



State of Ohio Environmental Protection Agency

STREET ADDRESS:

Lazarus Government Center  
50 W. Town St., Suite 700  
Columbus, Ohio 43215

TELE: (614) 644-3020 FAX: (614) 644-3184  
www.epa.ohio.gov

MAILING ADDRESS:

P.O. Box 1049  
Columbus, OH 43216-1049

RE: Wayne County  
Chippewa Golf Corp.  
Transient Noncommunity Water System  
PWSID#: OH8534012

Mr. Kevin Larizza, President  
Chippewa Golf Corp.  
12147 Shank Road  
Doylestown, OH 44230

**Hand Delivery**

Dear Mr. Larizza:

Chippewa Golf Corporation public water system (PWS) has violated Ohio's safe drinking water law. Specifically, the PWS exceeded the maximum contaminant level (MCL) for total coliform bacteria, failed to monitor for total coliform bacteria, failed to monitor with a set of four repeat total coliform bacteria samples within twenty-four hours of being notified of a positive result, failed to monitor with five routine total coliform bacteria samples during the month following a total coliform bacteria positive sample, failed to monitor for nitrate, and failed to issue public notification in accordance with Ohio Administrative Code (OAC) Rules 3745-81-14(B), 3745-81-21(A)(2)(a), 3745-81-21(B)(1), 3745-81-21(B)(7), 3745-81-23(B) and 3745-81-32, respectively.

**Owners or operators of public water systems that fail to comply with Ohio's safe drinking water laws and regulations are subject to civil penalties of up to \$25,000 per day per violation under Ohio Revised Code Section 6109.33.**

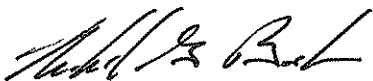
To resolve your drinking water violations and avoid possible legal action that could include civil penalties, it is agreed that Chippewa Golf Corporation will:

1. Monitor for total coliform bacteria with a minimum of one routine sample per quarter from the distribution system during the quarters that Chippewa Golf Corporation is open and perform any required repeat monitoring, in accordance with OAC Rule 3745-81-21. Sampling will be conducted in accordance with a written sample siting plan.
2. Monitor for nitrate by October 31, 2010 and comply with the monitoring and reporting requirements in accordance with the 2010 and future contaminant monitoring schedules.

Ted Strickland, Governor  
Lee Fisher, Lieutenant Governor  
Chris Korleski, Director

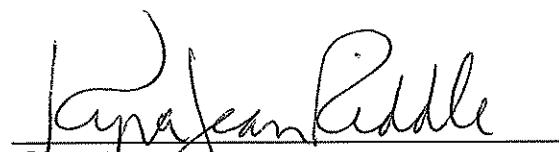
3. Within fourteen (14) days of the effective date of this agreement, post public notice for past monitoring violations. Posting must remain up for no less than seven (7) days. Send a copy of the public notice and completed verification form to Ohio Environmental Protection Agency (EPA), Division of Drinking and Ground Waters, P.O. Box 1049, Columbus, Ohio 43216-1049, Attn: Kenneth Baughman.
4. Investigate possible causes of total coliform bacteria positive samples and, within sixty (60) days from the effective date of this agreement, submit a report with your findings and proposed action plan to remedy these positive samples to Ohio Environmental Protection Agency (EPA), Northeast District Office, Division of Drinking and Ground Waters, 2110 E. Aurora Road, Twinsburg, Ohio 44087, Attn: Dave Maschak.
5. Within thirty (30) days of approval of action plan (item # 4) from Ohio EPA, implement plan and comply with the MCL requirements for total coliform bacteria, in accordance with OAC Rule 3745-81-14.

Sincerely,



Michael G. Baker, Chief  
Division of Drinking and Ground Waters

If it is your intent to comply with the safe drinking water laws and regulations in the manner specified, please sign this document and return it to the attention of Ken Baughman at Ohio EPA, DDAGW, Lazarus Government Center, P.O. Box 1049, Columbus, Ohio 43216-1049, within fourteen (14) days. Your signature is not considered an admission of guilt, only an indication of your intention to address the violations noted. Ohio EPA reserves its right to seek civil penalties pursuant to Revised Code 6109.33 for the violations described in this letter. If you have any questions concerning this letter, please call Ken Baughman at (614) 644-2752.

  
\_\_\_\_\_  
Signature  
KYRA JEAN RIDDLE  
\_\_\_\_\_  
Printed Name

10/20/10  
\_\_\_\_\_  
Date  
SEC/TREAS  
\_\_\_\_\_  
Title of Responsible Official