



Environmental  
Protection Agency

John R. Kasich, Governor  
Mary Taylor, Lt. Governor  
Scott J. Nally, Director

May 3, 2012

Mr. Dwight Culbertson, Assistant Director of Utilities  
Clermont County Water Resources Department  
4400 Haskell Lane  
Batavia, Ohio 45103

**RE: Middle East Fork Reg. WWTP, NPDES Permit No. 1PK00010\*ND / OH0049387  
Compliance Evaluation Inspection**

Dear Mr. Culbertson:

On Friday, February 3, 2012, Mr. Ron Ware of this office conducted a Compliance Evaluation Inspection at the above-referenced facility. Clermont County was represented by you, Bill Beyer, Giles Thrift, and Tony Meek during the inspection. The purpose of the inspection was to evaluate plant operation and performance. A copy of the inspection report is enclosed.

“Records/Reports” received a “marginal” rating due to not submitting written notification to the Ohio EPA Southwest District Office of PEL exceedances for low level mercury in the final effluent from this facility (as required by Paragraph J in Part II of this facility’s current NPDES permit, 1PK00010\*ND).

“Sludge Storage/Disposal” received a “marginal” rating due to a significant backlog of waste sludge in the treatment plant at the time of the inspection. The stated reason for this waste sludge backlog was the unavailability of a sludge dewatering centrifuge that is shared by three of the County’s wastewater treatment facilities (the Nine Mile Regional WWTP, the Middle East Fork Regional WWP, and the O’Bannon Creek Regional WWTP). All eight of the aeration tanks at the Middle East Fork facility were on-line at the time of the inspection. The mixed liquor in each aeration tank had a dark brown color. The water surface had thick slimy foam that was also dark brown in color. These conditions are indicative of old sludge. The formation of filamentous bacteria (and settling problems in the secondary clarifiers) is a possibility with old sludge.

A huge backlog of waste sludge can severely hamper the best efforts of operators to keep the treatment works they maintain in compliance with the final effluent limits for those treatment works. The findings of a Compliance Evaluation Inspection at the County’s Nine Mile Regional WWTP in June 2005 noted problems with sludge handling at that facility (a copy is enclosed). The rotating schedule for use of this “shared” sludge dewatering centrifuge was cited as a contributing factor to the sludge handling problems at the Nine Mile facility.

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Clermont County Water Resources Department  
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Given the annual sludge production at the County's Middle East Fork facility (i.e., 652 dry tons in 2011 versus 487 dry tons from the O'Bannon Creek and Nine Mile facilities combined in 2011), it is highly recommended that Clermont County acquire a sludge dewatering device exclusively for use at its Middle East Fork facility.

If you have any questions regarding this report, please contact Mr. Ware at (937) 285 - 6098.

Sincerely,

A handwritten signature in black ink, appearing to read "Martyn Burt". The signature is written in a cursive style with a large initial "M".

Martyn Burt  
Compliance and Enforcement Supervisor  
Division of Surface Water

Enclosure

cc: Bill Beyer, Clermont County Water Resources Department

MB\bp



Permit # : 1PK00010\*ND  
NPDES #: OH0049387

Sections E thru K: Complete on all inspections as appropriate  
**Y – Yes, N – No, N/A – Not Applicable, N/E – Not Evaluated**

**Section E: Permit Verification**

Inspection observations verify the permit

- (a) Correct name and mailing address of permittee ..... Y
- (b) Flows and loadings conform with NPDES permit..... Y
- (c) Treatment processes are as described in permit application... Y
- (d) All discharges are permitted..... Y
- (e) Number and location of discharge points are as described  
in permit..... Y
- (f) Storm water discharges properly permitted..... N/E

Comments/Status:

**Section F: Compliance**

- (a) Any violations since the last inspection..... Y
- (b) Appropriate Non-compliance notification of violations..... N
- (c) Permittee is taking actions to resolve violations..... Y
- (d) Permittee has a compliance schedule..... Y
- (e) Compliance schedule contained in...NPDES Permit Compliance Schedule
- (f) Permittee is in compliance with schedule..... Y
- (g) Has biomonitoring shown toxicity in discharge since last inspection N

Comments/Status:

According to Paragraph J in Part II of this facility's current NPDES permit (1PK00010\*ND), this facility has a preliminary effluent limit (PEL) of 12ng/l for low level mercury. Any exceedance of this PEL must be reported to the Ohio EPA Southwest District Office in writing within 30 days of an effluent concentration sample result that exceeds the PEL. This written notification must detail the reasons why the PEL was exceeded and if there is an expectation of continued levels above the PEL.

There were high final effluent readings for low level mercury since July 2010 that exceeded 12 ng/l:

Sept. 3, 2010 - 43.1 ng/l

Jan. 11, 2011 - 19.3 ng/l

April 8, 2011 - 15.4 ng/l

Written notifications of these PEL exceedances were not received by the Southwest District Office of the Ohio EPA.

