



**Environmental
Protection Agency**

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

RE: Laurels of Shane Hill
Mercer County
NPDES General Permit

June 25, 2012

Mr. Jeff Long
10731 State Route 118
Rockford, Ohio 45882

Dear Mr. Long:

On May 22, 2012, a National Pollutant Discharge Elimination System (NPDES) permit compliance inspection was completed at the Laurels of Shane Hill, located at 10731 State Route 118 Rockford, Ohio, 45882. At the time of the inspection, all units were in service and the operation of the plant appeared fair.

The aeration tanks were receiving an adequate amount of air, but were grey in color. The clarifiers had been pumped out by Mike's Sanitation earlier in the day. They are scheduled to do this once every six months. There was sludge in the trough of the clarifier. The sand filters were covered in solids, some weeds, and some ponding was observed. There were chlorination tablets observed in the tablet feeder, but there were no dechlorination tablets in the dechlorination feeder.

A review of your discharge monitoring reports from January 2010 to March 2012 indicates violations of the conditions of your NPDES permit. The specific instances of non-compliance are enclosed.

Your NPDES permit requires that a log book be maintained onsite to document the time the Operator of Record is on site and activities that are taking place at the plant. In addition, the plant is classified as a Class A plant, which requires an operator with at least a Class A certification be at the plant two days per week for a minimum of one hour per week. Please respond in writing **within 14 days of receipt of this letter** indicating how these requirements are being met.

If you have any questions, please contact me at 419-373-3019.

Sincerely,

Michelle Sharp
Environmental Specialist II
Division of Surface Water

/jlm

Enclosures

pc: Mercer County Health Department

ec: Tracking

Permit No	Violation Date	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value
2GS00013*AG	3/1/2010	001	00530	Total Suspended Solids	30D Conc	12	22.
2GS00013*AG	3/1/2010	001	00530	Total Suspended Solids	7D Conc	18	22.
2GS00013*AG	3/1/2010	001	80082	CBOD 5 day	30D Conc	10	13.
2GS00013*AG	3/6/2010	001	00300	Dissolved Oxygen	1D Conc	6.0	5.9
2GS00013*AG	6/16/2010	001	00300	Dissolved Oxygen	1D Conc	6.0	5.6
2GS00013*AG	8/1/2010	001	00530	Total Suspended Solids	30D Conc	12	14.
2GS00013*AG	8/1/2010	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.7
2GS00013*AG	8/1/2010	001	00610	Nitrogen, Ammonia (NH3	7D Conc	1.5	1.7
2GS00013*AG	8/1/2010	001	80082	CBOD 5 day	30D Conc	10	11.
2GS00013*AG	6/1/2011	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.3
2GS00013*AG	3/1/2012	001	80082	CBOD 5 day	30D Conc	10	11.

OHIO ENVIRONMENTAL PROTECTION AGENCY
 OPERATION AND MAINTENANCE INSPECTION
 WWTP'S LESS THAN 25,000 GPD

NPDES Permit No. 26500013

Facility Name Sands of Shane Hill Expiration Date _____

Facility Address 10731 State Route 118 Date 5-22-12 Time _____ am / pm

City Rockford County Mercer Township _____

Name and Address of Owner Laurel Health Care Co 8181 Worthington Rd Westerville OH 43082

Person Contacted _____ Owner Phone _____

Flow: Design _____ GPD Present _____ GPD (metered - estimated)

Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp _____ ° Sunny

OEPA Personnel Michelle Sharp District NWDO

1. Plant Effluent - Mark Severity No.

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None		Clear	0	None	0	Colorless
1	Mild	0					
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

2. Effect of effluent on Receiving Stream Name: Not Observed

No.	Severity Description	No.	Turbidity	No.	Odor	No.	Color
0	None		Clear		None		Colorless
1	Mild						
2	Moderate		Light Solids		Musty		Grey
3	Serious						
4	Extreme		Heavy Solids		Septic		Black

3. a. Plant has _____ excellent _____ good fair _____ poor operation
 b. Plant has _____ excellent _____ good fair _____ poor maintenance
 c. Sand filters have _____ excellent _____ good fair _____ poor maintenance

d. Not operating at expected efficiency due to:

- (1) _____ hydraulic overload
 (2) _____ organic/ solids overload
 (3) _____ personnel inefficiency
 (4) _____ equipment failure
 (5) _____ wastes
 (6) _____

Disinfection: (Required May 1 thru Oct.31.)		
IN	OUT	
<input checked="" type="checkbox"/>	_____	Chlorination Tablets
_____	<input checked="" type="checkbox"/>	Dechlorination Tablets
_____	_____	U.V.

Yes No

4. Compliance with NPDES Permit

Periodic Violations Y N Parameters: TSS, CBOD, DO, Ammonia

Chronic Violations _____

5. Adequate plant safety

6. Operation and Maintenance Service Name Mr Jeff Long

Frequency of Visits _____

Facility Name: Laurels of Shane Hill

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	X	Trash Trap	Pumping Frequency: 1/3 mo
		Grease Trap	Pumping Frequency:
		Bar Screen	
		Comminutor	
	X	Flow Equalization	
Aeration Equipment		Plant Timer ___Y___N	Cycle Time:
		Motor/ Blower Unit	
Secondary Treatment	X	Aeration Tank	Color: Grey Adequate Aeration: Y ___X___N ___
Final Settling	X	Clarifier	Sludge in trough. Pumped out 1/6 mo by MSI
	X	Sludge Return	In X Out
	X	Surface Skimmer	In X Out
		Fixed Media Clarifier	
Tertiary Treatment	X	Surface Sand Filter	Covered in solids, some weeds some ponding
		Polishing Pond	
		Other	
Disinfection		Contact Tank	
	X	Chlorine Tube Feeder	
	X	Dechlorination Tube Feeder	No tablets
		Ultraviolet (UV)	
Flow Metering		Elapsed Pump Time	
		Recorder (continuous total)	
Pumps		Raw Wastewater (type)	
		Sand Filter Effluent Dosing	
Sludge Handling		Aerated Storage Tank	
		Sludge Drying Bed	
Sludge Disposal		Municipal POTW	
		Landfill	
		Land Application	
Advanced Treatment		Post Aeration	
		Spray Irrigation	
		Other	