



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: Mercer County
Pit Stop Tavern
TNC Public Water System
PWSID: OH5434712
STUID: 5456445

Certified Mail

August 13, 2008

OH5434712

PIT STOP TAVERN

8/13/2008

Kathy Miller
Pit Stop Tavern
160 State Highway 29 W
Celina, Oh 45822



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

This letter is notification that the Pit Stop Tavern has not complied with requirements issued during this Agency's last survey performed on May 21, 2008, in violation of rule 3745-81-60 of the Ohio Administrative Code. The village was notified in correspondence dated June 25, 2008, to respond in writing no later than 45 days, with time frames for:

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 57' based upon an estimated average daily water demand of 3200 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 well site in the event the existing source should fail.
2. The well vent shall be screened with a noncorroding mesh screen of fifteen to thirty mesh.
3. Maintain the drain line from the treatment equipment suspended at least one inch above the flood level (rim) of the floor drain (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 Moritz, R.S., M.S.I.H.
Division of Drinking and Ground Waters
/lb

cc: Mercer County Health Dept.
Central Office, DDAGW
DDAGW/NWDO
7006 0100 0003 7708 6319

ec: John A. (Jack) Schwartz, DDAGW/NWDO
JoAnn Sabo, DOCC/DDAGW/NWDO

DDAC-LS-1M-LB

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>Kathy Miller</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Kathy Miller</i> C. Date of Delivery <i>8/15/07</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: <i>SAME</i></p>
<p>1. Article Addressed to:</p> <p><i>Ms. Kathy Miller</i> <i>Pet Stop Tavern</i> <i>160 State Hwy 29W</i> <i>Celina Oh 45822</i></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 6319</p>
PS Form 3811, February 2004	Domestic Return Receipt

102595-02-M-1540

DDAC-LS-1M-LB

7006 0100 0003 7708 6319

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ <i>42</i>
Certified Fee	<i>2.70</i>
Return Receipt Fee (Endorsement Required)	<i>2.20</i>
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ <i>5.32</i>
<p>Sent To <i>Ms. Kathy Miller</i></p> <p>Street, Apt. No., or PO Box No. <i>Pet Stop Tavern</i></p> <p>City, State, ZIP+4 <i>160 State Hwy 29W</i> <i>Celina Oh 45822</i></p>	
<p>PS Form 3800, June 2002</p> <p style="text-align: right;">See Reverse for Instructions</p>	

OH 43
 AUG 14 2007
 BOWLING GREEN OH EPA
 POSTMARK
 HERE
 USPS