



State of Ohio Environmental Protection Agency

Southeast District Office

2195 Front Street
Logan, Ohio 43138

TELE: (740) 385-8501 FAX: (740) 385-6490
www.epa.state.oh.us

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

December 29, 2009

Re: Gallia County
Village of Rio Grande WWTP
November 30, 2009 CEI
Correspondence (PWW)

Mayor and Council
Village of Rio Grande
P.O. Box 343
401 E. College Street
Rio Grande, Ohio 45674

Dear Ms. Perry:

On November 30, 2009, I conducted a Compliance Evaluation Inspection of the Rio Grande wastewater treatment facility located in Rio Grande, Ohio. Mr. Jeff Seagraves represented Rio Grande, and accompanied me during the inspection. Mr. John Stover of Rio Grande was also present during the inspection. The purpose of the inspection was to determine Rio Grande's compliance with NPDES Permit Number 0PB00035*FD and the Ohio Water Pollution Control Act, Revised Code Chapter 6111. On December 7, 2009, I also met with John Westfall, your certified operator, to look over some records held at the Gallipolis facility which is performing some of your lab work.

As a result of the inspection, I have the following comments:

1. All treatment units were in operation. The south sludge holding tank had just been emptied for land application and the north tank was to be emptied soon.
2. The chlorine contact tank, while out of operation for the winter season, had a build-up of algae on the walls which should be cleaned.
3. It was noted that wastewater samples being shipped to Gallipolis for lab analysis are not being stored on ice. Forty CFR Part 136 requires that samples be stored at $\leq 6^{\circ}\text{C}$ if analysis will not be started within 15 minutes. You must immediately put the samples on ice prior to shipment.
4. A review of the Discharge Monitoring Reports (DMR's) for the period January, 2008 through November 2009, revealed one permit limitation violation (fecal coliform 7/22/2009) and no frequency violations.

5. Part II, Item A of your NPDES permit contains requirements related to the wastewater Personnel Rule 3745-7 OAC, concerning plant classification, staffing, and record keeping. Your Class I treatment facility must be staffed by a Class I operator a minimum of 3 days/week, for a minimum of 1.5 hrs/week. It appears you are meeting this requirement.
6. We remind you of the following requirements. A copy of the contract you have with the certified operator must be kept at the plant site (see OAC 3745-7-02 (D) (2)). The operator of record must display a copy of his/her certification at the treatment plant or principal office of the owner (OAC 3745-7-05 (C)). Certain operation and maintenance records must be maintained within the treatment works (OAC 3745-7-09 (A)). Please see the attached copy of the record keeping requirements and follow this more closely.
7. While you have informed this office in writing that John Westfall is your operator of record, he is not listed as such in the database in our central office. Please complete the Operator of Record Notification Form 5121, and submit it to our Central Office. This form and other information related to the operator certification program can be obtained on our web site at:
<http://www.epa.state.oh.us/dsw/opcert/opcert.aspx>

The facility appears to be in substantial compliance with the terms and conditions of the NPDES permit. Attached is a copy of the inspection report which indicates satisfactory evaluations of the areas listed.

Please reply in writing, within 14 days, to the above comments and report.

Sincerely,



Dan Messerly
District Representative
Division of Surface Water

DM/dh

Enclosure

c: Sandy Perry, President, Board of Public Affairs, Village of Rio Grande
c: John Westfall, City of Gallipolis

NPDES
Compliance Inspection Report

A. NATIONAL DATA SYSTEM CODING

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
OPB00035*FD	OH0027278	November 30, 2009	E	S	P

B. FACILITY DATA

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Village of Rio Grande WWTP East side of SR 325, ¼ mile north of Int. SR 325/SR 588 Rio Grande, Ohio	2:00 p.m.	August 1, 2008
	Exit Time	Permit Expiration Date
	3:30 p.m.	July 31, 2013

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
John Westfall, Certified Operator Tim Seagraves, Operator; Jeff Seagraves, Assistant	(740) 446-1690 (740) 245-5822
Name, Address and Title of Responsible Official	Phone Number
Mayor Robert M. Easter, Village of Rio Grande P.O. Box 343, 401 E. College Street Rio Grande, Ohio 45674 (Sandy Perry, President, Board of Public Affairs)	(740) 245-5822

C. AREAS EVALUATED DURING INSPECTION

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>N/A</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>S</u> Facility Site Review	<u>S</u> Sludge Storage/Disposal	<u> </u> Other
<u>N</u> Collection System		

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated; N/A = Not Applicable)

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

*See cover letter regarding sample preservation.
See cover letter.