**Section G: Operation & Maintenance**

Permit # : 1PK00010\*ND  
NPDES #: OH0049387

**Treatment Works:**

Treatment facility properly operated and maintained

- (a) Standby power available.....generator  or dual feed ..... Y
- i. What does the back-up power source operate.....
- Generator # 1 – Influent pumps, screening and grit removal units, aeration blowers, various small equipment, and SCADA system.

Generator # 2 – Secondary clarifier drives, RAS pumps, aeration blowers, and various small equipment.
- ii. How often is the generator tested under load.....
- # 1 - monthly  
# 2 - weekly
- (b) Which components have an alarm system available for power or equipment failures.....
- Influent pumps, RAS pumps, air blowers.
- (c) All treatment units in service other than backup units..... Y
- (d) What method is used for scheduling routine & preventative maintenance (calendar, software, etc.).....
- software
- (e) Any major equipment breakdown since last inspection..... N
- (f) Operation and maintenance manual provided and maintained..... Y
- (g) Any plant bypasses since last inspection..... N
- (h) Any plant upsets since last inspection..... N

**Comments/Status:**

(c) All eight of the aeration tanks were on-line at the time of the inspection. The mixed liquor in each aeration tank had a dark brown color with heavy slimy foam, which is a sign of old sludge.

**Section G: Operation & Maintenance con't**

**Record Keeping/Operator of Record:**

- (a) Wastewater Treatment Works classification (OAC 3745-7)..... III
- (b) Operator of Record holds unexpired license of class required by Permit..... Y
- (c) Copy of certificate of Operator of Record displayed on-site..... Y
- (d) Has the Operator of Record submitted an ORC Notification form.. Y
- (e) Minimum operator staffing requirements fulfilled (OAC 3745-7).... Y
- (f) If a Staffing Reduction plan has been approved, are the stipulations of the plan being met..... Y
- (g) Operator of Record log book provided..... Y
- (h) Format of log book (e.g. computer log, hard bound book)  

Hard bound book.
- (i) Log book kept onsite (in an area protected from weather)..... Y
- (j) Log book contains the following:
  - i. Identification of treatment works..... Y
  - ii. Date/times of arrival/departure for Operator of Record and any other operator required by OAC 3745-7..... Y
  - iii. Daily record of operator and maintenance activities (including preventative maintenance, repairs and request for repairs, process control test results, etc.)..... N
  - iv. Laboratory results (unless documented on bench sheets)... N
  - v. Identification of person making entries..... Y
- (k) Has the Operator of Record submitted written notifications to the permittee, Ohio EPA and, if applicable, any local environmental agencies when a collection system overflow, treatment plant bypass or effluent limit violation has occurred..... Y

**Comments/Status:**

(j) Preventative maintenance records are kept in separate log books. Laboratory results are also kept in separate log books.





(b) Has amount of sludge generated changed significantly since the

Pathogen Reduction Alternative	84370 Vector Attraction Reduction Options									
	Option 1 -38% Volatile Solids Reduction	Option 2 -Anaerobic Bench Scale Analysis	Option 3 - Aerobic Bench Scale Analysis	Option 4 - Specific Oxygen Uptake Rate	Option 5 - Aerobic Time and Temperature	Option 6 - Alkali Addition	Option 7 - >75% Percent Solids without Unstabilized	Option 8 - >75% Percent Solids with Unstabilized	Option 9 - Land Injection	Option 10 - Immediate Incorporation
Alternative 1 - Geometric Mean of Seven Fecal Samples (84369)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 2 - Aerobic Digestion (46396)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 2 - Air Drying (46396)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 2 - Anaerobic Digestion (46396)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 2 - Composting (46396)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 2 - Lime Treatment (46396)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 3 - Approved Equivalent Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

last inspection..... N

(c) How much sludge storage is provided at the plant.....

1.7 million gallons of aerobic storage

(d) Records kept in accordance with State and Federal law (5 years according to OAC 3745-40-06)..... Y

(e) Any complaints received in last year regarding sludge..... N

(f) 5/8" screen at headworks for facilities that land apply sludge..... Y

(g) Are sludge application sites inspected to verify compliance with NPDES permit..... Y

(h) Is a contractor used for sludge disposal..... Y

If so, what is the name of the contractor.....

Utter Construction

**Comments/Status:**

There was a significant back log of waste sludge in the treatment plant at the time of the inspection.

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**Section I: Self-Monitoring Program**

**Flow Measurement:**

- (a) Primary/Secondary flow measuring devices (e.g. weir with ultrasonic level sensor):  

Parshall flume with ultrasonic level sensor
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- (b) Flow meter calibrated annually ..... Y  
(Date of last calibration: November 29, 2011)
- (c) 24-hour recording instruments operated and maintained..... Y
- (d) Flow measurement equipment adequate to handle full range of flows..... Y
- (e) All discharged flow is measured..... Y

**Comments/Status:**

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**Section I: Self-Monitoring Program (con't)**

