



State of Ohio Environmental Protection Agency

North District Office

2110 East Aurora Rd.
Twinsburg, Ohio 44087

TELE: (330) 963-1200 FAX: (330) 487-0769
www.epa.state.oh.us

Ted Strickland, Governor
Lee Fisher, Lieutenant Governor
Chris Korleski, Director

November 12, 2008

RE: WILLIAM WASSON, OWNER
DBA RIDGE VIEW ESTATES
PERMIT NO. 3PW00034
ASHTABULA COUNTY

CERTIFIED MAIL

Mr. William Wasson
Ridge View Estates
P.O. Box 356
North Kingsville, Ohio 44068

Dear Mr. Wasson:

On October 15, 2008, an inspection of the above referenced facility's wastewater treatment system was conducted. No one was present during the inspection. The purpose of the inspection was to evaluate the operation and maintenance of the treatment system along with the facility's compliance status with respect to the terms and conditions of the above referenced National Pollutant Discharge Elimination System (NPDES) permit.

During the inspection, the following items were noted:

1. The plant design of the wastewater treatment system is 10,000 gpd.
2. The blowers were running and the plant was receiving good aeration.
3. The contents of the aeration tank were medium brown in color and no foam was present.
4. Both the sludge return line and skimmer return line were functioning properly.
5. Floating solids were present in the clarifier. The solids should be skimmed off and properly disposed.
6. One surface sand filter bed was not in operation and was covered with vegetation. The other surface sand filter bed which was in operation was covered with a layer of sludge. Both beds should be properly maintained prior to winter by removing the sludge and vegetation in the beds. The vegetation and sludge should be properly disposed at a licensed solid waste landfill.
7. Once the sludge layer and vegetation is removed in the surface sand filter beds, additional filter media may be required. In general 18 inches of approved filter sand is necessary. Any filter sand that is used must meet the requirements of Ohio Administrative Code (OAC) 3745-42-09. More specifically, for conventional surface sand filters, filter sand shall be washed and free of silt; have an effective size of 0.4 mm to 1.0 mm; and have a uniformity coefficient less than 3.0.
8. The final effluent being discharged was clear and appeared to be of satisfactory visual quality.

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This office has recently reviewed your self-monitoring reports covering the period January 1, 2007 through September 30, 2008 for the referenced facility. Our review indicates violations of the terms and conditions of your NPDES permit. The specific instances of noncompliance are as follows:

Limit Violations

Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	3.0	11.97	2/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	4.5	11.97	2/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.114	.3851	2/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.170	.3851	2/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	3.0	9.24	3/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.114	.28853	3/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	4.5	9.24	3/8/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.170	.28853	3/8/2007
001	00530	Total Suspended Solids	30D Conc	12	23.	4/1/2007
001	00530	Total Suspended Solids	7D Conc	18	23.	4/1/2007
001	00530	Total Suspended Solids	30D Qty	0.454	.7182	4/1/2007
001	00530	Total Suspended Solids	7D Qty	0.681	.7182	4/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	3.0	11.62	4/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	4.5	11.62	4/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.114	.36285	4/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.170	.36285	4/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	1.0	8.96	5/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.038	.28827	5/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	1.5	8.96	5/8/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.057	.28827	5/8/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	1.0	6.44	6/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.038	.2011	6/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	1.5	6.44	6/15/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.057	.2011	6/15/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	1.0	1.33	7/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.038	.04279	7/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	1.0	4.2	8/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	1.5	4.2	8/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.038	.1391	8/1/2007
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.057	.1391	8/1/2007
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	3.0	9.66	1/1/2008
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.114	.33821	1/1/2008
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	4.5	9.66	1/8/2008
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.170	.33821	1/8/2008
001	00530	Total Suspended Solids	30D Qty	0.454	350112.	3/1/2008
001	00530	Total Suspended Solids	7D Qty	0.681	350112.	3/1/2008
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	3.0	6.16	3/1/2008
001	00610	Nitrogen, Ammonia (NH3)	7D Conc	4.5	6.16	3/1/2008

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Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.114	215669.	3/1/2008
001	00610	Nitrogen, Ammonia (NH3)	7D Qty	0.170	215669.	3/1/2008
001	80082	CBOD 5 day	30D Qty	0.379	140045.	3/1/2008
001	80082	CBOD 5 day	7D Qty	0.568	140045.	3/1/2008
001	50060	Chlorine, Total Residue	1D Conc	0.019	.45	5/8/2008
001	50060	Chlorine, Total Residue	1D Conc	0.019	.22	8/5/2008

Frequency Violations

Violation Date	Station	Reporting Code	Parameter	Sample Frequency	Expected	Reported
3/1/2007	001	00010	Water Temperature	1/Week	1	0
3/15/2007	001	00010	Water Temperature	1/Week	1	0
3/22/2007	001	00010	Water Temperature	1/Week	1	0
5/15/2007	001	00400	pH	1/2Weeks	1	0
7/8/2007	001	00010	Water Temperature	1/Week	1	0
7/15/2007	001	00010	Water Temperature	1/Week	1	0
7/22/2007	001	00010	Water Temperature	1/Week	1	0

Please notify this office in writing what actions are going to be taken to eliminate the ongoing violations. The letter should include dates either actual or proposed of what actions you intend to take.

Ridge View Estates needs to continue to work toward compliance with its NPDES permit.

Please be advised that such instances of noncompliance may be cause for enforcement actions pursuant to the Ohio Revised Code, Chapter 6111.

Should you have any comments or questions concerning this letter, please feel free to call me at (330) 963-1143.

Respectfully,

Michael W. Stevens

Michael W. Stevens
Environmental Engineer
Division of Surface Water

MWS/mt

3PW000 5419 9154

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

William Wasson
 Ridge View Estates
 PO Box 356
 North Kingsville OH 44008

2. Article Number
 (Transfer from service label) 7008 3230 0003 5419 9154 (Stevens 1/27/10)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x William Wasson

B. Received by (Printed Name) C. Date of Delivery
 William Wasson 1-29-10

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7008 3230 0003 5419 9154

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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 For delivery information visit our website at www.usps.com

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

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Sent To
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 or PO Box No.
 City, State, ZIP+4

3PW0003920081112

SENDER: COMPLETE THIS SECTION

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- 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.

1. Article Addressed to:

MR. WILLIAM WASSON
 RIDGE VIEW ESTATES
 P.O. BOX 356
 NORTH KINGSVILLE, OH 44068

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *W. Wasson*

Agent

Addressee

B. Received by (Printed Name)

William Wasson

C. Date of Delivery

11-14-08

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

2. Article Number 7008 0150 0001 7111 0350
(Transfer from service label)

M. STEVENS 11-12-08

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service
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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

M. STEVENS
11-12-08

Sent To MR. WILLIAM WASSON
 Street, Apt. No. or PO Box No. RIDGE VIEW ESTATES
 City, State, ZIP+4 P.O. BOX 356
 NORTH KINGSVILLE, OH 44068

PS Form 3800, August 2006

See Reverse for Instructions