Dan Messerly, Inspector, Ohio EPA, Southeast District Office

12/28/09
Date



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

12/28/09
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			

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: _____			X	
e. Permittee is meeting compliance schedule			X	

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: No. of shifts: <u> 1 </u> Days/Week: <u> 5 </u>	X			
e. Operator holds unexpired license of class required by permit Class: <u> 1* </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 No.			X	
k. Any hydraulic and/or organic overloads experienced since last inspection		X		

Comments: *Holds Class III

Collection System	Yes	No	N/A	N/E
a. Percent combined system: <u> 0 </u> %			X	
b. Any collection system overflows since last inspection: CSO _____ SSO: _____		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: g. Collections lift stations have alarm lights but no remote dialing.

h. Portable engine driven pump; are mounting electrical generator in truck soon, for lighting and for pump station power.

I. SLUDGE MANAGEMENT

	Yes	No	N/A	N/E
a. Sludge adequately disposed (Method: Land application - liquid)	X			
b. If sludge is incinerated, where is ash disposed of?		X		
c. Is sludge disposal contracted (Name: Ron Evans)	X			
d. Has amount of sludge generated changed significantly since last inspection		X		
e. Adequate sludge storage provided at facility	X			
f. Land application sites monitored and inspected per state rules	X			
g. Records kept in accordance with state rules	X			
h. Any complaints received in last year regarding sludge		X		
i. Is sludge adequately processed (digestion, dewatering, pathogen control) in accordance with Ohio EPA rules	X			

Comments: 11-16-05 – Submitted Date (approved)

06-150-PW – Approved Number

k. Alkali addition, Option 6, VAR

AH.2 Aerobic digestion

I. SELF-MONITORING PROGRAM

Part 1 – Flow Measurement	Yes	No	N/A	N/E
a. Primary flow measuring device properly operated & maintained. Type of device: <input checked="" type="checkbox"/> ultrasonic & parshall flume <input type="checkbox"/> calculated from influent <input type="checkbox"/> weir <input type="checkbox"/> other <input type="checkbox"/> ultrasonic & weir specify:	X			
b. Calibration frequency adequate (date of last calibration: 6/4/09)	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: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other				

Comments: d. 0 – 2 MGA

Part 2 – Sampling	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: d. (ii) Samples are not being immediately cooled to 4°C prior to shipping to Gallipolis.

Part 3 – Laboratory, General	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:	X			
2. Lab name:				

Comments: e. City of Gallipolis Lab does: TSS, O&G, Ammonia, F.C., CBOD5, biosolids fec weight/weight Alloway, Marion, Ohio does: effluent metals, biosolids metals, nutrients, F.C.
 Belmont Labs, Englewood, Ohio does: dioxin
 American Analytical, Dublin, Ohio does: LL Mercury
 Village of Rio Grande staff does: Temp., D.O., pH, Flow, Chlorine, biosolids volume

Part 3 – Laboratory, Quality Control/Quality Assurance		Yes	No	N/A	N/E
f.	Quality assurance manual provided and maintained			X	
g.	Satisfactory calibration and maintenance of instruments and equipment	X			
h.	Adequate records maintained	X			
i.	Results of latest U.S. EPA quality assurance performance sampling program:*				
	Date: _____				_____ Satisfactory
					_____ Marginal
					_____ Unsatisfactory

Comments: * N/A (see Gallipolis records)

J. EFFLUENT/RECEIVING WATER OBSERVATIONS

Outfall #	Oil Sheen	Grease	Turbidity	Visible Foam	Visible Float Solids	Color	Other
001	None	None	None	None	None	None	

Comments: There was a buildup of algae at effluent in receiving stream.

MULTIMEDIA OBSERVATIONS

	Yes	No	N/A	N/E
a. Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories		X		
b. Do you notice staining or discoloration of soils, pavement, or floors		X		
c. Do you notice distressed (unhealthy, discolored, dead) vegetation		X		
d. Do you see unidentified dark smoke or dustclouds coming from sources		X		
e. Do you notice any unusual odors or strong chemical smells		X		
f. Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities		X		

If any of the above are observed, ask the following questions:

1. What is the cause of the conditions?
2. Is the observed condition or source a waste product?
3. Where is the suspected contaminant normally disposed?
4. Is this disposal permitted?
5. How long has the condition existed and when did it begin?