



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

Re: Lucas County  
Maumee River WWTP  
NPDES Permit

June 13, 2013

Mr. James P. Shaw III, P.E.  
Lucas County Sanitary Engineer  
1111 South McCord Road  
Holland, Ohio 43528

Dear Mr. Shaw:

On May 21, 2013, Naajy Abdullah conducted a National Pollutant Discharge Elimination System (NPDES) compliance inspection of the Maumee River Wastewater Treatment Plant (WWTP). Mr. Keith Bledsoe provided information about the plant operations and maintenance.

During the inspection, all major plant units were operating. The plant effluent appeared clear.

Our completed inspection report form is enclosed for your information. If you have any questions, please contact Naajy Abdullah at [naajy.abdullah@epa.ohio.gov](mailto:naajy.abdullah@epa.ohio.gov) or (419) 373-3017.

Yours truly,

Elizabeth A. Wick, P.E.  
Environmental Engineer/Section Manager  
Division of Surface Water

NSA/jlm

Enclosure

pc: Keith Bledsoe, WWTP Manager

ec: Tracking

## NPDES COMPLIANCE INSPECTION REPORT

### Section A: National Data System Coding

Permit #	NPDES	Yr/Mo/Day	Inspection Type	Inspector	FacType
2PK00000	OH0034223	13/05/21	C	S	1

### Section B: Facility Data

Name and Location of Facility Inspected  Maumee River WWTP 5758 N. River road Waterville, OH43566	Entry Time	Permit Effective Date
	9:00 a.m.	3/12/2012
	Exit Time	Permit Expiration Date
	10:30 a.m.	5/31/2016

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Mr. Keith Bledsoe, Plant Manager	(419) 213-8743

Name, Address and Title of Responsible Official	Phone Number
Mr. James P. Shaw, P.E. Lucas County Sanitary Engineer 1111 S. McCord Road Holland, Ohio 43528	(419) 213-2926

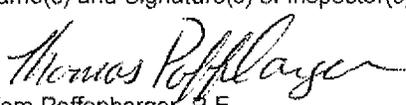
### Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

<input checked="" type="checkbox"/> S Permit	<input checked="" type="checkbox"/> S Flow Measurement	<input checked="" type="checkbox"/> N Pretreatment
<input checked="" type="checkbox"/> S Records/Reports	<input checked="" type="checkbox"/> N Laboratory	<input checked="" type="checkbox"/> S Compliance Schedules
<input checked="" type="checkbox"/> S Operations & Maintenance	<input checked="" type="checkbox"/> S Effluents	<input checked="" type="checkbox"/> S Self-Monitoring Program
<input checked="" type="checkbox"/> S Facility Site Review	<input checked="" type="checkbox"/> N Sludge Storage/Disposal	<input type="checkbox"/> Other

### Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

\* Both east and west plants were operational.

\* Effluent appeared clear.

 Naajiy Abdullah, P.E. Name(s) and Signature(s) of Inspector(s)	05/28/2013 Date	Ohio EPA, <u>Northwest</u> District Office
 Tom Poffenbarger, P.E. Name and Signature of Reviewer	05/28/2013 Date	Ohio EPA, <u>Northwest</u> District Office

Sections E thru K: Complete on all inspections as appropriate. N/A - Not Applicable N/E - Not Evaluated

**Section E: Permit Verification**

	Yes	No	N/A	N/E
INSPECTION OBSERVATIONS VERIFY THE PERMIT				
(a) CORRECT NAME AND MAILING ADDRESS OF PERMITTEE	<u>X</u>	___	___	
(b) CORRECT NAME AND LOCATION OF RECEIVING WATERS	<u>X</u>	___	___	
(c) PRODUCT(S) AND PRODUCTION RATES CONFORM WITH PERMIT APPLICATION (INDUSTRIES)	___	___	<u>X</u>	
(d) FLOWS AND LOADINGS CONFORM WITH NPDES PERMIT PERMIT APPLICATION/BRIEFING MEMO	<u>X</u>	___	___	
(e) TREAT PROCESSES ARE AS DESCRIBED IN PERMIT APPLICATION/BRIEFING MEMO	<u>X</u>	___	___	
(f) NEW TREATMENT PROCESS(ES) ADDED SINCE LAST INSPECTION	___	<u>X</u>	___	
(g) NOTIFICATION GIVEN TO STATE OF NEW, DIFFERENT OR INCREASED DISCHARGES	___	___	<u>X</u>	
(h) ALL DISCHARGES ARE PERMITTED	<u>X</u>	___	___	
(i) NUMBER AND LOCATION OF DISCHARGE POINTS ARE AS DESCRIBED IN PERMIT	<u>X</u>	___	___	

