



Catherine B. Templeton, Director

*Promoting and protecting the health of the public and the environment*

May 06, 2014

**CERTIFIED MAIL 91 7108 2133 3939 6231 2315**

Patrick C. Flynn, Regional Director  
CWS/I-20 Regional  
200 Weathersfield Ave.  
Altamonte Springs, Florida 32714-4027

Re: Notice of Violation 154519  
CWS/I-20 Regional  
NPDES Permit # SC0035564  
Lexington County

Dear Mr. Flynn:

A review of the discharge monitoring reports (DMRs) submitted to the Department for the December 2013 through February 2014 monitoring period has revealed the following violations:

PIPE #	PARAMETER	DATE	LIMIT	DMR	AVG/MAX
001	00310 BOD - 5 DAY	02/28/2014	394	439	LQMX
001	00310 BOD - 5 DAY	12/31/2013	45	50.0	LCMX

You are hereby notified that failure to comply with the effluent limits of the NPDES Permit is a violation of the Pollution Control Act, S.C. Code Ann. 48-1-110(d) (2008) and Water Pollution Control Permits, 3 S.C. Code Ann. Regs. 61-9.122.41(a) (2011). The violations make CWS/I-20 Regional subject to further enforcement action, which may include assessment of civil penalties as set forth in the Pollution Control Act, S.C. Code Ann. 48-1-330 (2008).

Since explanations for the violations cited were submitted in comments on the DMRs, a written response to this Notice of Violation is not required at this time. These explanations, however, will not relieve CWS/I-20 Regional of responsibility for the violations cited.

If you have any questions concerning this notice, you may call me at 803-898-4262. I will be glad to assist you.

Sincerely,

Jaime C Teraoka  
Environmental Quality Manager  
Water Pollution Enforcement  
Bureau of Water

cc: Columbia EQC Office

MONITORING PERIOD  
 FROM 13 12 01 TO 13 12 31

PARAMETER (32-37)

00300 LAB ID: 32015  
 Dissolved Oxygen  
 MLOC = 1

00310 LAB ID: 32571  
 BOD - 5 Day  
 (20 Degrees C)  
 MLOC = 1

00400 LAB ID: 32015  
 pH  
 Standard Units  
 MLOC = 1

00530 LAB ID: 32571  
 Total Suspended  
 Solids (TSS)  
 MLOC = 1

00610 LAB ID: 00000  
 Ammonia - Nitrogen  
 Total as N  
 MLOC=1 NNNYYYYYYN

00610 LAB ID: 32571  
 Ammonia - Nitrogen  
 Total as N  
 MLOC=1 YNNNNNNNNYY

50050 LAB ID: 32015  
 Flow in Conduit or  
 thru Treatment Plant  
 MLOC = 1

PARAMETER (32-37)	(3 Card Only) (46-53)		Quantity or (54-61)		Loading Units	(4 Card Only) (38-45)		Quantity or (46-53) Concentration (54-61)		NO. EX (62-68)	Frequency of analysis (64-68)	Sample Type (69-70)
	Average	Maximum	Average	Maximum		Minimum	Average	Maximum	Unit			
00300 LAB ID: 32015 Dissolved Oxygen MLOC = 1	95.3	131.7	4.3	*****	*****	*****	*****	*****	*****	0	01/01	GR
00310 LAB ID: 32571 BOD - 5 Day (20 Degrees C) MLOC = 1	200	300	Inst. Min	*****	*****	*****	*****	*****	*****	1	01/07	24
00400 LAB ID: 32015 pH Standard Units MLOC = 1	*****	*****	7.0	*****	LBS/DAY	*****	*****	*****	*****	0	01/01	GR
00530 LAB ID: 32571 Total Suspended Solids (TSS) MLOC = 1	47.8	53.8	6.0	*****	*****	*****	*****	*****	*****	0	01/07	24
00610 LAB ID: 00000 Ammonia - Nitrogen Total as N MLOC=1 NNNYYYYYYN	600	900	*****	*****	LBS/DAY	*****	*****	*****	*****	0	01/07	24
00610 LAB ID: 32571 Ammonia - Nitrogen Total as N MLOC=1 YNNNNNNNNYY	*****	*****	*****	*****	*****	*****	*****	*****	*****	0	01/30	24
50050 LAB ID: 32015 Flow in Conduit or thru Treatment Plant MLOC = 1	0.8	0.8	*****	*****	*****	*****	*****	*****	*****	0	01/01	CN
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	MO AVG		MO AVG	WKLY AVG	MGD	*****		*****		TELEPHONE		
PARTICK C. FLYNN	0.8		0.8	0.8	0.8	*****		*****		803/796-2313		
REGIONAL DIRECTOR	0.8		0.8	0.8	0.8	*****		*****		AREA CODE NUMBER		
TYPED OR PRINTED	0.8		0.8	0.8	0.8	*****		*****		YEAR MO. DAY		
COMMENT AND EXPLANATION OF ANY VIOLATIONS	0.8		0.8	0.8	0.8	*****		*****		14 01 27		
First BOD of month above max, monthly avg satisfactory. No backup sample obtained due to 6 day delay in sample analysis.	0.8		0.8	0.8	0.8	*****		*****		803/796-2313		
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT											DATE	
<i>Robert Flynn</i>											14 01 27	