**Sampling:**

- (a) Sampling location(s) are as specified by permit..... Y
- (b) Parameters and sampling frequency agree with permit..... Y
- (c) Permittee uses required sampling method..... Y  
(see GLC page)
- (d) Monitoring records (i.e., flow, pH, DO) maintained for a minimum of three years including all original strip chart recordings (i.e, continuous monitoring instrumentation, calibration and maintenance records)..... Y

**Comments/Status:**

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**Section I: Self-Monitoring Program (con't)**

**Laboratory:**

*General*

- (a) Does the Quality Assurance Manual contain written Standard Operating Procedures (SOP's) for all analysis performed onsite..... Y
- (b) Do SOP's include the following if applicable..... Y
  - Title
  - Scope and Application
  - Summary
  - Sample Handling and Preservation
  - Interferences
  - Apparatus and Materials
  - Reagents
  - Procedure
  - Calculations
  - Quality Control
  - Maintenance
  - Corrective Action
  - Reference (Parent Method)

*Note: Standard Methods 1020A establishes that "Quality assurance (QA) is the definitive program for laboratory operation that specifies the measure required to produce defensible data of known precision and accuracy. "Standard operating procedures are to be used in the laboratory in sufficient detail that a competent analyst unfamiliar with the method can conduct a reliable review and/or obtain acceptable results." SOPs should be developed for each analytical procedure.*

- (c) EPA approved analytical testing procedures used (40 CFR 136.3).. Y
- (d) If alternate analytical procedures are used, proper approval has been obtained..... N/A
- (e) Analyses being performed more frequently than required by permit. Y
- (f) If (e) is yes, are results in permittee's self-monitoring report..... Y
- (g) Satisfactory calibration and maintenance of instruments/equipment. Y (see score from GLC page)
- (h) Commercial laboratory used..... Y  
Parameters analyzed by commercial lab: Low level mercury, metals (final effluent and sludge), bioassays

Lab name: Belmonte Labs (low level mercury and metals)  
Enviroscience (bioassays)

*Discharge Monitoring Report Quality Assurance (DMRQA)*

- (a) Participation in latest USEPA quality assurance performance sampling..... Y  
Date: 07/22/11
- (b) Were any parameters "Unsatisfactory" ..... N
- (c) Reasons for "Unsatisfactory" parameters.....

N/A

**Comments/Status:**

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**Section J: Effluent/Receiving Water Observations**

Outfall # 1PK00010001

Outfall Description: Plant outfall to the East Fork of the Little Miami River

Receiving Stream: The East Fork of the Little Miami River

Receiving Stream Description: Warm Water Habitat, Primary Contact Recreation

**Comments/Status:**

The plant's final effluent was clear, and free of any visible solids, oil/grease or foam.

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**Section K: Multimedia Observations**

- (a) Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories..... N
- (b) Do you notice staining or discoloration of soils, pavement or floors.. N
- (c) Do you notice distressed (unhealthy, discolored, dead) vegetation.. N
- (d) Do you see unidentified dark smoke or dust clouds coming from sources other than smokestacks..... N
- (e) Do you notice any unusual odors or strong chemical smells..... N
- (f) Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities..... N

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

- (1) What is the cause of the condition?
- (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/Status:**

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Baalance</b>				
• Standard Weights	• Either NIST Class s or ASTM/ANSI Class 1 weights <sup>1,2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Frequency / Documentation	• Calibration verification required at least once each day the balance is used. <sup>3</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Cleanliness, air movement, vibration	• Cleanliness of balance is a must and air movement and vibration needs to be kept to a minimum <sup>1</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Service and recalibrate annually (manufacturer representative or comparable) <sup>1</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Must be able to measure to 0.1 grams <sup>4</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments: :

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Drying Oven (Suspended Solids)</b>				
• Temperature Recordkeeping	• Temperature recorded with each use <sup>4</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Frequency / Documentation	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup> . Correction factor posted on thermometer / equipment <sup>1</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Thermometer temperature accurate to 0.5° Celsius <sup>5</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Acceptable temperature range is 103° – 105° C <sup>4</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments: :

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>pH Meter</b>				
<ul style="list-style-type: none"> <li>• Calibration Frequency / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples)<sup>3</sup></li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<b>A</b>
		<ul style="list-style-type: none"> <li>• Logbook maintained<sup>2</sup></li> </ul>	<input checked="" type="checkbox"/> Yes	
<ul style="list-style-type: none"> <li>• Minimum of 2 point calibration</li> </ul>	<ul style="list-style-type: none"> <li>• Calibration per manufacturer specification and calibration buffers must bracket anticipated result<sup>7</sup></li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Slope Documentation / Acceptability</li> </ul>	<ul style="list-style-type: none"> <li>• Slope acceptable range indicated on benchsheet<sup>2</sup></li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Buffer Expiration Date</li> </ul>	<ul style="list-style-type: none"> <li>• Buffers must not be expired</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Instrument manual available</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>• Teflon covered magnetic stirrer or equivalent for mixing<sup>8</sup></li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Comments: :          				
Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Dissolved Oxygen Meter</b>				
<ul style="list-style-type: none"> <li>• Calibration Method</li> </ul>	<ul style="list-style-type: none"> <li>• Air or known DO calibration method<sup>10</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>• Calibration per manufacturer specification<sup>10</sup></li> </ul>	<input type="checkbox"/> Yes	
<ul style="list-style-type: none"> <li>• Calibration Frequency / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Logbook maintained<sup>2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>• Calibration verification required at least once each day the meter is used.<sup>3</sup></li> </ul>	<input type="checkbox"/> Yes	
<ul style="list-style-type: none"> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Small to no bubble present under membrane (must be smaller than the lead in number 2 pencil)<sup>11</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>• Instrument manual available</li> </ul>	<input type="checkbox"/> Yes	
Comments:          				

