



John D. Kasich, Governor  
Mary Taylor, Lt. Governor  
Scott J. Smith, Director

April 30, 2013

Robert Toland, Owner  
Suburban MHP  
55 Dewmar Drive SE  
Heath, OH 43056

**Re: Suburban MHP  
NPDES Permit 4PV00116/ OH0130737  
Compliance Evaluation Inspection  
Licking County**

Dear Mr. Toland:

On April 18, 2013, a compliance evaluation inspection was conducted at the Suburban MHP. Present for the inspection were Stephen (Tim) Roberts and yourself representing Suburban Mobile Home Park and myself of the Ohio EPA, Central District Office Division of Surface Water.

The purpose of the inspection was to evaluate compliance with the terms and conditions of your NPDES permit and to evaluate the operation and maintenance of the plant. The newly installed WWTP seems to be operating satisfactorily with adequate maintenance. Except for some initial problems during start-up of the new system, violations have ceased (see attached report).

If you have any questions or comments concerning the enclosed inspection report, please contact me at (614) 728-3854 or e-mail at [paul.vandermeer@epa.state.oh.us](mailto:paul.vandermeer@epa.state.oh.us).

Sincerely,

Paul L. Vandermeer  
Environmental Specialist II  
Compliance and Enforcement Unit  
Division of Surface Water  
Central District Office

ec: Paul L. Vandermeer

PLV/nsm Suburban 2013

**NPDES Compliance Inspection Report**

**SECTION A: NATIONAL DATA SYSTEM CODING**

Permit #	NPDES #	Inspection Type	Inspector	Facility Type
4PV00116	OH0130737	CEI	S	1
Inspection Date	Entry Time	Exit Time	Notice of Violation	Significant Non-Compliance
4/18/2013	8:55 am	9:50 am	No	No

**SECTION B: FACILITY DATA**

Name and Location of Facility Inspected	Permit Effective Date
Suburban MHP 5823 Jacksontown Rd. Newark, OH	8/1/2012
	Permit Expiration Date
	7/31/2017
Name(s) and Title(s) of On-Site Representatives	Phone Numbers
Stephen (Tim) Roberts, Operator	
Name and Title of Responsible Official	Phone Number
Robert Toland, Owner/Operator	(740) 928-3772

**SECTION C: AREAS EVALUATED DURING INSPECTION**

Key: S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated

S	NPDES Compliance	<i>Violations have ceased with new WWTP</i>
S	Operations & Maintenance	<i>Plant is well maintained</i>
S	Facility Site Review	
S	Collection System	<i>Smoke testing performed regularly. Lift station clean.</i>
S	Flow Measurement	<i>Potable water metering</i>
S	Receiving Waters	
S	Laboratory	

Comments:

Signatures

			4/29/13
Paul L. Vandermeer, Inspector Compliance & Enforcement Division of Surface Water Central District Office	Date	Erin Sherer, Reviewer Compliance & Enforcement Supervisor Division of Surface Water Central District Office	Date

## Compliance Data for Suburban MHP between 3/1/2012 to 4/1/2013

### Summary

Permit Effluent Limit Violations: 14

Permit Effluent Code Violations: 2

Permit Effluent Frequency Violations: 3

Compliance Schedule Violations: 0

Limit Violation						
Reporting Period	Station	Parameter	Sample Frequency	Limit Value	Reported Value	Violation Date
March 2012	001	Nitrogen, Ammonia (NH3)	30D Conc	1.0	12.9	7/1/2012
March 2012	001	CBOD 5 day	30D Conc	10	11	5/1/2012
March 2012	001	Nitrogen, Ammonia (NH3)	1D Conc	4.5	12.9	3/14/2012
May 2012	001	Nitrogen, Ammonia (NH3)	30D Conc	1.0	2.7	5/1/2012
May 2012	001	Nitrogen, Ammonia (NH3)	1D Conc	1.5	2.7	5/9/2012
May 2012	001	Chlorine, Total Residu	1D Conc	0.019	.12	5/9/2012
June 2012	001	Total Suspended Solids	30D Conc	12	14	6/1/2012
June 2012	001	Chlorine, Total Residu	1D Conc	0.019	.06	6/13/2012
June 2012	001	Chlorine, Total Residu	1D Conc	0.019	.22	6/27/2012
July 2012	001	Chlorine, Total Residu	1D Conc	0.019	.05	7/11/2012
August 2012	001	Total Suspended Solids	30D Conc	30	34	8/1/2012
August 2012	001	CBOD 5 day	30D Conc	25	800	8/1/2012
August 2012	001	CBOD 5 day	7D Conc	40	800	8/8/2012
October 2012	001	E. coli	30D Conc	161	200	10/1/2012