COMMENTS/STATUS:

**Section F: Compliance Schedules/Violations**

	Yes	No	N/A	N/E
(a) ANY SIGNIFICANT VIOLATIONS SINCE THE LAST INSPECTION	___	<u>X</u>	___	
(b) PERMITTEE IS TAKING ACTIONS TO RESOLVE VIOLATIONS	___	___	<u>X</u>	
(c) PERMITTEE HAS COMPLIANCE SCHEDULE	<u>X</u>	___	___	
(d) COMPLIANCE SCHEDULE CONTAINED IN <u>NPDES - Part I.C</u>	___	___	___	
(e) PERMITTEE IS MEETING COMPLIANCE SCHEDULE	<u>X</u>	___	___	

COMMENTS/STATUS:

**Section G: Operation and Maintenance**

**TREATMENT WORKS:**

	Yes	No	N/A	N/E
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED				
(a) STANDBY POWER AVAILABLE GENERATOR <u>X</u> DUAL FEED <u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(b) ADEQUATE ALARM SYSTEM AVAILABLE FOR POWER OR EQUIPMENT FAILURES	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(c) ALL TREATMENT UNITS IN SERVICE OTHER THAN BACKUP UNITS	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(d) SUFFICIENT OPERATING STAFF PROVIDED # SHIFTS <u>3</u> DAYS/WEEK <u>7</u>	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(e) OPERATOR HOLDS UNEXPIRED LICENSE OF CLASS REQUIRED BY PERMIT CLASS: <u>IV</u>	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(f) ROUTINE AND PREVENTIVE MAINTENANCE SCHEDULED/PERFORMED ON TIME	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>
(g) ANY MAJOR EQUIPMENT BREAKDOWN SINCE LAST INSPECTION	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(h) OPERATION AND MAINTENANCE MANUAL PROVIDED AND MAINTAINED	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(i) ANY PLANT BYPASSES SINCE LAST INSPECTION	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(j) REGULATORY AGENCY NOTIFIED OF BYPASSES <u>    </u> ON MORS <u>X</u> 800 NO.	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(k) ANY HYDRAULIC AND/OR ORGANIC OVERLOADS EXPERIENCED SINCE LAST INSPECTION	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>

**COLLECTION SYSTEM:**

	Yes	No	N/A	N/E
(a) PERCENT COMBINED SYSTEM <u>0%</u>				
(b) ANY COLLECTION SYSTEM OVERFLOWS SINCE LAST INSPECTION (CSO <u>    </u> SSO <u>    </u> )	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>
(c) REGULATORY AGENCY NOTIFIED OF OVERFLOWS (SSOs)	<u>    </u>	<u>    </u>	<u>X</u>	<u>    </u>
(d) CSO O AND M PLAN PROVIDED AND IMPLEMENTED	<u>    </u>	<u>    </u>	<u>X</u>	<u>    </u>
(e) CSOs MONITORED AND REPORTED IN ACCORDANCE WITH PERMIT	<u>    </u>	<u>    </u>	<u>X</u>	<u>    </u>
(f) PORTABLE PUMPS USED TO RELIEVE SYSTEM	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>
(g) LIFT STATION ALARM SYSTEMS PROVIDED AND MAINTAINED	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(h) ARE LIFT STATIONS EQUIPPED WITH PERMANENT STANDBY POWER OR EQUIVALENT	<u>X</u>	<u>    </u>	<u>    </u>	<u>    </u>
(i) IS THERE AN INFLOW INFILTRATION PROBLEM (SEPARATE SEWER SYSTEM) OR WERE THERE ANY MAJOR REPAIRS TO COLLECTION SYSTEM SINCE LAST INSPECTION	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>
(j) ANY COMPLAINTS RECEIVED SINCE LAST INSPECTION OF BASEMENT FLOODING	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>
(k) ARE ANY PORTIONS OF THE SEWER SYSTEM AT OR NEAR CAPACITY	<u>    </u>	<u>X</u>	<u>    </u>	<u>    </u>