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Incubator (CBOD/ E-Coli)</b>				
<ul style="list-style-type: none"> <li>• Temperature Recordkeeping</li> </ul>	<ul style="list-style-type: none"> <li>• Temperature checked / recorded twice daily for each shelf in use<sup>1</sup>(E-Coli)</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Temperature checked / recorded daily<sup>2</sup> (CBOD)</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Acceptable temperature range (CBOD) is 20° C ±1.0<sup>o12</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Acceptable temperature range (E-Coli) is 35° C ±0.5<sup>o22</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Logbook maintained<sup>2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Temperature Calibration / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer calibrated annually with NIST traceable thermometer<sup>1,2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Temperature correction information posted on incubator<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• E-Coli can use multiple tubes (five 20 ml or ten 10 ml), or mfg's multi-well tray</li> </ul>	<ul style="list-style-type: none"> <li>• E-coli Ultraviolet lamp (365 nm wave length, 6 W bulb)<sup>23</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Instrument manual available</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Temperature Log (thermometer accurate to 0.5 Celsius).<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments: :

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Refrigerator</b>				
<ul style="list-style-type: none"> <li>• Temperature Recordkeeping</li> </ul>	<ul style="list-style-type: none"> <li>• Temperature Log (thermometer accurate to 0.5 Celsius).<sup>5</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Temperature Calibration / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer calibrated annually with NIST traceable thermometer<sup>1,2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer held in water bath.<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Refrigerator temperature ≤6° Celsius.<sup>13</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Do not store volatile solvents, food, or beverages.<sup>14</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Chlorine Meter</b>				
• Calibration Frequency / Documentation	• pH / millivolt meter read to 0.1 mV <sup>15</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples) <sup>3</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Method	• Calibration using three iodate solutions 0.2, 1.0, 5.0 milliliters or calibration per manufacturer specification <sup>16</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Standards used for calibration not expired	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Slope Documentation / Acceptability	• Calibration curve (acceptable slope)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Electrode free of deposits and foreign material	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained. <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: :				

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Ammonia Meter</b>				
• Calibration Frequency / Documentation	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples) <sup>3</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Slope acceptability	• Verify calibration slope is acceptable (per mfg. spec.).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Method	• Standards used for calibration (3 ammonia solutions of 10 mg/l, 1 mg/l, and 0.1 mg/l) or per mfg. spec. <sup>17</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Standards used for calibration not expired	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Electrode free of deposits and foreign material	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Teflon covered magnetic stirrer or equivalent for mixing <sup>18</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: :				

