



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

Re: Richland County
Pin Oak MHP
NPDES Permit

April 22, 2013

Mr. John Szalay, Owner
Pin Oak MHP
581 Lake of the Woods Boulevard
Akron, Ohio 44333

Dear Mr. Szalay:

On April 1, 2013, an inspection was made of the wastewater treatment facilities serving the Pin Oak Mobile Home Park (MHP) located at 1121 Clayberg Road, Greenwich, Richland County. The inspection was made as part of the renewal process for your National Pollutant Discharge Elimination System (NPDES) permit.

At the time of the inspection, the treatment plant appeared to be operating normally. A clear final effluent was being discharged into the catch basin along Franklin Church Road. The operator's log was reviewed and found to contain the necessary information.

Apparently, the aerated screen and transfer pipe between the two EQ tanks does not work as well as designed. A pump and hose has been permanently located in the first tank to force water through the transfer pipe and unplug the screen as necessary.

A review of the discharge monitoring reports submitted for the time period of August 2012 through February 2013 revealed two **violations** of the limits contained in your NPDES permit. The violations were for exceeding the total suspended solids limits in the December 2012 sample.

Our office has completed drafting your renewal NPDES permit. You will be receiving a copy of the draft permit in the next few weeks. Please look this draft over and contact our office with any questions or comments. Please carefully review the new requirements for onsite staffing of the certified operator and for the outfall signage.

Our completed inspection report is enclosed for your records. Please call me at 419-373-3070 if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Walter Ariss', written over a horizontal line.

Walter Ariss, P.E.
Environmental Specialist II
Division of Surface Water

/jlm
Enclosure
pc: Lonnie McGhee, McGhee's Technical Water Service Inc.
ec: Tracking

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

NPDES Permit No. 2PR00072

Facility Name Pin Oak MHP Expiration Date 6/30/13
 Facility Location 1121 Clayberg Rd Date 4/1/13 Time 10:00 am
 City Greenwich County Richland Township _____
 Name of Owner John Szalay Owner Phone _____
 Person Contacted _____ Operator of Record McGee's TWSI
 Flow: Design 30,000 GPD WWTP Classification: A or XI
 Trib. Pop. _____ (actual - estimated) Weather at time of inspection: Temp 35° - clouds
 OEPA Personnel Walter Ariss District NWDO

1. Plant Effluent - Mark Severity No.

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

2. Effect of Effluent on Receiving Stream Name: unnamed trib Black Fork

No.	Severity Description		Turbidity		Odor		Color
0	None	<input checked="" type="checkbox"/>	Clear	<input checked="" type="checkbox"/>	None	<input checked="" type="checkbox"/>	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- N/A
 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
_____	_____	Ultraviolet (U.V.)

Yes No

4. Compliance with NPDES Permit
 Periodic Violations Y X N Parameters: TSS
 Chronic Violations _____
 5. O & M logbook kept and available on site: Location in dosing station control box
 6. NA 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: Pine Oak MHP

Process	# Units	Unit	If Needed - Description and Comments
Preliminary	X	Trash Trap	Pumping Frequency 1/3 months
		Grease Trap	Pumping Frequency
		Bar Screen	
		Comminutor	
	X	Flow Equalization <i>not pump to clean + transfer pipe</i>	okay
Aeration Equipment	X	Plant Timer <u>Y</u> <u>X</u> N Motor / Blower Unit <i>running</i>	Cycle Time:
Secondary Treatment	X	Aeration Tank	Color: <i>good color</i> Adequate Aeration <u>Y</u> <u>X</u> N
Final Settling	X	Clarifier	<i>good clarity</i>
	X	Sludge Return	In <u>X</u> Out
	X	Surface Skimmer	In <u>X</u> Out
		Fixed Media Clarifier	
Tertiary Treatment	X	Surface Sand Filter <i>1 filter has solids + ponded</i>	<i>other 3 filters clean + ready</i>
		Polishing Pond	
		Other	
Disinfection	X	Contact Tank	<i>very clear, can see bottom</i>
	X	Chlorine Tube Feeder	<i>no tablets</i>
	X	Dechlorination Tube Feeder	<i>no tablets</i>
		Ultraviolet (UV)	
Flow Metering	X	Elapsed Pump Time	<i>on filter dosing station</i>
		Recorder (continuous total)	
Pumps	X	Raw Wastewater (type) Flow EQ	<i>good okay</i>
	X	Sand Filter Effluent Dosing	<i>okay</i>
Sludge Handling	X	Aerated Storage Tank <i>air turned on today</i>	<i>some slight odor</i>
	X	Sludge Drying Bed <i>just sent to beds last week</i>	<i>beds fairly full</i>
Sludge Disposal		Municipal POTW	
	X	Landfill <i>be sure to keep receipts for records</i>	
Advanced Treatment	X	Post Aeration	<i>on</i>
		Spray Irrigation	
		Other	