



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

Re: Erie County
Kelleys Island
Village Pump
NPDES Permit

July 5, 2013

Mr. Gary Finger, Owner
The Village Pump
P.O. Box 76
Kelleys Island, Ohio 43440

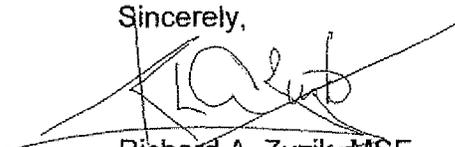
Dear Mr. Finger:

On June 20, 2013, an inspection was made of the wastewater treatment facilities serving The Village Pump. In general, both operation and maintenance of the plant appeared good. All major treatment components were in operation, and a very clear final effluent was observed in the contact tank. The post aeration line was still out of service and should be repaired. The sand filters were well kept, and disinfection and dechlorination tablets were present in the tube feeders. The logbook is now being kept in a weather proof storage container at the plant. I was also notified that a new motor/blower unit has been installed.

National Pollutant Discharge Elimination System (NPDES) permit discharge monitoring reports (DMRs) are being received in a timely manner. A review of last year indicated periodic effluent violations and one violation thus far in March 2013. A list of the violations is enclosed to review with your operator in order to make adjustments to improve compliance. I noted significant solids deposition in the chlorine contact tank. This can affect final effluent quality and should be cleaned.

Enclosed is my completed inspection report. I will be making additional visits during the summer season to observe the plant under midseason operating conditions. If you have any questions, please call me at (419) 373-3020, or email at rick.zuzik@epa.ohio.gov.

Sincerely,



Richard A. Zuzik, MSE
Division of Surface Water

/jlm

Enclosures

pc: Rob Strahm, Bluffton Aeration Service
Erie County Health Department
ec: Tracking

| Get New Data | | | | | | | | |
|--------------|------------------|---------|----------------|------------------------|------------|-------|----------------|----------------|
| Permit No | Reporting Period | Station | Reporting Code | Parameter | Limit Type | Limit | Reported Value | Violation Date |
| 2PR00083*DD | March 2012 | 001 | 00530 | Total Suspended Solids | 30D Conc | 12.0 | 17. | 3/1/2012 |
| 2PR00083*DD | August 2012 | 001 | 00530 | Total Suspended Solids | 30D Conc | 12.0 | 30. | 8/1/2012 |
| 2PR00083*DD | August 2012 | 001 | 00530 | Total Suspended Solids | 7D Conc | 18.0 | 30. | 8/22/2012 |
| 2PR00083*DD | August 2012 | 001 | 00610 | Nitrogen, Ammonia (NH3 | 30D Conc | 2.0 | 14.5 | 8/1/2012 |
| 2PR00083*DD | August 2012 | 001 | 00610 | Nitrogen, Ammonia (NH3 | 7D Conc | 3.0 | 14.5 | 8/22/2012 |
| 2PR00083*DD | March 2013 | 001 | 00300 | Dissolved Oxygen | 1D Conc | 5.0 | 3.18 | 3/26/2013 |
| 2PR00083*DD | March 2013 | 001 | 80082 | CBOD 5 day | 30D Conc | 10.0 | 16. | 3/1/2013 |
| 2PR00083*DD | March 2013 | 001 | 80082 | CBOD 5 day | 7D Conc | 15.0 | 16. | 3/15/2013 |

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

NPDES Permit No. 2PR00083

Facility Name Village Pump Expiration Date 11-30-15
 Facility Location Lakeshore / Downtown Date 6-20-13 Time 1²⁰ am/pm
 City Kelleys Island County Erie Township _____
 Name of Owner Gary Finger Owner Phone (419) 746-2241
 Person Contacted Gary Operator of Record Bluffton Aeration
 Flow Design 14,000 GPD WWTP Classification: A or I
 Trib. Pop. Pump/Bag the Moon (actual - estimated) Weather at time of inspection: Temp 80° Clear
 OEPA Personnel _____ 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 | <u>Light Solids</u> | <u>Musty</u> | <u>Grey</u> |
| 3 | Serious | | | |
| 4 | Extreme | <u>Heavy Solids</u> | <u>Septic</u> | <u>Black</u> |

2. Effect of Effluent on Receiving Stream - Name: L. Erie via storm sewer

| | | | | | | | |
|-------------------------------------|------|--------------------------|------|--------------------------|----------|--------------------------|---------|
| <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: 1/12 to 6/13

Periodic Violations Y N Parameters: TSS, CBOD5, Ammonia, D.O.

Chronic Violations _____

5. ✓ O & M logbook kept and available on site: Location Container beneath blower

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: Pump

| Process | # Units | Unit | If Needed - Description and Comments |
|---------------------|---------|-----------------------------|---|
| Preliminary | 2 | Trash Trap | Pumping Frequency |
| | 2 | Grease Trap | Pumping Frequency |
| | | Bar Screen | |
| | | Comminutor | |
| | 1 | Flow Equalization | IN |
| Aeration Equipment | | Plant Timer ___Y___N | Cycle Time: |
| | 2 | Motor / Blower Unit | new unit 2012 |
| Secondary Treatment | 2 | Aeration Tank | Color: Brown Adequate Aeration Y / N |
| Final Settling | 1 | Clarifier | Good Settling |
| | 2 | Sludge Return | In / Out |
| | 2 | Surface Skimmer | In / Out |
| | | Fixed Media Clarifier | |
| Tertiary Treatment | 2 | Surface Sand Filter | Well Kept |
| | | Polishing Pond | |
| | | Other | |
| Disinfection | 2 | Contact Tank / Dechlor Tank | Solids in CT ² tank |
| | 1 | Chlorine Tube Feeder | |
| | 1 | Dechlorination Tube Feeder | |
| | | Ultraviolet (UV) | |
| Flow Metering | | Elapsed Pump Time | |
| | | Recorder (continuous total) | |
| Pumps | | Raw Wastewater (type) | |
| | | Sand Filter Effluent Dosing | |
| Sludge Handling | 1 | Aerated Storage Tank | IN |
| | 2 | Sludge Drying Bed | |
| Sludge Disposal | | Municipal PDTW | |
| | | Landfill | |
| | | Land Application | |
| Advanced Treatment | ✓ | Post Aeration | OUT Needs Repaired |
| | | Spray Irrigation | |
| | | Other | |