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Sample Collection/Handling</b>				<b>A</b>
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed). <sup>19</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
• Chain of Custody	• Chain of custody (description, date, time, signature). <sup>19</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Composite samples refrigerated during sample collection <sup>14</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Equipment blanks utilized <sup>14</sup>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	• SOP for cleaning of sampling equipment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Logbook being maintained <sup>2</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
<p>Comments: Sample analysis performed at County lab in Milford. Lab staff cleans and provides sample containers to treatment plant staff. Sample collection tubing is cleaned weekly by treatment plant staff, and changed out when necessary.</p> <p>It is recommended that equipment blanks be used to confirm that the weekly cleaning of the sample collection tubing is adequate, particularly in the summer.</p>				
Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Desiccator</b>				
• General criteria	• Properly working seals.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Desiccant fresh (blue color)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Documentation	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				
Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Bench sheets</b>				
• General criteria	• Date(s) <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Analyst initials <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Blue or black ink pen <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Calibration information <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Equations, calculations, units for all measurements, notations, and results present <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Corrections, single line through, initialed and dated <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Hot Water Bath (Fecal Coliform/E. Coli)</b>				
<ul style="list-style-type: none"> <li>• Temperature Recordkeeping</li> </ul>	<ul style="list-style-type: none"> <li>• Temperature Log (thermometer accurate to 0.2° C)<sup>21</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Incubator temperature 44.5° C ± 0.2°<sup>21/24</sup></li> </ul>			
<ul style="list-style-type: none"> <li>• Temperature Calibration / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer calibrated annually with NIST traceable thermometer<sup>1,2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Log book being maintained<sup>2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Water Level</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer total immersion or partial (line on thermometer to ID immersion depth)<sup>1,5</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Autoclaves/Steam Sterilizers</b>				
<ul style="list-style-type: none"> <li>• All apparatus utilized is adequately sterilized before use</li> </ul>	<ul style="list-style-type: none"> <li>• Sterilizing temperature 121° C<sup>25</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• 10 to 30 minutes time based on material being sterilized<sup>26</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Verify the autoclave temperature weekly by using a maximum registering thermometer (MRT) to confirm that 121°C has been reached as measured in the exhaust.<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Date, contents, sterilization time and temperature, total time in autoclave, and analyst's initials should be recorded each time the autoclave is used<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Temperature Calibration / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer calibrated annually with NIST traceable thermometer<sup>1,2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> <li>• Log book being maintained<sup>2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> <li>• Performance Checks</li> </ul>	<ul style="list-style-type: none"> <li>• Test monthly for efficacy using a biological such as commercially available <i>Geobacillus stearothermophilus</i> in spore strips, suspensions, or capsules<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?	Rating
<b>Final Effluent Temperature Monitoring</b>		Acceptable?	
• General Criteria	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>A</b>
	• Thermometer accurate to 0.1° Celsius <sup>5</sup>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Log book being maintained <sup>2</sup>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Number of Criteria Rated:</b>		Acceptable	<b>3</b>
		Marginal	
		Unacceptable	
		<b>Total Number of Areas Rated</b>	<b>3</b>
<p><b>Acceptable Ratings</b> – No action required (recommend SOP’s written or updated, perform DMRQA’s for all onsite analysis, recommend voluntary lab analyst certification, written response not required).</p>			
<p><b>Marginal Ratings</b> – Improvements required, written response required (recommend SOP’s be written or updated, recommend they perform DMRQA’s for all onsite analysis, recommend voluntary lab analyst certification, require deficiencies to be addressed in written response).</p>			
<p><b>Unsatisfactory Rating</b> - Improvements required, written response required, NOV issued (recommend SOP’s be written or updated, recommend they perform DMRQA’s for all onsite analysis, recommend voluntary lab analyst certification, require deficiencies to be addressed in written response to NOV).</p>			
<p>Consider recommending PAI Audit from DES when:</p>	<p>&gt;60% of ratings are Marginal &gt;45% of ratings are a combination of Marginal or Unacceptable &gt;30% of ratings are Unacceptable</p>		

## Notation of Referenced Method

- |                            |                              |
|----------------------------|------------------------------|
| 1 Method 9020-B, Item 3    | 14 Method 1060A, Item 1      |
| 2 Method 1020-A, Item 1    | 15 Method 4500-CI I, Item 2  |
| 3 Method 1020-B, Item 10   | 16 Method 4500-CI I, Item 4  |
| 4 Method 2540-B, Item 2    | 17 Method 4500-NH3 D, Item 4 |
| 5 Method 2550-B, Item 1    | 18 Method 4500-NH3 D, Item 2 |
| 6 Method 1020-A, Item 1    | 19 Method 1060-B, Item 2     |
| 7 Method 4500-H B, Item 4  | 20 Method 1060-B, Item 1     |
| 8 Method 4500-H B, Item 2  | 21 Method 9222D, Item 1      |
| 9 Method 1020-B, Item 2    | 22 Method 9223 B, Item 2     |
| 10 Method 4500-O B, Item 3 | 23 Method 9223 B, Item 3     |
| 11 Method 4500-O G, Item 3 | 24 Method 1603, Item 2       |
| 12 Method 5210-B, Item 5   | 25 Method 9030-B, Item 3     |
| 13 CFR 136.3, Table II     | 26 Method 9020 B, Table IV   |

**Equipment Logbook Content** - all maintenance performed on a piece of equipment should be documented in the logbook. This should include parts replacement and routine maintenance activities. Entries should include date, maintenance performed and initials of person making entry.

# General Lab Criteria

<b>Preservation and Holding Times</b>						
Parameter	Container	Min. Sample Size (mL)	Sample Type	Preservation	Maximum Storage Time	
					Recommended	Regulatory
BOD / CBOD	P, G	1000	G, C	Refrigerate $\leq 6^{\circ}\text{C}$	6h	48h
TSS	P, G	200	G, C	Refrigerate $\leq 6^{\circ}\text{C}$	7 d	7 d
pH	P, G	50	G	Analyze immediately	0.25h	0.25 h
NH3-N	P, G	500	G, C	Analyze as soon as possible or add $\text{H}_2\text{SO}_4$ to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	7 d	28 d
TRC	P, G	500	G	Analyze immediately	0.25h	0.25 h
DO (electrode)	G, BOD Bottle	300	G	Analyze immediately	0.25h	0.25 h
Temperature	P, G	--	G	Analyze immediately	0.25h	0.25 h
Metals, general	P, G	1000	G, C	For dissolved filter immediately and add $\text{HNO}_3$ to pH <2	6 months	6 months
Purgeables by purge and trap	G (PTFE lined lid)	40 (X2)	G	HCl to pH<2, Refrigerate $\leq 6^{\circ}\text{C}$	7 d	14 d
Base/Neutrals and acids	G (solvent rinsed or baked)	1000	C, G	Refrigerate $\leq 6^{\circ}\text{C}$	7 d	7 days until extraction 40 days after extraction
Pesticides	G (PTFE lined lid)	1000	C	Refrigerate $\leq 6^{\circ}\text{C}$	7 d	7 days until extraction 40 days after extraction
Fecal Coliform / E-Coli	G, P (Sterilized)	100	G	Refrigerate $\leq 10^{\circ}\text{C}$ If chlorine present, add sodium thiosulfate tablet	6 hrs transport Start analysis within 2 hrs of receipt in lab.	
Oil and Grease	G	1000	G	HCl or $\text{H}_2\text{SO}_4$ to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	28 d	28 d

