



State of Ohio Environmental Protection Agency

**Southeast District Office**

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Logan, Ohio 43138

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

December 4, 2007

**Re:** Athens County  
City of Athens  
Compliance Evaluation Inspection  
NPDES Permit 0PD00000\*GD  
Correspondence (PWW)

Mayor and Council  
City of Athens  
8 East Washington Street  
Athens, Ohio 45701

Dear Mayor and Council:

On September 4, 2007, Mike McCullough, Jake Howdyshell and I conducted a Compliance Evaluation Inspection at the City of Athens wastewater treatment plant (WWTP). Mr. Jeff Arnold, Plant Supervisor, Mr. Joe Cantor and Mr. Scott Lambert represented the City of Athens and accompanied us during the inspection. The purpose of the inspection was to evaluate the status of the City's compliance with the terms and conditions set in the current National Pollutant Discharge Elimination System (NPDES) Permit.

The following observations were made during the inspection.

1. At the time of the inspection, half of the primary clarifiers were off-line and drained due to low influent flow. Upon inspection, the primary clarifiers appeared to be in a heightened state of deterioration. The concrete and piping was visibly aged and deteriorating. I expect that the other half of the primary clarifiers, on-line at the time of inspection, are in a similar state of deterioration. The sludge pits servicing the primary clarifiers appeared to be in a similar state of deterioration.

Part III, Section 3, Item A of your NPDES Permit states "At all times, the permittee shall maintain in good working order.....all treatment or control facilities...." As part of your response to this letter, please include a plan to evaluate the structural stability and treatment effectiveness of the primary clarifiers and sludge pits. In the plan, include a preliminary schedule for the rehabilitation or construction of new structures, if deemed necessary.

2. A noticeable amount of plastics and other large floating solids were observed in the chlorine contact tank. These types of solids should be removed by the recently repaired grit chamber. Please investigate possible causes and provide any findings in the response to this letter.

3. As clarified in the April 24, 2006 letter from Scott Lambert, the Sanitary Sewer Overflows (SSOs) experienced at the Richland Ave lift station are a result of Infiltration/Inflow (I/I). That is to say, the sewer system tributary to the Richland Ave lift station is not sufficiently watertight and allows an excess of "clean" water into the system during wet periods. The excess "clean" water surcharges the system beyond capacity and results in an SSO.

Each SSO occurrence is a violation of your NPDES Permit and Ohio Revised Code (ORC), and is subject to enforcement action by the Ohio EPA. Furthermore, if left unabated, the existence of a known I/I problem and SSO occurrences will greatly limit the amount urban growth permitted in the Richland Ave lift station sewershed. In the response to this letter, please include a plan to evaluate the Richland Ave lift station sewershed for I/I and eliminate the resulting SSOs.

A copy of my Compliance Evaluation Inspection report is enclosed. The assistance and cooperation received during the inspection was greatly appreciated. Should you have any further questions, please contact me at (740) 380-5226.

Sincerely,



Patrick Hudnall  
District Representative  
Division of Surface Water

PH/dh

Enclosure

- c: Jeff Arnold, City of Athens WWTP
- c: Nick Carr, Utilities Director, City of Athens
- c: Ray Hazlett, Service-Safety Director, City of Athens

**NPDES**  
Compliance Inspection Report

**A. NATIONAL DATA SYSTEM CODING**

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
0PD00000*GD	OH0023931	September 4, 2007	C	S	1

**B. FACILITY DATA**

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
City of Athens WWTP 557 East State Street Athens, Ohio 45701	9:30 a.m.	December 1, 2002
	Exit Time	Permit Expiration Date
	11:45 a.m.	July 31, 2007

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Jeff Arnold, Plant Supervisor	(740) 592-3346
Joe Cantor, Laboratory	(740) 593-3502
Scott Lambert, Sewer Supervisor	(740) 593-7636
Name, Address and Title of Responsible Official	Phone Number
Mayor and Council, City of Athens 8 East Washington Street Athens, Ohio 45701	(740) 592-3338

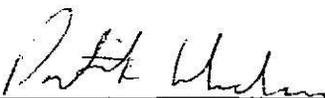
**C. AREAS EVALUATED DURING INSPECTION**

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>N</u> Pretreatment
<u>S</u> Records/Reports	<u>S</u> Laboratory	<u>N/A</u> Compliance Schedules
<u>S</u> Operations & Maintenance	<u>S</u> Effluent/Receiving Waters	<u>S</u> Self-Monitoring Program
<u>M</u> Facility Site Review	<u>S</u> Sludge Storage/Disposal	<u>    </u> Other
<u>U</u> Collection System		

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

**D. SUMMARY OF FINDINGS/COMMENTS** (attach additional sheets if necessary)

See attached inspection letter.

  
 \_\_\_\_\_  
 Patrick Hudnall, Inspector, Ohio EPA, Southeast District Office

12/11/07  
 \_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 Timothy M. Campbell, Reviewer, Ohio EPA, Southeast District Office

12/12/07  
 \_\_\_\_\_  
 Date

**E. PERMIT VERIFICATION**

Inspection Observations Verify the Permit	Yes	No	N/A	N/E
a. Correct name and mailing address of permittee	X			
b. Correct name and location of receiving waters	X			
c. Product(s) and production rates conform with permit application (industries)			X	
d. Flows and loadings conform with NPDES permit	X			
e. Treatment processes are as described in permit application/briefing memo	X			
f. New treatment process(es) added since last inspection	X			
g. Notification given to state of new, different, or increased discharges			X	
h. All discharges are permitted	X			
i. Number and location of discharge points are as described in permit	X			

