



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 Korteski, Director

November 19, 2009

**Re:** Pike County  
Village of Piketon  
0PB00031\*FD  
WWTP Inspection  
Correspondence (PWW)

Mayor Bill Spencer  
Village of Piketon  
109 Third Street  
Piketon, Ohio 45661

Dear Mayor Spencer:

On October 22, 2009, I conducted a compliance evaluation inspection at the Piketon Wastewater Treatment Plant (WWTP) located on Piketon Road. Mike Shaw represented the village and provided assistance during the inspection. The purpose of the inspection was to determine the facility's compliance status with the terms and conditions of NPDES permit number 0PB00031\*FD. A copy of the inspection report is attached.

The operation of the plant appeared to be satisfactory. However, the village should continue to work towards eliminating the sources of I/I.

If there are any questions, please call me at (740) 380-5268.

Sincerely,

  
Jack Knapp  
District Representative  
Division of Surface Water

JK/dh

Enclosure

c: Mike Shaw

**NPDES**  
Compliance Inspection Report

**A. NATIONAL DATA SYSTEM CODING**

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
0PB00031*FD	OH0027031	October 22, 2009	C	S	1

**B. FACILITY DATA**

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Piketon WWTP 626 Piketon Road Piketon, Ohio 45661	8:45 a.m.	July 1, 2006
	Exit Time	Permit Expiration Date
	9:45 a.m.	June 30, 2011

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Mike Shaw, Operator	(740) 357-0065
Name, Address and Title of Responsible Official	Phone Number
Village of Piketon 109 Third Street Piketon, Ohio 45661	(740) 289-8154

**C. AREAS EVALUATED DURING INSPECTION**

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

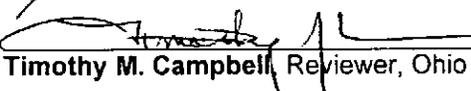
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

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

See attached letter.

  
\_\_\_\_\_  
Jack Knapp, Inspector, Ohio EPA, Southeast District Office

11/19/09  
\_\_\_\_\_  
Date

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

11/19/09  
\_\_\_\_\_  
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			

**Comments:** The plant is currently under construction to fix the problems at the head of the plant and to install a UV disinfection system.

**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	

**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: <u>1</u> shift <u>6</u> Days/Week	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> %			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:

## SLUDGE MANAGEMENT

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

Comments:



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: _____ N/A _____ Satisfactory _____ Marginal _____ Unsatisfactory				

Comments:

**J. EFFLUENT/RECEIVING WATER OBSERVATIONS**

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

**K. 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?

Comments: