



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

Re: Erie County
Kelleys Island State Park Campground
NPDES Permit

October 15, 2012

Mr. John Hunter, Acting Chief
Ohio Department of Natural Resources
Division of Parks and Recreation
2045 Morse Road, Building C-3
Columbus, Ohio 43229

Dear Mr. Hunter:

On September 5, 2012, an inspection was made of the wastewater treatment facilities serving the Kelleys Island State Park Campground. In general, both operation and maintenance appeared very good. At the time of my visit, all major treatment components were in operation and a very clear final effluent was observed being discharged to the North Pond.

National Pollutant Discharge Elimination System (NPDES) discharge monitoring reports are being received in a timely manner. A review since the beginning of the year indicated only two final effluent violations thus far this season. I appreciate your support in ensuring this facility receives proper operation and maintenance and I look forward to your continuing cooperation next year.

Enclosed is my completed inspection report. If you have any questions, please call me at (419) 373-3020, or email at rick.zuzik@epa.state.oh.us.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard A. Zuzik", written over a horizontal line.

Richard A. Zuzik, MSE
Division of Surface Water

/jlm

Enclosures

pc: Erie County Health Department

ec: Tracking

OHIO ENVIRONMENTAL PROTECTION AGENCY
 OPERATION AND MAINTENANCE INSPECTION
 WWTP'S LESS THAN 150,000 GPD

NPDES Permit No. 2 PPO00042
 Facility Name K.I. State Park Expiration Date 11-30-15
 Facility Location DIVISION ST Date 9-5-12 Time 12¹⁵ am
 City Kelleys Island County Erie Township -
 Name of Owner ODNR - Div. of Parks & Rec Owner Phone _____
 Person Contacted _____ Operator of Record Ken Griffith
 Flow: Design 20,000 GPD WWTP Classification: A or I
 Trib. Pop. 129 sites (actual - estimated) Weather at time of inspection: Temp 80° Clear
 OEPA Personnel Rick Zuzik District NWDO

1. Plant Effluent - Mark Severity No.

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

2. Effect of Effluent on Receiving Stream - Name: N. Pond

<input checked="" type="checkbox"/>	None	<input type="checkbox"/>	Mild	<input type="checkbox"/>	Moderate	<input type="checkbox"/>	Serious
-------------------------------------	------	--------------------------	------	--------------------------	----------	--------------------------	---------

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- N/A

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
_____	_____
_____	_____
<u>✓</u>	_____

Chlorination Tablets
 Dechlorination Tablets
 Ultraviolet (U.V.)

Yes No

4. ✓ Compliance with NPDES Permit - Time Period: 1-1-12 to 9-28-12

Periodic Violations Y N Parameters: 755 (2 all year)

Chronic Violations _____

5. ✓ O & M logbook kept and available on site: Location Blower House

6. ✓ Staffing Requirement Met (Class A - 2 days per week for minimum 1 hour per week)
 (Class I - 3 days per week for minimum 1.5 hours per week)

7. ✓ Adequate Plant Safety: Deficiencies _____

Facility Name: KI State Park

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	-	Trash Trap	Pumping Frequency
		Grease Trap	Pumping Frequency
	1	Bar Screen	
	1	Comminutor	
	1	Flow Equalization	
Aeration Equipment		Plant Timer <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Cycle Time: <i>1N</i>
	2	Motor / Blower Unit	
Secondary Treatment	4	Aeration Tank	Color: <i>Brown</i> Adequate Aeration <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Final Settling	2	Clarifier	<i>good settling</i>
	2	Sludge Return	In / Out
	2	Surface Skimmer	In / Out
		Fixed Media Clarifier	
Tertiary Treatment	4	Surface Sand Filter	<i>1 ponded</i>
		Polishing Pond	
		Other	
Disinfection		Contact Tank	
		Chlorine Tube Feeder	
		Dechlorination Tube Feeder	
	1	Ultraviolet (UV)	<i>1N</i>
Flow Metering		Elapsed Pump Time	
		Recorder (continuous total)	
Pumps	2	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	
	<input checked="" type="checkbox"/>	Spray Irrigation	<i>1N</i>
		Other	

Get New Data								
Permit No	Reporting Period	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
2PP00042*FD	May 2012	001	00530	Total Suspended Solids	30D Conc	12.0	14.	5/1/2012
2PP00042*FD	June 2012	001	00530	Total Suspended Solids	30D Conc	12.0	15.	6/1/2012