<b>Approved Standard Methods</b>	
CBOD / BOD 5 Day	Std Methods 5210-B
Ammonia, Selective Electrode Method	Std Methods 4500-NH3 D
Total Residual Chlorine, DPD Colorimetric Method	Std Methods 4500-Cl G
Total Suspended Solids, Dried at 103-105 °C	Std Methods 2540-D
Dissolved Oxygen, Membrane Electrode Method	Std Method 4500-O G
pH, Electrometric Method	Std Methods 4500-H+ B
Fecal Coliform, Membrane Filter Procedure	Std Methods 9222D
Escherichia Coli, Enzyme Substrate Test	Std Method 9223B
Escherichia Coli Membrane Filtration Procedure	EPA Method 1603
Oil and Grease	USEPA 1664A or Std Methods 5520B
Metals, general	USEPA 200, Std Methods 3111B or C, or 3120B
Volatiles (Purgeables by purge and trap)	USEPA 6210, Std Methods 624
Semi-Volatiles (Base/Neutrals and acids)	USEPA 6410, Std Methods 625
Pesticides	USEPA 6410 and 6630, Std Methods 608



State of Ohio Environmental Protection Agency

Southwest District

401 East Fifth Street  
Dayton, Ohio 45402-2911

TELE: (937)285-6357 FAX: (937)285-6249  
www.epa.state.oh.us

Bob Taft, Governor  
Bruce Johnson, Lt. Governor  
Joseph P. Koncelik, Director

July 14, 2005

Mr. Thomas Yeager, Utilities Director  
Clermont County Water & Sewer District  
2379 Clermont Center Dr.  
Batavia, OH 45103

**Re: NPDES Permit Compliance Evaluation Inspection  
1PK00008\*JD / OH0049361 Ninemile Creek WWTP**

Dear Mr. Yeager:

On June 23, 2005, Bruce Smith of this office conducted an NPDES Compliance Evaluation Inspection at the above referenced facility. John Teeter and Dave Linville represented the sewer district during the inspection. The purpose of the inspection was to evaluate several aspects of plant operation and performance and to assist in the determination of the facility's overall compliance with its National Pollutant Discharge Elimination System (NPDES) permit.

As indicated in the enclosed NPDES Compliance Inspection Report, all of the areas that were evaluated were rated as satisfactory except Effluent/Receiving Waters and Sludge Storage/Disposal which were rated as marginal.

The marginal ratings for Effluent/Receiving Waters and Sludge Storage/Disposal are related. Wastewater biosolids were noted at the discharge to Ninemile Creek which was attributed primarily to the inability to adequately remove solids from the treatment system. The representatives reported that a dewatering centrifuge is made available to the plant on a rotating basis between three facilities. The frequency was estimated as little as once every three months. The result is a build up of solids in the treatment system leading to "old" poorly settling sludge. Significant scum on the clarifiers along with solids carryover to the stream follow. Please refer to the attached report for additional details regarding conditions at the facility.

In conversation with Bill Slaven, Operations Manger, the county proposes to rent a centrifuge to bring down the solids levels in the treatment system. In addition, chlorination of the activated sludge has been initiated to assist in settling by elimination of filamentous bacteria. These remedies may be adequate in the short term but are not likely sustainable. The long term plan to provide a belt filter press at the County's Middle East Fork facility and rotate the existing centrifuge between two facilities is also likely to improve solids management. However, diligent management of solids until this time must be practiced.

Ninemile Creek WWTP

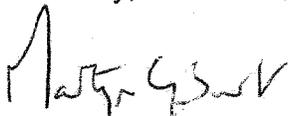
July 14, 2005

Page 2

Some other conditions at the facility are worth pointing out and should be considered with respect to adequate operations. Mr. Smith noted that the off-line oxidation ditch appeared to contain significant quantity of septic solids and the off-line clarifier was covered with a dry scum later with vegetative growth. The mechanical coarse bar screen has been inoperable for approximately one year.

If you have any questions about the findings in this report, please contact Mr. Smith in this office at (937) 285-6099.