COMMENTS/STATUS:

**Section H: Sludge Management**

(a) SLUDGE MANAGEMENT PLAN (SMP) **Not evaluated**  
 SUBMITTED DATE \_\_\_\_\_ APPROVAL # \_\_\_\_\_ NOT SUBMITTED \_\_\_\_\_ N/A

	Yes	No	N/A	N/E
(b) SLUDGE MANAGEMENT PLAN CURRENT	_____	_____	_____	_____
(c) SLUDGE ADEQUATELY DISPOSED (METHOD: _____)	_____	_____	_____	_____
(d) IF SLUDGE IS INCINERATED, WHERE IS ASH DISPOSED OF _____	_____	_____	_____	_____
(e) IS SLUDGE DISPOSAL CONTRACTED (NAME: _____)	_____	_____	_____	_____
(f) HAS AMOUNT OF SLUDGE GENERATED CHANGED SIGNIFICANTLY SINCE LAST INSPECTION	_____	_____	_____	_____
(g) ADEQUATE SLUDGE STORAGE PROVIDED AT PLANT	_____	_____	_____	_____
(h) LAND APPLICATION SITES MONITORED AND INSPECTED PER SMP	_____	_____	_____	_____
(i) RECORDS KEPT IN ACCORDANCE WITH STATE AND FEDERAL LAW	_____	_____	_____	_____
(j) ANY COMPLAINTS RECEIVED IN LAST YEAR REGARDING SLUDGE	_____	_____	_____	_____
(k) IS SLUDGE ADEQUATELY PROCESSED (DIGESTION, DEWATERING, PATHOGEN CONTROL)	_____	_____	_____	_____

COMMENTS/STATUS:

**Section I: Self-Monitoring Program**

Part 1. Flow measurement

	Yes	No	N/A	N/E
(a) PRIMARY FLOW MEASURING DEVICE PROPERLY OPERATED & MAINTAINED TYPE OF DEVICE: _____ PARSHALL FLUME <u>X</u> ULTRASONIC & WEIR _____ WEIR _____ CALCULATED FROM INFLUENT <u>X</u> OTHER (Magmeter )	<u>X</u>	_____	_____	_____
(b) CALIBRATION FREQUENCY ADEQUATE (Date of last calibration _____)	<u>X</u>	_____	_____	_____
(c) SECONDARY INSTRUMENTS (totalizers, recorders, etc.) PROPERLY OPERATED AND MAINTAINED	<u>X</u>	_____	_____	_____
(d) FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGES OF FLOWS	<u>X</u>	_____	_____	_____
(e) ACTUAL FLOW DISCHARGED IS MEASURED	<u>X</u>	_____	_____	_____
(f) FLOW MEASURING EQUIPMENT INSPECTION FREQUENCY: _____ DAILY _____ WEEKLY _____ MONTHLY <u>X</u> OTHER	_____	_____	_____	_____

COMMENTS/STATUS:

- (a) On influent and Effluent of both plants
- (b) Once every six months

Part 2. Sampling

	Yes	No	N/A	N/E
(a) SAMPLING LOCATION(S) ARE AS SPECIFIED BY PERMIT	<u>X</u>	___	___	___
(b) PARAMETERS AND SAMPLING FREQUENCY AGREE WITH PERMIT	<u>X</u>	___	___	___
(c) PERMITTEE USES REQUIRED SAMPLING METHOD	<u>X</u>	___	___	___
(d) SAMPLE COLLECTION PROCEDURES ARE ADEQUATE	<u>X</u>	___	___	___
(i) SAMPLES REFRIGERATED DURING COMPOSITING	<u>X</u>	___	___	___
(ii) PROPER PRESERVATION TECHNIQUES USED	<u>X</u>	___	___	___
(iii) CONTAINERS AND SAMPLE HOLDING TIMES PRIOR TO ANALYSES CONFORM WITH 40 CFR 136.3	<u>X</u>	___	___	___
(e) MONITORING RECORDS (e.g., flow, pH, D.O., etc.) MAINTAINED FOR A MINIMUM OF THREE YEARS INCLUDING ALL ORIGINAL STRIP CHART RECORDINGS (e.g., continuous monitoring instrumentation, calibration and maintenance records)	<u>X</u>	___	___	___
(f) ADEQUATE RECORDS MAINTAINED OF SAMPLING DATE, TIME, EXACT LOCATION, ETC.	<u>X</u>	___	___	___

