

**Environmental  
Protection Agency**

Tim Strickland, Governor  
Lisa Fischer, Lt. Governor  
David Lewicki, Director

August 19, 2010

RE: KOOL LAKES FAMILY RV PARK  
PERMIT NO. 3PR00274  
PORTAGE COUNTY  
NELSON TOWNSHIP

Mr. Jeff Coldon  
Kool Lakes Campground  
12990 State Route 282  
Garrettsville, Ohio 44231

Dear Mr. Coldon:

On August 5, 2010, an inspection of the above referenced facility's wastewater treatment system was conducted. The facility was represented by you. The purpose of the inspection was to evaluate the operation and maintenance of the treatment plant 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/discussed:

1. The campground is licensed for 200 camp sites.
2. Valley Environmental is currently in charge of the technical operations of the wastewater treatment plant and is also responsible for collecting the samples and reporting the results to Ohio EPA's Surface Water Information Management System.
3. You indicated that you have a limited Class A wastewater license. You also indicated that you are going to take the test to obtain a Class A license.
4. The plant design of the wastewater treatment system is 30,000 gpd.
5. The blowers were running and the plant was receiving good aeration.
6. The contents of the aeration tank were light to medium brown in color and no foam was present. This is typical of a properly operating plant.
7. Both sludge return lines were functioning properly and returning medium brown water.
8. The skimmer return line was not returning any water due to a slight blockage at the skimmer. The skimmer should be checked daily for blockages.
9. The weir in the settling tank was free from scum.
10. Only one of two clarifiers is being utilized. The intake to one clarifier is plugged off. You indicated the system has been operated this way since you purchased the property in May 2006.
11. All four surface sand filter beds were free of vegetation and appeared to be well maintained.

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12. The facility has sludge drying beds. However the sludge drying beds have not been used since you purchased the property.
13. The dechlorination dispensing tube was adequately stocked with tablets. However, the chlorination dispensing tube was out of tablets.
14. Both the chlorination and dechlorination dispensing tubes should be appropriately stocked during summer. Summer is defined as the period from May 1<sup>st</sup> through October 31<sup>st</sup>.
15. The effluent in the disinfection vault was clear.
16. Flow is monitored with an American Sigma 980 ultrasonic flow meter.
17. McCoy Septic is contracted to pump out the trash trap once per year.

This office has recently reviewed your self-monitoring reports covering the period April 1, 2008 through July 31, 2010 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	31616	Fecal Coliform	30D Conc	1000	2600.	6/1/2008
001	31616	Fecal Coliform	1D Conc	2000	2600.	6/3/2008
001	00300	Dissolved Oxygen	1D Conc	6.0	5.7	7/1/2008
001	00300	Dissolved Oxygen	1D Conc	6.0	5.5	7/15/2008
001	00300	Dissolved Oxygen	1D Conc	6.0	5.6	7/22/2008
001	00300	Dissolved Oxygen	1D Conc	6.0	5.5	8/1/2008
001	00530	Total Suspended Solids	1D Conc	18.0	21.	5/5/2009
001	31616	Fecal Coliform	1D Conc	2000	20000.	7/1/2009
001	31616	Fecal Coliform	30D Conc	1000	20000.	7/1/2009
001	00300	Dissolved Oxygen	1D Conc	6.0	5.5	8/5/2009
001	00610	Nitrogen, Ammonia (NH3)	30D Conc	1.0	1.48	5/1/2010
001	00610	Nitrogen, Ammonia (NH3)	30D Qty	0.11	.11729	5/1/2010
001	31616	Fecal Coliform	30D Conc	1000	5800.	5/1/2010
001	31616	Fecal Coliform	1D Conc	2000	5800.	5/4/2010
001	00610	Nitrogen, Ammonia (NH3)	1D Conc	1.5	2.69	5/18/2010
001	00610	Nitrogen, Ammonia (NH3)	1D Qty	0.17	.23418	5/18/2010
001	31616	Fecal Coliform	30D Conc	1000	1000.	6/1/2010
001	31616	Fecal Coliform	30D Conc	1000	3600.	7/1/2010
001	31616	Fecal Coliform	1D Conc	2000	3600.	7/2/2010

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### Frequency Violations

Station	Reporting Code	Parameter	Sample Frequency	Expected	Reported	Violation Date
001	00083	Color, Severity	1/Day	1	0	05/01/2009
001	01330	Odor, Severity	1/Day	1	0	05/01/2009
001	01350	Turbidity, Severity	1/Day	1	0	05/01/2009
001	50050	Flow Rate	1/Day	1	0	06/06/2009
001	50050	Flow Rate	1/Day	1	0	06/07/2009
001	50050	Flow Rate	1/Day	1	0	06/30/2009

This office is in receipt of your e-mail dated August 11, 2010 which addresses your fecal coliform violations. No further information is required at this time,

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