but no later than 30 days after learning of the violation:

   - *Posting in conspicuous location, such as bulletin boards, restrooms, drinking* fountains, vending areas;
   - Mail or other direct delivery to each customer;
   - Newsletters or newspaper;
   - E-mail to employees or students;
   - Send to parents or guardians of children at schools or day care facilities;
   - Posted notices must remain in place as long as the violation or situation exists, but in no case less than seven days (even if the violation is resolved). The language in italics on the enclosed public notice is mandatory and must be included, as written. Do not make changes to the public notice without consulting with the Ohio EPA beforehand.

2. **Complete the enclosed Verification Form within 10 days of issuing the Public Notice** and mail it to Ohio EPA - NWDO. Include a copy of each notice distributed, published or posted.

If total coliform samples were collected as required, submit the results as soon as possible. The monitoring violation would be rescinded and a reporting violation given for late submittal of the results.

If you have any questions, contact me at 419-373-3105.

Sincerely,

Curtis A. Eldridge
Division of Drinking and Ground Waters

JKS/cs

Enclosures: Tier 3 Public Notification (2)
Public Notice Instructions & Verification Form

pc: Ashland County Health Department
Information Management Section, DDAGW, CO
~~DDAGW - NWDO (w/enclosures)~~

DRINKING WATER NOTICE

Monitoring requirements were not met for Mohican Castle Resort

We are required to monitor your drinking water for specific contaminants on a regular basis. Results of regular monitoring are an indicator of whether or not your drinking water meets health standards. During Fourth Quarter of 2009, we "did not monitor or test" or "did not complete all monitoring or testing" for total coliform bacteria, and therefore cannot be sure of the quality of your drinking water during that time.

What Should I Do?

- *There is nothing you need to do at this time. You do not need to boil your water or take other corrective action.*
- *This notice is to inform you that Mohican Castle Resort did not monitor and report results for the presence of total coliform bacteria in the public drinking water system during the Fourth Quarter of 2009 time period, as required by the Ohio Environmental Protection Agency.*

What is being done?

Upon being notified of this violation, the water supply was required to have the drinking water analyzed for the above mentioned parameters. The water supplier will take steps to ensure that adequate monitoring will be performed in the future.

For more information, please contact _____ at _____
name of contact phone number

or at _____.
mailing address

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.

PWSID# OH0345512	Date Distributed:

Tier 3: Monitoring Violation Notice

PUBLIC NOTICE INSTRUCTIONS AND VERIFICATION FORM FOR NON-COMMUNITY PUBLIC WATER SYSTEMS WITH TIER 3 VIOLATIONS

The owner or operator of a non-community public water system with a Tier 3 violation or situation shall notify the persons served by the public water system as soon as practical but **no later than 30 days** after the system learns of the violation. Public notice issued by posting shall remain in place as long as the violation or situation persists. Public notice issued by other methods shall be repeated annually as long as the violation or situation persists.

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
Use one or more of the following methods to reach all persons served by the public water system: 1. Public notice issued by posting in conspicuous locations throughout the distribution system (required to remain posted for as long as the violation exists, but in no case less than 7 days 2. Public notice issued by mail or other direct delivery to each customer and service connection (where known).	**Describe actual methods used to notify public of the violation:** 1A. Dates of posting _____ 1B. Locations of posting _____ _____ _____ 2. Date of mailing/delivery _____
Schools and Day-Care Facilities must notify parents or guardians of children being served by methods besides posting, such as a newsletter, e-mail notice, or direct mailing	A. Method(s) _____ _____ B. Date(s) _____
If the above methods do not reach all persons served, also use any other method reasonably calculated to reach other persons served by the system (e.g. publication in a local newspaper or newsletter, use of e-mail to notify employees or students, or delivery of multiple copies to central locations).	A. Method(s) _____ _____ _____ B. Date(s) _____

Complete the enclosed Verification Form and mail it to Ohio EPA – NWDO. **INCLUDE A COPY OF THE PUBLIC NOTICE.**

_____
Signature of Responsible Person Date

_____
Printed Name and Title of Responsible Person

Mohican Castle Resort
OH0345512
Ashland County
Fourth Quarter of 2009
Total Coliform Monitoring (Vio. Type 23)

For Ohio EPA use only:
Date PN received: _____
PN acceptable: _____ **PN not acceptable:** _____