COMMENTS/STATUS:

Part 3. Laboratory

	Yes	No	N/A	N/E
<b>GENERAL</b>				
(a) EPA APPROVED ANALYTICAL TESTING PROCEDURES USED (40 CFR 136.3)	<u>X</u>	___	___	___
(b) IF ALTERNATE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED	___	___	<u>X</u>	___
(c) ANALYSES BEING PERFORMED MORE FREQUENTLY THAN REQUIRED BY PERMIT	___	<u>X</u>	___	___
(d) IF (c) IS YES, ARE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT	___	___	<u>X</u>	___
(e) COMMERCIAL LABORATORY USED	<u>X</u>	___	___	___
(1) PARAMETERS ANALYZED BY COMMERCIAL LAB				

Metals, Cyanide, oil and grease/ bioassay

(2) LAB NAME: Jones & Henry Labs

**QUALITY CONTROL/QUALITY ASSURANCE**

(f) QUALITY ASSURANCE MANUAL PROVIDED AND MAINTAINED	<u>X</u>	___	___	___		
(g) SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT	___	___	___	<u>X</u>		
(h) ADEQUATE RECORDS MAINTAINED	<u>X</u>	___	___	___		
(i) RESULTS OF LATEST USEPA QUALITY ASSURANCE PERFORMANCE SAMPLING PROGRAM DATE : _____	___	SATISFACTORY	___	MARGINAL	___	UNSATISFACTORY

COMMENTS/STATUS:

**Section J: Effluent/Receiving Water Observations**

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	VISIBLE FLOAT SOLIDS	COLOR	OTHER
001	None	None	None	None	None	Clear	

COMMENTS/STATUS:

**Section K: Multimedia Observations**

	Yes	No	N/A	N/E
(a) ARE THERE INDICATIONS OF SLOPPY HOUSEKEEPING OR POOR MAINTENANCE IN WORK AND STORAGE AREAS OR LABORATORIES	___	<u>X</u>	___	___
(b) DO YOU NOTICE STAINING OR DISCOLORATION OF SOILS, PAVEMENT, OR FLOORS	___	<u>X</u>	___	___
(c) DO YOU NOTICE DISTRESSED (UNHEALTHY, DISCOLORED, DEAD) VEGETATION	___	<u>X</u>	___	___
(d) DO YOU SEE UNIDENTIFIED DARK SMOKE OR DUSTCLOUDS COMING FROM SOURCES OTHER THAN SMOKESTACKS	___	<u>X</u>	___	___
(e) DO YOU NOTICE ANY UNUSUAL ODORS OR STRONG CHEMICAL SMELLS	___	<u>X</u>	___	___
(f) DO YOU SEE ANY OPEN OR UNMARKED DRUMS, UNSECURED LIQUIDS, OR DAMAGED CONTAINMENT FACILITIES?	___	<u>X</u>	___	___

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?

COMMENTS/STATUS:

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	
	Safety Features	S	
	Bypasses	Out	At headworks
	Stormwater Overflows	N/A	
	Alternate Power Source	S	Generators
Preliminary	Maintenance of Collection Systems	N/A	
	Pump Station		Not evaluated
	Ventilation	N/A	
	Bar Screen	In	
	Disposal of Screenings	S	
	Comminutor	-	
	Grit Chamber	In	
	Disposal of Grit	S	
Primary	Settling Tanks	S	4 tanks-
	Scum Removal	S	
	Sludge Removal	S	
	Effluent	S	
Sludge Disposal	Digesters (anaerobic)	S	4 tanks
	Temperature and pH	S	
	Gas Production	S	
	Heating Equipment	S	
	Sludge Pumps	S	
	Sludge holding Tank	-	
	Sludge Thickener	-	
	Disposal of Sludge	S	
	Centrifuge/Dryer	S	
Other	Flow Meter and Recorder	S	
	Records	S	
	Lab Controls	-	
	Chemical Treatment	S	
Secondary-Tertiary List items as required	Aeration	S	
	Secondary Settling	S	
	Blower	S	
	Polishing Ponds	-	
Disinfection	Effluent	S	
	Disinfection System	S	Ultraviolet system
	Effective Dosage	-	
	Contact Time	-	
	Contact Tank	-	
	Dechlorination	-	