Sincerely,



Martyn G. Burt

Compliance and Enforcement Group Leader  
Division of Surface Water

Attachment

cc: Bill Slaven, Operations Manager  
Clermont County Board of Commissioners

Permit #: 1PK00008JD  
 NPDES #: OH0049361



State of Ohio Environmental Protection Agency  
 Southwest District Office

NPDES Compliance Inspection Report

Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
1PK00008*JD	OH0049361	06/23/2005	C	S	1

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Clermont County Nine Mile Creek WWTP 560 Locust Corner Rd. New Richmond, OH Clermont County	1:20 p.m.	January 1, 2004
	Exit Time	Permit Expiration Date
	3:35 p.m.	December 31, 2008
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)	
John Teeter, Operator Dave Linville, Operator	513-553-4737	
Name, Address and Title of Responsible Official	Phone Number	
Thomas Yeager, Utilities Director Clermont County Water & sewer District 2379 Clermont Center Dr. Batavia, Ohio 45103	513-732-7934	

Section C: Areas Evaluated During Inspection					
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)					
S	Permit	S	Flow Measurement	N/A	Pretreatment
S	Records/Reports	N	Laboratory	N/A	Compliance Schedule
S	Operations & Maintenance	M	Effluent/Receiving Waters	S	Self-Monitoring Program
S	Facility Site Review	M	Sludge Storage/Disposal		Other
N	Collection System				

**Section D: Summary of Findings (Attach additional sheets if necessary)**  
 See Attached Report and cover letter.

Inspector	Reviewer
 Bruce E. Smith Division of Surface Water Southwest District Office	 Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office
7/14/05 Date	7/15/05 Date

Permit #: 1PK00008JD  
 NPDES #: OH0049361

Sections E thru K: Complete on all inspections as appropriate  
**Y – Yes, N – No, N/A – Not Applicable, N/E – Not Evaluated**

**Section E: Permit Verification**

Inspection observations verify the permit

- (a) Correct name and mailing address of permittee ..... Y
- (b) Correct name and location of receiving waters..... Y
- (c) Product(s) and production rates conform with permit application (Industries)..... N/A
- (d) Flows and loadings conform with NPDES permit..... Y
- (e) Treatment processes are as described in permit application... Y
- (f) New treatment process(es) added since last inspection..... N
- (g) Notification given to State of new, different or increased discharges..... N/A
- (h) All discharges are permitted..... Y
- (i) Number and location of discharge points are as described in permit..... Y

Comments/Status:

**Section F: Permit Verification**

- (a) Any significant violations since the last inspection..... N
- (b) Permittee is taking actions to resolve violations..... N/A
- (c) Permittee has a compliance schedule..... N
- (d) Compliance schedule contained in
- (e) Permittee is meeting compliance schedule..... N/A

Comments/Status:

Review Period 1/04 - 5/05

**Effluent Limitation Violations**

Source of silver tracked to Beechmont lift station and potential sources identified.

Permit No	Reporting Period	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
1PK00008*JD	November 2004	001	01079	Silver, Total Recoverable	30D Conc	1.3	1.5	11/1/2004
1PK00008*JD	January 2005	001	01079	Silver, Total Recoverable	30D Conc	1.3	1.75	1/1/2005
1PK00008*JD	February 2005	001	01079	Silver, Total Recoverable	30D Conc	1.3	1.4	2/1/2005
1PK00008*JD	April 2005	001	01079	Silver, Total Recoverable	30D Conc	1.3	1.45	4/1/2005

**Section G: Operation & Maintenance**

**Treatment Works:**

Treatment facility properly operated and maintained

- (a) Standby power available.....generator  or dual feed ..... Y
- (b) Adequate alarm system available for power or equipment failures.. Y
- (c) All treatment units in service other than backup units..... N
- (d) Operator holds unexpired license of class required by permit..... Y  
 Class: III Bill Slaven
- (f) Routine and preventative maintenance schedule/performed  
 on time..... N/E
- (g) Any major equipment breakdown since last inspection..... N
- (h) Operation and maintenance manual provided and maintained..... N/E
- (i) Any plant bypasses since last inspection..... N
- (j) Regulatory agency notified of bypasses..... N/A  
 On MORs  and/or Spill Hotline (1-800-282-9378)
- (k) Any hydraulic and/or organic overloads since last inspection..... N/E

**Collection System:**

- (a) Percent combined system: 0 %
- (b) Any collection system overflows since last inspection..... N/E  
 (CSO  and/or SSO )
- (c) Regulatory agency notified of overflows (SSOs)..... N/E
- (d) CSO O&M plan provided and implemented..... N/A
- (e) CSOs monitored and reported in accordance with permit..... N/A
- (f) Portable pumps used to relieve system..... N/E
- (g) Lift station alarms provided and maintained..... N/E
- (h) Are lift stations equipped with permanent standby power  
 or equivalent..... N/E
- (i) Is there an inflow/infiltration problem (separate sewer system),  
 or were there any major repairs to collection system since  
 last inspection..... N/E
- (j) Any complaints received since last inspection of basement flooding N/E
- (k) Are any portions of the sewer system at or near capacity..... N/E

**Comments/Status:**

c) Grit pump not in operation (approximately 3 months). Repair underway.  
 Mechanical coarse bar screen not operational (approximately 1 year).  
 One oxidation ditch off-line. Switched approximately 1/yr. Off-line ditch contained significant quantity of septic solids.  
 One clarifier off-line. Covered with crusted solids layer.

b) Alarms: Power, High/Low influent, clarifier torque, gen-set activation

Oxidation ditch, trench to clarifiers and clarifier contained significant foam (reportedly Nicardia). Bio-solids in clarifier weir trough.