Code Violations				
Reporting Period	Station	Parameter	Reported Value	Violation Date
June 2012	001	Fecal Coliform	AK	6/13/2012
July 2012	001	Fecal Coliform	AK	7/11/2012

Frequency Violations						
Reporting Period	Station	Parameter	Sample Frequency	Expected	Reported	Violation Date
May 2012	001	Chlorine, Total Residu	1/2Weeks	1	0	5/15/2012
July 2012	001	Chlorine, Total Residu	1/2Weeks	1	0	7/15/2012
August 2012	001	Chlorine, Total Residu	1/2Weeks	1	0	8/15/2012

Method of flow monitoring:	Potable water usage
Type of alarms for plant:	Visual

**SECTION D: PRELIMINARY TREATMENT**

Type of Preliminary Treatment?	Lift station grinder pump	
	Yes	No
Does the unit require pumping or cleaning?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Maintenance of preliminary treatment is satisfactory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	annual	

Comments/Status:

**SECTION E: AERATION**

Color of MLSS?	Chocolate Brown			Yes	No
	Yes	No			
Aeration is taking place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plant is septic	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Blowers are operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Blowers are on a timer	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skimmers are operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plant is flooded	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diffusers are operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grating is present	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sludge return is operational	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Foam present?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Overall maintenance satisfactory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Comments/Status: Blowers are alternated, cycled on 45 minutes, off 15 minutes. Blower motor oil was changed last week.

**SECTION F: CLARIFIERS**

Clarity of water topping weir	Clear	
	Yes	No
Weir is clean?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Weir is in good condition (i.e., level, free of corrosion, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is effluent present in weir channel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the sludge blanket visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do the clarifier walls need scraping?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is sludge settling properly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Overall maintenance of the clarifier is satisfactory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Comments/Status:

**SECTION G: TERTIARY TREATMENT**

	Yes	No		Yes	No
Surface sand filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Substrate / Upflow	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Distribution box operational	<input type="checkbox"/>	<input type="checkbox"/>	Beds alternated <sup>^</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are filters ponding/flooding	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Beds raked	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sand filters overgrown	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chlorination present	<input type="checkbox"/>	<input type="checkbox"/>
UV present*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Dechlorination present	<input type="checkbox"/>	<input type="checkbox"/>
Overall maintenance satisfactory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Comments/Status: \*UV not turned on until May 1. ^Alternates 2 sand filters and 2 fixed media clarifiers. Fixed media clarifiers cleaned once every 2 months as alternated.

**SECTION H: SLUDGE HANDLING / STORAGE DISPOSAL**

Sludge is periodically wasted from what component?	<i>Holding tank</i>	
Sludge disposal contractor?	<i>Jack's Septic Hauling (has not hauled yet due to new plant)</i>	
Sludge disposal location?	<i>Newark WWTP</i>	
	Yes	No
Does the WWTP have sludge drying beds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Does the WWTP have a sludge holding tank?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the maintenance on the sludge handling unit adequate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Comments/Status:

**SECTION I: RECORD KEEPING / OPERATOR OF RECORD**

	Yes	No
Operator of Record holds unexpired license of class required by Permit?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Has the Operator of Record submitted an ORC Notification form?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of certificate of Operator of Record displayed on-site?*	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If a Staffing Reduction plan has been approved, are the stipulations of the plan being met?	<input type="checkbox"/>	<input type="checkbox"/>
Operator of Record log book provided?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Minimum operator staffing requirements fulfilled (OAC 3745-7)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Log book kept onsite (in an area protected from weather)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Log book contains the following:		
Identification of treatment works	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date/times of arrival/departure for Operator of Record and any other operator required by OAC 3745-7	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Daily record of operator and maintenance activities (including preventative maintenance, repairs and request for repairs, process control test results, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Laboratory results (unless documented on bench sheets)*	<input type="checkbox"/>	<input checked="" type="checkbox"/>

KEY: Y – Yes, N – No, N/A – Not Applicable, N/E – Not Evaluated, \* Further comment included in attachment

Identification of person making entries	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Logbook Format	Computer log	Bound book

Comments/Status: \*Lab results on bench sheet.

**SECTION 2: PLANT DISCHARGE**

Discharge point is:	<i>Unamed tributary to Swamp Run</i>
Discharge is visible:	Yes
Name of discharge point:	<i>007</i>
Marker present:	Yes
Quality of effluent:	<i>Clear, good visual quality</i>
Contract laboratory:	<i>MASI Laboratory</i>

Comments/Status