



**Environmental
Protection Agency**

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

Re: **Notice of Violation**
Fulton County
Village of Swanton
NPDES Permit

June 8, 2012

Mr. Chris Witt
WWTP Superintendent
Village of Swanton
219 Chestnut Street
Swanton, Ohio 43558

Dear Mr. Witt:

On May 31, 2012, Mr. Judson Delancey and I conducted an inspection of the Swanton Wastewater Treatment Plant (WWTP). You were present and provided information concerning the operation and maintenance of the treatment facilities.

At the time of inspection, all required treatment processes and associated equipment were in operation and the discharge to AI Creek was clear, colorless, and had no noticeable odor.

A review of the discharge monitoring reports (DMRs) from January 2012 to May 2012 shows that there have been several effluent limit loading violations. The specific instances of non-compliance are enclosed on a separate sheet. It is noted that you have submitted letters addressing the violations and indicated that high flows have caused the loading violations.

Our inspection report is enclosed for your review. If there are any questions, please contact me at (419) 373 – 3053.

Sincerely,

Ryan Gierhart
Division of Surface Water

/jlm

Enclosures

pc: Mayor and Council

ec: Inspection Tracking

| Get New Data | | | | | | | | |
|--------------|------------------|---------|----------------|------------------------|------------|-------|----------------|----------------|
| Permit No | Reporting Period | Station | Reporting Code | Parameter | Limit Type | Limit | Reported Value | Violation Date |
| 2PB00025*JD | January 2012 | 001 | 00530 | Total Suspended Solids | 7D Qty | 63.0 | 77.1572 | 1/15/2012 |
| 2PB00025*JD | March 2012 | 001 | 80082 | CBOD 5 day | 7D Qty | 53.0 | 63.1879 | 3/8/2012 |



State of Ohio Environmental Protection Agency
Northwest District Office

NPDES Compliance Inspection Report

| Section A: National Data System Coding | | | | | |
|--|-----------|----------------|-----------------|-----------|---------------|
| Permit # | NPDES# | Month/Day/Year | Inspection Type | Inspector | Facility Type |
| 2PB00025 | OH0020524 | 5/31/2012 | C | S | 1 |

| Section B: Facility Data | | |
|--|-----------------------|--|
| Name and Location of Facility Inspected | Entry Time | Permit Effective Date |
| Swanton WWTP 200 South St. Swanton, OH 43558 | 10:30 am | May 1, 2012 |
| | Exit Time 12:10 pm | Permit Expiration Date April 30, 2017 |
| Name(s) and Title(s) of On-Site Representatives | Phone Number(s) | |
| Mr. Chris Witt - WWTP Superintendent | (419) 826 - 5891 | |
| Name, Address and Title of Responsible Official | Phone Number | |
| Mayor and Council Village of Swanton 219 Chestnut St. Swanton, OH 43558 | (419) 826 - 9515 | |

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

| Section D: Summary of Findings (Attach additional sheets if necessary) | |
|---|--|
| <p>CBOD sampling procedure was reviewed. The calculation for CBOD should be shown on the bench sheet.</p> <p>Effluent was clear with no noticeable odor</p> | |
| Inspector | Reviewer |
| Ryan Gierhart Environmental Specialist II Division of Surface Water Northwest District Office | Thomas Poffenbarger, P.E. Water Quality Engineer II/Unit Supervisor Division of Surface Water Northwest District Office |
| Date 6-6-2012 | Date 6/6/12 |

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/A

Comments/Status:

Section F: Compliance

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

Section G: Operation & Maintenance

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.....

100 KW generator powers control building, blowers for lagoon and storm water pumps.
 - ii. How often is the generator tested under load.....

1/month

(b) Which components have an alarm system available for power or equipment failures.....

All equipment has alarms for power failures. New autodialer system has been installed (4/2012) that calls out specific power and equipment failures.

- (c) All treatment units in service other than backup units..... Y
- (d) What method is used for scheduling routine & preventative maintenance (**calendar**, software, etc.)..... Y
- (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..... Y
- (h) Any plant upsets since last inspection..... N

Section G: Operation & Maintenance con't

Record Keeping/Operator of Record:

- (a) Wastewater Treatment Works classification (OAC 3745-7)..... II
- (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..... N/A
- (g) Operator of Record log book provided..... Y
- (h) Format of log book (e.g. computer log, hard bound book)

Hours maintained by time cards. Daily activities kept in hardbound 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.)..... Y
 - iv. Laboratory results (unless documented on bench sheets)... N/A
 - 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:

Comminutor was removed from service earlier in 2012 to add a self-cleaning system. The system was operating during the inspection.

Section G: Operation & Maintenance con't

Collection System:

- (a) Are there pump stations in the collection system..... Y
 - i. How many publicly-owned pump stations equipped with permanent standby power or equivalent.....2
 - ii. How many pump stations have telemetered alarms.....2
 - iii. How many pump stations have operable alarms.....2
- (b) Any chronic collection system overflows since last inspection..... N
- (c) Regulatory agency notified of all overflows..... Y
- (d) CSOs in the collection system....if so, what is the LCTP status..... Y
 - Phase one of separation close to completion. Phase II PTI is due on July 1, 2012
- (e) How are CSOs monitored (chalk, **block**, level sensor, etc.)..... Y
- (f) Portable pumps available for collection system maintenance..... Y
- (g) RDII Program established and active..... N
- (h) Any WIB complaint received since last inspection..... N
- (i) Is there a WIB response plan..... Y
- (j) Is any portion of the collection system at or near dry weather Capacity..... N

Comments/Status:

CSOs have occurred. Used wood sticks to check if overflowing. The most active CSOs are Church street and the Hallet & Broadway locations.