PERMITTEE NAME/ADDRESS:  
 CWS/I-20 Regional  
 Address: P.O. Box 4509  
 West Columbia, SC 29171

FACILITY: CWS/I-20 Regional  
 Location: at Laurel Meadows SD off Leaphart Rd.

WATER POLLUTION CONTROL  
 63 CM INTERIM LIMITS  
 DMR VALID: 01/01/1995 - 09/30/1999  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	(3 Card Only) (46-53)			Loading Units	(4 Card Only) (54-61)			Quantity or Concentration (54-61)			NO. EX (62-63)	Frequency of analysis (64-66)	Sample Type (69-70)
	Average	Maximum	Minimum		Average	Maximum	Minimum	Unit					
00300 LAB ID: 32015 Dissolved Oxygen	*****	*****	4.5	*****	*****	*****	*****	*****	*****	0	01/01	GR	
MLOC = 1	*****	*****	2.0	*****	*****	*****	*****	*****	*****		01/01	GR	
00310 LAB ID: 32571 BOD - 5 Day (20 Degrees C)	170	439	Inst. Min	*****	*****	*****	*****	*****	*****	1	01/07	24	
MLOC = 1	200	300	*****	*****	*****	*****	*****	*****	*****		01/07	24	
00400 LAB ID: 32015 pH	MO AVG	WKL Y AVG	*****	*****	*****	*****	*****	*****	*****	0	01/01	GR	
Standard Units	*****	*****	7.0	*****	*****	*****	*****	*****	*****		01/01	GR	
MLOC = 1	*****	*****	6.0	*****	*****	*****	*****	*****	*****		01/01	GR	
00530 LAB ID: 32571 Total Suspended Solids (TSS)	95.7	190	MINIMUM	*****	*****	*****	*****	*****	*****	0	01/07	24	
MLOC = 1	600	900	*****	*****	*****	*****	*****	*****	*****		01/07	24	
00610 LAB ID: 00000 Ammonia - Nitrogen	MO AVG	WKL Y AVG	*****	*****	*****	*****	*****	*****	*****		01/30	24	
Total as N	*****	*****	*****	*****	*****	*****	*****	*****	*****		01/30	24	
MLOC=1 NNYYYYYYYN	*****	*****	*****	*****	*****	*****	*****	*****	*****	0	01/30	24	
00610 LAB ID: 32571 Ammonia - Nitrogen	*****	*****	*****	*****	*****	*****	*****	*****	*****		01/30	24	
Total as N	*****	*****	*****	*****	*****	*****	*****	*****	*****		01/30	24	
MLOC=1 YNNNNNNNNYY	*****	*****	*****	*****	*****	*****	*****	*****	*****	0	01/30	24	
50050 LAB ID: 32015 Flow in Conduit or thru Treatment Plant	0.74	0.80	*****	*****	*****	*****	*****	*****	*****	0	01/01	CN	
MLOC = 1	0.8	0.8	*****	*****	*****	*****	*****	*****	*****		01/01	CN	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH THE SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.			*****			*****			*****			
BOB GILROY	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER			*****			*****			*****			
VICE PRESIDENT OF OPERATIONS	OFFICER OR AUTHORIZED AGENT			*****			*****			*****			
TYPED OR PRINTED	TELEPHONE			*****			*****			*****			
COMMENT AND EXPLANATION OF ANY VIOLATIONS	803/796-2313			*****			*****			*****			
BOD loading high due to extreme winter weather conditions and low temperatures caused prolonged algae kill.	AREA CODE NUMBER			*****			*****			*****			
	14 03 28			*****			*****			*****			
	YEAR MO DAY			*****			*****			*****			