Comments:

**F. COMPLIANCE SCHEDULES/VIOLATIONS**

	Yes	No	N/A	N/E
a. Any significant violations since the last inspection		X		
b. Permittee is taking actions to resolve violations			X	
c. Permittee has compliance schedule		X		
d. Compliance schedule contained in: _____				
e. Permittee is meeting compliance schedule			X	

Comments:

**G. OPERATION AND MAINTENANCE**

Treatment Facility Properly Operated and Maintained	Yes	No	N/A	N/E
a. Standby power available: Generator <u>X</u> Dual Feed _____	X			
b. Adequate alarm system available for power or equipment failures	X			
c. All treatment units in service other than backup units	X			
d. Sufficient operating staff provided: # of shifts <u>3</u> Days/Week <u>7</u>	X			
e. Operator holds unexpired license of class required by permit Class: <u>III</u>	X			
f. Routine and preventive maintenance schedule/performed on time	X			
g. Any major equipment breakdown since last inspection		X		
h. Operation and maintenance manual provided and maintained	X			
i. Any plant bypasses since last inspection		X		
j. Regulatory agency notified of bypasses: _____ on MORS _____ 800 Number			X	
k. Any hydraulic and/or organic overloads experienced since last inspection		X		

Comments:

Collection System	Yes	No	N/A	N/E
a. Percent combined system: <u>0%</u>				
b. Any collection system overflows since last inspection (CSO _____ SSO <u>6</u> )	X			
c. Regulatory agency notified of overflow (SSOs)	X			
d. CSO O and M plan provided and implemented			X	
e. CSOs monitored and reported in accordance with permit			X	
f. Portable pumps used to relieve system	X			
g. Lift station alarm systems provided and maintained	X			
h. Are lift stations equipped with permanent standby power or equivalent		X*		
i. Is there an inflow/infiltration problem (separate sewer system), or were there any major repairs to collection system since last inspection	X**			
j. Any complaints received since last inspection of basement flooding	X			
k. Are any portions of the sewer system at or near capacity	X***			

**Comments:** \*Portable pumps used during pump outages are not compatible with all pump station configurations.

\*\*i/i problems worst in area tributary to Richland Avenue liftstation. Major sewer repair work completed on Columbus Road project.

\*\*\*Richland Avenue main truck line is near half capacity during normal dry flow and can cause an SSO at the liftstation during heavy rain fall.

## H. SLUDGE MANAGEMENT

a. Sludge Management Plan (SMP): 07/08/86 Submitted Date  
06-086-SW Approval Number  
\_\_\_\_\_  
\_\_\_\_\_  
Not submitted  
\_\_\_\_\_  
N/A

	Yes	No	N/A	N/E
b. Sludge Management Plan current	X			
c. Sludge adequately disposed (Method: <u>Land application/injection</u> )	X			
d. If sludge is incinerated, where is ash disposed of? _____				
e. Is sludge disposal contracted (Name: <u>Craig Services</u> )	X			
f. Has amount of sludge generated changed significantly since last inspection		X		
g. Adequate sludge storage provided at plant	X			
h. Land application sites monitored and inspected per SMP	X			
i. Records kept in accordance with state and federal law	X			
j. Any complaints received in last year regarding sludge		X		
k. Is sludge adequately processed (digestion, dewatering, pathogen control)	X			

**Comments:**

**I. SELF-MONITORING PROGRAM**

<b>Part 1 Flow Measurement</b>		Yes	No	N/A	N/E
a.	Primary flow measuring device properly operated & maintained. Type of device: <input type="checkbox"/> ultrasonic & parshall flume <input type="checkbox"/> calculated from influent <input type="checkbox"/> weir <input type="checkbox"/> Other <input checked="" type="checkbox"/> ultrasonic & weir <input type="checkbox"/> Specify: _____	X			
b.	Calibration frequency adequate (date of last calibration: <u>Monthly</u> )	X			
c.	Secondary instruments (totalizers, recorders etc.) properly operated and maintained	X			
d.	Flow measurement equipment adequate to handle expected ranges of flows	X			
e.	Actual flow discharged is measured	X			
f.	Flow measuring equipment inspection frequency: _____ Daily <input checked="" type="checkbox"/> Weekly _____ Monthly _____ Other				

Comments:

<b>Part 2 Sampling</b>		Yes	No	N/A	N/E
a.	Sampling location(s) are as specified by permit	X			
b.	Parameters and sampling frequency agree with permit	X			
c.	Permittee uses required sampling method	X			
d.	Sample collection procedures are adequate	X			
i.	Samples refrigerated during compositing	X			
ii.	Proper preservation techniques used	X			
	Conform with 40 CFR 136.3	X			
e.	Monitoring records (e.g., flow, pH, D.O., etc.) maintained for a minimum of three years including all original strip chart recordings (e.g., continuous monitoring instrumentation, calibration, and maintenance records)	X			
f.	Adequate records maintained of sampling date, time, exact location, etc.	X			

Comments:

<b>Part 3 Laboratory General</b>		Yes	No	N/A	N/E
a.	EPA approved analytical testing procedures used (40 CFR 136.3)	X			
b.	If alternate analytical procedures are used, proper approval has been obtained		X		
c.	Analyses being performed more frequently than required by permit				X
d.	If (c) is yes, are results reported in permittee's self-monitoring report				X
e.	Commercial laboratory used 1. Parameters analyzed by commercial lab: <u>O&amp;G, TKN, metals, nitrite &amp; nitrate</u> 2. Lab name: <u>Alloway</u>	X			

Comments:

