



State of Ohio Environmental Protection Agency

**Northwest District Office**

347 North Dunbridge Rd.  
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 Korteski, Director

Re: Hancock County  
Twin Lakes Park  
TNC Water System  
PWS ID: OH3241812  
STU ID: 3260521 & 3254846

April 2, 2009

Certified Mail 7007 2560 0000 4479 3367

OH3241812

TWIN LAKES PARK

4/2/2009

Mr. Bob Harris, Owner  
Twin Lakes Park  
114 East Elm Street  
Bluffton, Ohio 45817



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

This letter is notification that the Twin Lakes Park has not complied with requirements issued during this Agency's last survey performed on December 19, 2008, in violation of Rule 3745-81-60 of the Ohio Administrative Code. The campground was notified in correspondence dated January 30, 2009, to respond in writing no later than 45 days, with time frames for:

- The wells serving your water system appear to not have the correct sanitary isolation radius of 105' from potential sources of contamination according to the estimated daily water demand. Submit a site map to our office showing the sources of contamination located around your wells.

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 via email at [jill.schiefer@epa.state.oh.us](mailto:jill.schiefer@epa.state.oh.us) or at 419-373-3089.

Sincerely,

Jill A. Schiefer  
Environmental Specialist  
Division of Drinking and Ground Waters

/cs

pc: Hancock County Health Department

DDAGW, CO

DDAGW, NWDO File

ec: NWDO Follow-up File



| 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> | A. Signature<br><input checked="" type="checkbox"/> <i>Elaine Harris</i> <input type="checkbox"/> Agent<br><input type="checkbox"/> Addressee   |
| 1. Article Addressed to:<br><i>Mr. Bob Harris, Owner<br/>           Twin Lakes Park<br/>           114 E. Elm Street<br/>           Beaufton, Ohio 45817</i>   | B. Received by (Printed Name)<br><i>Elaine Harris</i>   |
| 2. A<br>7007 2560 0000 4479 3367   | C. Date of Delivery<br><i>4-10-09</i><br>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No  |
| PS Form 3811, February 2004  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.<br>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes |

| U.S. Postal Service™<br><b>CERTIFIED MAIL™ RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided)   |                |        |               |  |   |  |  |  |                                 |                |   |
|--|----------------|--------|---------------|--|---|--|--|--|---------------------------------|----------------|---|
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>   |                |        |               |  |   |  |  |  |                                 |                |   |
| <i>Mr. Bob Harris</i> OFFICIAL USE   |                |        |               |  |   |  |  |  |                                 |                |   |
| <table border="1"> <tr> <td>Postage</td> <td>\$ .42</td> </tr> <tr> <td>Certified Fee</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td><b>Total Postage &amp; Fees</b></td> <td><b>\$ 5.32</b></td> </tr> </table> | Postage        | \$ .42 | Certified Fee |  | Return Receipt Fee (Endorsement Required) |  | Restricted Delivery Fee (Endorsement Required) |  | <b>Total Postage &amp; Fees</b> | <b>\$ 5.32</b> | Ohio EPA<br>Postmark Here<br> |
| Postage  | \$ .42         |        |               |  |   |  |  |  |                                 |                |   |
| Certified Fee  |                |        |               |  |   |  |  |  |                                 |                |   |
| Return Receipt Fee (Endorsement Required)  |                |        |               |  |   |  |  |  |                                 |                |   |
| Restricted Delivery Fee (Endorsement Required)   |                |        |               |  |   |  |  |  |                                 |                |   |
| <b>Total Postage &amp; Fees</b>  | <b>\$ 5.32</b> |        |               |  |   |  |  |  |                                 |                |   |
| Sent To <i>Twin Lakes Park</i><br>Street, Apt. No. or PO Box No. <i>114 E. Elm Street</i><br>City, State, ZIP+4 <i>Beaufton, Ohio 45817</i>  |                |        |               |  |   |  |  |  |                                 |                |   |
| PS Form 3800, August 2006 See Reverse for Instructions   |                |        |               |  |   |  |  |  |                                 |                |   |