Two operators (one with duties at Felicity WWTP). Grounds keeping contracted.

Section H: Sludge Management

- (a) Sludge management plan (SMP)  
 Submitted date: **6/19/1996** Approval #: **05-354-PW** Not submitted  N/A
- (b) Sludge management plan current..... Y  
 (c) Sludge adequately disposed..... Y  
 (Method: Land application)  
 (d) If sludge is incinerated, where is ash disposed of  
 (e) Is sludge disposal contracted..... Y  
 (Name: **Synagro**)  
 (f) Has amount of sludge generated changed significantly since  
 last inspection.....  
 (g) Adequate sludge storage provided at plant..... Y  
 (h) Land application sites monitored and inspected per SMP..... N/E  
 (i) Records kept in accordance with State and Federal law..... Y  
 (j) Any complaints received in last year regarding sludge..... Y  
 (k) Is sludge adequately processed (digestion, pathogen control)..... N/E

**Comments/Status:**

Dewatering centrifuge shared between three facilities. Only available at Nine Mile WWTP approximately 1/3 months. Sludge digesters full of liquid (some decant volume available) despite recent dewatering. MLSS in Oxidation ditches somewhat high and considered "old".

Sludge Production:	2004	902.61	Dry tons
Influent CBOD average	190.4 mg/l	(1/04 - 4/04)	
Flow average	1.44 MGD		Sludge Yield 1.5 lb biomass / lb BOD
% Volatile SS average	68.8 %		

Section I: Self-Monitoring Program

**Flow Measurement:**

- (a) Primary flow measuring device operated and maintained..... Y  
 Type of device: Ultrasonic & Parshall flume  Ultrasonic & Weir  Weir   
 Calculated from influent  Other  (Specify: )
- (b) Calibration frequency adequate ..... Y  
 (Date of last calibration: 1/yr by Rod & Myers)  
 (c) Secondary instruments operated and maintained..... Y  
 (d) Flow measurement equipment adequate to handle full range of flows... Y  
 (e) Actual flow discharged is measured..... Y  
 (f) Flow measuring equipment inspection frequency  
 Daily  Weekly  monthly  other

**Comments/Status:**

Flows	Period of Review	1/4 - 5/05
	Average	1.44 MGD
	Maximum	4.91 MGD
# days > 3.0 MGD design flow	8	(1.6%)

**Section I: Self-Monitoring Program (con't)**

**Sampling:**

- (a) Sampling location(s) are as specified by permit..... Y
- (b) Parameters and sampling frequency agree with permit..... Y
- (c) Permittee uses required sampling method..... Y
- (d) Sample collection procedures are adequate..... Y
  - (i) Samples refrigerated during compositing..... Y
  - (ii) Proper preservation techniques used..... Y
  - (iii) Containers and sample holding times prior to analysis conform with 40 CFR 136.3..... Y
- (e) Monitoring records (i.e., flow, pH, DO) maintained for a minimum of three years including all original strip chart recordings (i.e, continuous monitoring instrumentation, calibration and maintenance records)..... Y
- (f) Adequate records maintained of sampling date, time, location, etc.. Y

**Laboratory:**

*General*

- (a) EPA approved analytical testing procedures used (40 CFR 136.3).. N/E
  - (b) If alternate analytical procedures are used, proper approval has been obtained..... N
  - (c) Analyses being performed more frequently than required by permit. N/A
  - (d) If (c) is yes, are results in permittee's self-monitoring report..... N/A
  - (e) Commercial laboratory used..... Y
- Parameters analyzed by commercial lab:

Lab name:

*Quality Control/Quality Assurance*

- (f) Quality assurance manual provided and maintained..... N/E
- (g) Satisfactory calibration and maintenance of instruments/equipment. Y
- (h) Adequate records maintained..... Y
- (i) Results of latest USEPA quality assurance performance sampling program:  
 Satisfactory  Marginal  Unsatisfactory

Date:

**Comments/Status:**

Influent sampler had no thermometer or temperature log.  
Effluent sampler 2°C

**Section J: Effluent/Receiving Water Observations**

Outfall Number	Oil sheen	Grease	Turbidity	Visible Foam	Visible Floating Solids	Color	Other
001	-	-	some	-	-	-	

**Comments/Status:**

Biosolids deposits at outfall.

**Section K: Multimedia Observations**

- (a) Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories..... N
- (b) Do you notice staining or discoloration of soils, pavement or floors.. N
- (c) Do you notice distressed (unhealthy, discolored, dead) vegetation.. N
- (d) Do you see unidentified dark smoke or dust clouds coming from sources other than smokestacks..... N
- (e) Do you notice any unusual odors or strong chemical smells..... N
- (f) Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities..... N

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

- (1) What is the cause of the condition?
- (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/Status:**