



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: Marion County
St Pauls Lutheran Church/Waldo
TNC Public Water System
PWSID: OH5137212
STUID: 5156206

May 20, 2008

Certified Mail

OH5137212

ST PAULS LUTHERAN CHURCH

5/20/2008

Mr. David Schrote, Trustee
St Pauls Lutheran Church
135 W Main Street
P. O. Box 162
Waldo, Oh 43356



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

This letter is notification that the St Pauls Lutheran Church/Waldo Public Water System has not complied with requirements issued during this Agency's last survey performed on February 14, 2008, and conveyed in correspondence dated April 10, 2008, in violation of rule 3745-81-60 of the Ohio Administrative Code. Specifically, the St Pauls Lutheran Church/Waldo Public Water System has failed to respond in writing within 45 days, indicating how and on what schedule the system would address the following requirements:

1. The well has not been demonstrated to be sited in conformance with OAC Rule 3745-9-04 which establishes, based upon the estimated average daily water demand, a sanitary isolation radius from potential sources of contamination. The required isolation radius has been established at 50' based upon an estimated average daily water demand of 1,550 gallons per day. Submit either a site map which documents a well isolation radius in compliance with the requirements of OAC Rule 3745-9-04 or a plan of action for establishing an alternate source or well site in the event the existing source should fail.
2. The well cap is not designed with a downturned, screened vent (OAC Rule 3745-9-05 P). Replace the well cap with one that fits securely, secured with screws or other appropriate connections, and incorporates within its design downturned screened vent to the atmosphere.
3. The well pit shall be inspected and the method used and its success in preventing the pooling of surface water from around the well casing shall be reported in writing to the surveyor (OAC Rule 3745-9-05).
4. All chemicals brought in contact with water for the purpose of treating the water shall be shown to conform with the ANSI/NSF Standard 60 (OAC rule 3745-83-01 D).

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May 20, 2008
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Provide documentation sufficient to demonstrate that the salt used in the production of brine conforms with the ANSI/NSF Standard 60.

5. The drain line from the cation exchange unit extended below the flood level of the sump basin. To prevent the potential contamination from backflow/backsiphonage, the drain line shall be suspended a minimum of 1" above the flood level of the sump basin (OAC Chapter 3745-95).

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) 373-3042.

Sincerely,



Larry W. Moritz, R.S, M.S.I.H
Division of Drinking and Ground Waters

/lb

cc: Marion County Health Dept.
Central Office, DDAGW
~~DDAGW/NWDO~~
7006 010 0004 1318 3507

ec: Larry Moritz, DDAGW/NWDO

2006-0100-0004-1318-3507

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 checked="" type="checkbox"/> <i>Christie Seiter</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</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>Mr David Schrote Trustee St Pauls Sutheran Church 135 W Main St PO Box 162 Waldo Oh 43356</i></p>	<p>3. Service Type</p> <p><input checked="" 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 0004 1318 3507</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

2006-0100-0004-1318-3507

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Return Receipt Fee (Endorsement Required)	<u>2.20</u>	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ <u>532</u>	
<p>Sent To <i>Mr David Schrote Trustee</i></p> <p>Street, Apt. No., or PO Box No. <i>St Pauls Sutheran Church 135 W Main St PO Box 162</i></p> <p>City, State, ZIP+4 <i>Waldo Oh 43356</i></p>		
PS Form 3800, June 2002		See Reverse for Instructions