Section H: Sludge Management

- (a) Method of Sludge Disposal...
 - Land Application
 - Haul to Another NPDES Permittee
 - Haul to a Mixed Solid Waste Landfill

*if one of the selected methods is land application, complete applicable charts.

(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 type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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.....
- (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..... Y
- (f) 5/8" screen at headworks for facilities that land apply sludge..... N
- (g) Are sludge application sites inspected to verify compliance with NPDES permit..... Y

Comments/Status:

Facility uses an aerobic digester and sludge drying beds. Midwest composting land applied this spring directly from the aerobic digester.

Section I: Self-Monitoring Program

Flow Measurement:

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

| |
|--|
| effluent: ultrasonic meter in open channel flow, influent: magmeter. |
|--|
- (b) Flow meter calibrated annually Y
 (Date of last calibration: 4/12)
- (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

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

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:

| | |
|------------------------------------|-----------------------------|
| • Title | • Procedure |
| • Scope and Application | • Calculations |
| • Summary | • Quality Control |
| • Sample Handling and Preservation | • Maintenance |
| • Interferences | • Corrective Action |
| • Apparatus and Materials | • Reference (Parent Method) |
| • Reagents | |

Note: Standard Methods 1020A establishes that "Quality assurance (QA) is the definitive program for laboratory operation that specifies the measure required to

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produce defensible data of know 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..... Y
- (e) Analyses being performed more frequently than required by permit. N
- (f) If (e) is yes, are results in permittee's self-monitoring report..... N/A
- (g) Satisfactory calibration and maintenance of instruments/equipment. Y (see score from GLC page)
- (h) Commercial laboratory used..... Y
Parameters analyzed by commercial lab: Metals, O&G, Nitrate + Nitrite, Phosphorus, Bacteria, Low level Mercury

Lab name: Jones & Henry

Discharge Monitoring Report Quality Assurance (DMRQA)

- (a) Participation in latest USEPA quality assurance performance sampling..... N
Date: 8/2010
- (b) Were any parameters "Unsatisfactory"..... N/A
- (c) Reasons for "Unsatisfactory" parameters.....

Comments/Status:

CBOD test procedure was reviewed during the inspection. The bench sheets should be written in ink and the calculation for CBOD should be shown. Check should be added for when D.O. meter is calibrated.

Section J: Effluent/Receiving Water Observations

Outfall # 2PB00025

Outfall Description: Outfall observed was clear, colorless with no noticeable odor

Receiving Stream: AI Creek

Receiving Stream Description: Stream was clear with low flow.

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

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- (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

F. GUIDE - VISUAL OBSERVATION - UNIT PROCESS

RATING CODES: S = Satisfactory; U = Unsatisfactory; M = Marginal; IN = In Operation; OUT = Out of Operation

| CONDITION OR APPEARANCE | | RATING | COMMENTS |
|---|-----------------------------------|--------|--|
| General | Grounds | S | |
| | Buildings | S | |
| | Potable Water Supply Protection | S | Backflow preventor. |
| | Safety Features | S | Area fenced. |
| | Alternate Power Source | S | Diesel generator. Big enough to run storm water lagoon, raw valve, and lights. |
| | Storm Water Lagoon/EQ basin | OUT | Minimum water level maintained to keep water over air lines |
| Preliminary | Maintenance of Collection Systems | NE | Not evaluated. |
| | Pump Station | IN | Three raw pumps. One is 1.0 MGD, two are 1.5. |
| | Ventilation | S | Vented through hatches on top of well. |
| | Bar Screen | OUT | On standby. Used as bypass for comminutor repair. |
| | Disposal of Screenings | S | Landfill. |
| | Comminutor | IN | Franklin Miller Grinder |
| | Grit Chamber | IN | Horseshoe channel type chamber. Grey color. Has its own blower. |
| | Disposal of Grit | S | Landfill. |
| Primary | Settling Tanks | IN | Two clarifiers. Parallel operation. Contents were grey in color. |
| | Scum Removal | IN | Sent to digester. |
| | Sludge Removal | IN | Sent to digester. |
| | Effluent | S | Slightly turbid with |
| | | | |
| Sludge Disposal | Digesters | IN | One tank. Aerobic process. |
| | Sludge Pumps | IN | Two WAS pumps. Can pump to truck, drying beds, or primary digester. |
| | Drying Beds | IN | Four beds. |
| | Disposal of Sludge | S | Land application or landfill. |
| | Blowers | IN | Two units. |
| Other | Flow Meter and Recorder | IN | Magmeter on influent – digital read out – totalizer. Ultra sonic on effluent |
| | Records | | |
| | Lab Controls | | |
| | Chemical Treatment | S | Chlorine and sodium bisulfate. |
| | Automatic Samplers | IN | Raw, trickling filter, oxidation ditch, and final effluent samplers. |
| Secondary-Tertiary List items as required | Trickling Filters | IN | Two filters. Used in series. |
| | Trickling Filter Pumps | IN | Two pumps per filter. Three pumps can send effluent to final clarifier. |
| | Final Clarifiers | IN | 2 in 1 for oxidation ditch 1 for trickling filters. Effluent Clear |
| | Sand Filters | IN | Three filters. |
| | Sand Filter Backwash Pumps | IN | Three pumps. |
| | Buffer Tank/Mud Well | IN | Sand filters not back washing at time of inspection. No water in well. |
| | Oxidation Ditch | IN | |
| Disinfection | Effluent | S | Clear, colorless, with no odors |
| | Disinfection System | OUT | Sodium hypochlorite |
| | Effective Dosage | NE | Not evaluated. |
| | Contact Time | S | 15 to 30 minutes. |
| | Contact Tank | IN | |
| | Dechlorination | IN | Liquid sodium bisulfite. |
| | Storm Water Lagoon Disinfection | OUT | |