



State of Ohio Environ

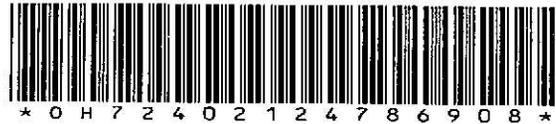
OH7240212 DAYS INN

22 09/10/08

Northwest

347 North Dunbridge Road
Bowling Green, OH 43402-9398

TELE: (419) 352-8-
www.ep



NOTICE OF VIOLATION - ACTION REQUIRED

September 10, 2008

RE: Sandusky County
Days Inn
Transient Non-Community
PWS ID: OH7240212

Days Inn
2027 Cleveland Rd
Sandusky, Ohio 44870

Subject: Violation of Total Coliform Maximum Contaminant Level (MCL)
During August 2008 (Monthly)

Days Inn is in violation of the Maximum Contaminant Level (MCL) for Total Coliform established by Ohio
Administrative Code (OAC), Rule 3745-81-14. Coliforms are bacteria that are naturally present in the environment
and are used as an indicator that other, potentially-harmful bacteria may be present.

Table with 7 columns: Sample Date, Sample Tap, Total Coliform, E. coli, Fecal Coliform, Sample Number, Lab Number. Contains 4 rows of sampling data.

ACTION REQUIRED:

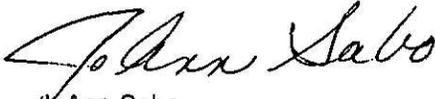
- 1. Investigate and eliminate the cause of bacterial contamination. Special purpose samples may be collected to investigate the source of contamination or to verify elimination of the problem...
2. Notify the people served by this water system. Within 30 days issue the enclosed public notice in accordance with OAC, Rule 3745-81-32 by the following method(s) to reach all persons served.

Table with 2 columns: Community, Transient or Non-Transient Non-Community. Lists notification methods for each. Includes a note at the bottom: Posted notices must remain in place for as long as the violation exists, but in no case for less than seven days...

3. **Complete the enclosed verification form within 10 days of issuing the Public Notice** and mail it to Ohio EPA - Northwest District Office. Include a copy of each notice distributed, published or posted.
4. **Monitor with at least five (5) routine samples** in the month following a routine total coliform-positive result in accordance with OAC, Rule 3745-81-21(B)(7). You are required to collect five (5) routine samples during the month of September 2008.

If you have any questions, contact this office at 419-373-3108.

Sincerely,



JoAnn Sabo  
Environmental Specialist

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

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

# DRINKING WATER NOTICE

## Tests show coliform bacteria in Days Inn's water

We routinely monitor for the presence of drinking water contaminants. We took five (5) samples during August and September 2008. Four (4) of the five (5) samples for coliform bacteria showed the presence of coliform bacteria. No more than one (1) sample per month may show the presence of coliform bacteria during a month.

### What should I do?

- *You do not need to boil your water or take other corrective actions. However, if you have specific health concerns, consult your doctor. People with severely compromised immune systems, infants, and some elderly people may be at increased risk. These people should seek advice about drinking water from their health care providers.*
- *Total coliform bacteria are generally not harmful themselves. Usually, coliforms are a sign that there could be a problem with the system's treatment or distribution system.*
- *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems. Fecal coliform or E. coli, which are bacteria of greater concern, were not detected in the water.*

### What is being done?

We are still detecting coliform bacteria. We are investigating and taking the necessary steps to correct the problem as soon as possible.

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

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.*

PWSID# OH7240212	Date Distributed:
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**PUBLIC NOTICE INSTRUCTIONS AND VERIFICATION FORM FOR  
NON-COMMUNITY PUBLIC WATER SYSTEMS WITH TIER 2 VIOLATIONS**

The owner or operator of a non-community public water system with a Tier 2 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 shall be repeated every 3 months 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
<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>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)</li> <li>Public notice issued by mail or other direct delivery to each customer and service connection (where known).</li> </ol>	<p><b>Describe actual methods used to notify public of the violation:</b></p> <p>1A. Dates of posting _____            1B. Locations of posting _____            _____            _____</p> <p>2. Date of mailing/delivery _____</p>
<p><b>Schools and Day-Care Facilities</b> must notify parents or guardians of children being served by methods besides posting, such as a newsletter, e-mail notice, or direct mailing</p>	<p>A. Method(s) _____            _____</p> <p>B. Date(s) _____</p>
<p><b>If the above methods do not reach all persons served</b>, 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).</p>	<p>A. Method(s) _____            _____</p> <p>B. Date(s) _____</p>

**Complete the enclosed verification form and mail it to Ohio EPA - Northwest District Office. INCLUDE A COPY OF THE PUBLIC NOTICE.**

\_\_\_\_\_  
Signature of Responsible Person                      Date

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

Days Inn  
OH7240212  
Sandusky County  
Third Quarter of 2008  
Total Coliform Monthly MCL (Vio. Type 22)

<p><b>For Ohio EPA use only:</b>            Date PN received: _____            PN acceptable: _____ PN not acceptable: _____</p>
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