



State of Ohio Environmental Protection Agency

Northwest District Office

347 North Dunbridge Road
Bowling Green, OH 43402-9398

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www.epa.state.oh.us

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

Re: Richland County
Pleasant Hill Outdoor Center
NPDES Permit

July 31, 2008

Mr. Scott Hall, Director
Pleasant Hill Outdoor Center
4654 Pleasant Hill Road
Perrysville, Ohio 44864

Dear Mr. Hall:

On July 15, 2008, an inspection was made of the wastewater treatment facilities serving the Pleasant Hill Outdoor Center located at 4654 Pleasant Hill Road, Perrysville, Richland County. Mr. Jim Machin, your certified operator, was present during the inspection to answer my questions.

We were pleased overall with the condition of the plant and with the care and maintenance that Mr. Machin is able to provide with frequently visiting the plant. The aeration and clarifier tanks were in satisfactory condition. The sand filters were in excellent condition. A clear effluent was being discharged.

A review of your discharge monitoring reports for the months of May 2007, through June 2008, revealed six violations of the limits contained in your NPDES permit. Four of these violations were for exceeding the total suspended solids (TSS) limit. Mr. Machin stated that he has learned to turn off the post aeration before sampling in order to prevent dirt from the bottom of the post aeration tank from contaminating the sample. No TSS violations have occurred since implementing this practice.

Your current NPDES permit expires on December 31, 2008. A renewal application should have been submitted no later than June 31, 2008. As of the date of this letter our office has not yet received a renewal application. Mr. Machin stated that he would investigate the status of the application submittal and get it to our office as soon as possible.

If you have any questions please call me at 419-373-3070.

Sincerely,

Walter Ariss
Environmental Specialist II
Division of Surface Water

/llr

Enclosure

pc: ~~DSW-NWD File, Jim Machin~~

OHIO ENVIRONMENTAL PROTECTION AGENCY

OPERATION AND MAINTENANCE INSPECTION
 WWTP'S LESS THAN 25,000 GPD

NPDES Permit No. 2PR00173

Facility Name Whosker Outdoor Center Expiration Date 12/31/2008

Facility Address 4654 Pleasant Hill Road Date 7/15/08 Time 11:00 am pm

City Perryville County Richland Township _____

Name and Address of Owner _____

Person Contacted Jim Machin - operator Owner Phone _____

Flow: Design 10,000 GPD Present 2,000 GPD (metered - estimated)

Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 80° sunny

OEPA Personnel Walter Ariss District NWDO

1. Plant Effluent - Mark Severity No.

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None	<input checked="" type="checkbox"/>	Clear	<input checked="" type="checkbox"/>	None	<input checked="" type="checkbox"/>	Colorless
1	Mild						
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

2. Effect of effluent on Receiving Stream Name: Tr's to Pleasant Hill Lake

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None	<input checked="" type="checkbox"/>	Clear	<input checked="" type="checkbox"/>	None	<input checked="" type="checkbox"/>	Colorless
1	Mild						
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

3. a. Plant has 2 excellent _____ good _____ fair _____ poor operation
 b. Plant has 2 excellent _____ good _____ fair _____ poor maintenance
 c. Sand filters have 2 excellent _____ good _____ fair _____ poor maintenance

d. Not operating at expected efficiency due to:

- (1) _____ hydraulic overload
 (2) _____ organic/ solids overload
 (3) _____ personnel inefficiency
 (4) _____ equipment failure
 (5) _____ wastes
 (6) _____

Disinfection: (Required May 1 thru Oct.31.)	
IN	OUT
_____	_____ Chlorination Tablets
_____	_____ Dechlorination Tablets
<input checked="" type="checkbox"/>	_____ U.V.

4. Yes _____ No Compliance with NPDES Permit

Periodic Violations Y N Parameters: TSS, NH₃
 Chronic Violations _____ X _____

5. Adequate plant safety

6. Operation and Maintenance Service Name Jim Machin

Frequency of Visits 1/week at least

Facility Name: Wooster Outdoor Center

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	<input checked="" type="checkbox"/>	Trash Trap	Pumping Frequency: <i>Just pumped a few weeks earlier</i>
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	<input checked="" type="checkbox"/>	Flow Equalization	<i>okay</i>
Aeration Equipment		Plant Timer <u>Y</u> <input checked="" type="checkbox"/> <u>N</u>	Cycle Time:
	<input checked="" type="checkbox"/>	Motor/ Blower Unit <i>running</i>	
Secondary Treatment	<input checked="" type="checkbox"/>	Aeration Tank	Color: <i>good color</i> Adequate Aeration: Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Final Settling	<input checked="" type="checkbox"/>	Clarifier	<i>looks good</i>
	<input checked="" type="checkbox"/>	Sludge Return	In <input checked="" type="checkbox"/> Out <input type="checkbox"/>
	<input checked="" type="checkbox"/>	Surface Skimmer	In <input checked="" type="checkbox"/> Out <input type="checkbox"/>
		Fixed Media Clarifier	
Tertiary Treatment	<input checked="" type="checkbox"/>	Surface Sand Filter	<i>very clean</i>
		Polishing Pond	
		Other	
Disinfection		Chlorine Tube Feeder	
		Dechlorination Tube Feeder	
	<input checked="" type="checkbox"/>	Ultraviolet (UV)	<i>in use</i>
Flow Metering	<input checked="" type="checkbox"/>	Elapsed Pump Time	<i>on EQ pumps</i>
		Recorder (continuous total)	
Pumps	<input checked="" type="checkbox"/>	Raw Wastewater (type) EQ	<i>okay</i>
	<input checked="" type="checkbox"/>	Sand Filter Effluent Dosing	<i>okay</i>
Sludge Handling	<input checked="" type="checkbox"/>	Aerated Storage Tank	<i>okay</i>
		Sludge Drying Bed	
Sludge Disposal	<input checked="" type="checkbox"/>	Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment	<input checked="" type="checkbox"/>	Post Aeration	<i>or</i>
		Spray Irrigation	
		Other	