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May 29, 2018

Ms. Barcy F. McNeal, Secretary
Ohio Power Siting Board
Docketing Division
180 East Broad Street, 11th Floor
Columbus, OH 43215

**Re: Case No. 13-197-EL-BGN, 16-1687-EL-BGA, and 17-1099-EL-BGA
Trishe Wind Ohio, LLC
Update to Notification of Compliance with Condition 9 of the Supplement—
State/Federal Permits**

Dear Ms. McNeal:

Trishe Wind Ohio, LLC (“Applicant”) is certified to construct a wind-powered electric generation facility in Paulding County, Ohio, in accordance with the December 16, 2013 Opinion, Order, and Certificate issued by the Ohio Power Siting Board (“OPSB”). The Certificate is subject to the 40 conditions set forth in the December 16, 2013 Order, as well as the 26 conditions set forth in the October 1, 2013 Supplement to the original application (“Supplement”).

Condition 9 of the Supplement requires the Applicant to obtain and comply with any permits or authorizations required by federal or state laws and regulations. The Applicant is providing this letter to notify the OPSB that the Applicant is submitting the Paulding County Household Sewage Treatment System Memorandum of Understanding and Statement of Special Conditions, which is attached hereto.

We are available, at your convenience, to answer any questions you may have.

Respectfully submitted,

/s/ William V. Vorys

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Enclosure
COLUMBUS 73809-1 90669v1



Paulding County
Health Department & WIC

800 East Perry Street
Paulding, Oh 45879
Phone 419-399-3921
www.pauldingcohealth.com

**HOUSEHOLD SEWAGE
TREATMENT SYSTEM
MEMORANDUM OF UNDERSTANDING**

By signing below, each homeowner understands the following terms and conditions:

I, Alex Dabenko ☒, understand that any Household Sewage Treatment System (HSTS), including the Advanced Enviro-Septic (AES) manufactured by Presby Environmental has no known life-span and there are many factors that determine the long-term performance of each HSTS. The Ohio Department of Health has approved the AES system manufactured by Presby Environmental to be installed in Ohio. The Paulding County Health Department (PCHD) has no data on success or failure rates of the recently approved AES systems due to the relatively low number of systems installed and in operation to date. The PCHD Environmental Health Division inspects, to the best of their knowledge, every type of HSTS as they are being installed to ensure compliance with current regulations in an attempt to maximize the practical life-span of the HSTS. The best way to promote long term operation of any HSTS is to perform preventative maintenance including, but not limited to the following: regular pumping of the septic tank; routine cleaning of the effluent filter; resting 25% of the trenches for 6 months, if required and switching between beds for resting, if required.

Each registered contractor installing a product manufactured by Presby Environmental, such as the AES system, must be registered with Presby Environmental as being certified to install their products, in addition to being a Registered Installer with the PCHD.

It is the view of the PCHD Environmental Health Division that the homeowner is responsible to notify any future owner of the preventative maintenance that has been performed on the HSTS and any future maintenance and/or preventative maintenance that should be completed or scheduled for the HSTS.

11874 SR-114 HAVICAND, OH 45851
Property Address/Location City & Zip Code

Township: Blue creek Section #: _____

Alex Dabenko

Print Name

Signature

5/22/2018

Date



Paulding County
Health Department & WIC

800 East Perry Street
Paulding, Oh 45879
Phone 419-399-3921
www.pauldingcohealth.com

SEWAGE (Tank(s)) PUMPING AGREEMENT

I, Alex Dabenko X, do hereby agree that as of 6 / 1 /20 18, I will pump my septic tank every five years located at BLUE CREEK Township at

11874 SR-114 HAVILAND, OH 45851 (Address). This pumping will be performed by a licensed septic tank pumper who is registered with the Paulding County Health Department. Upon completion of said pumping, I will send receipt for the pumping to the Paulding County Health Department. If I fail to submit receipt to the Paulding County Health Department, within five years from the above date, I will be sent notice of failure to pump sewage tank and legal action will ensue. Transfer of property title includes transfer of this agreement to the buyer, along with all rights and responsibilities.

Print Name: Alex Dabenko

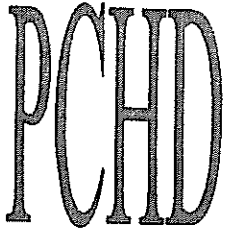
Signature [Signature] Date 5/22/18

Notary

Signed [Signature] Date 5/22/18

My commission expires on: 11/30/19

OLGA L. BRUCE
NOTARY PUBLIC OF CONNECTICUT
My Commission Expires November 30, 2019
Date: 5/21/18



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**HOUSEHOLD SEWAGE
TREATMENT SYSTEM**

STATEMENT OF SPECIAL CONDITIONS

In accordance with Paulding County Health Department (PCHD) Sewage Treatment System Regulations, I hereby acknowledge the household sewage treatment system (HSTS) being installed at the property named below is not a conventional HSTS and has special conditions that must be met.

I understand that PCHD shall not issue a HSTS installation permit unless the applicant acknowledges they have been provided with the following information:

1. The infiltrative surface (bottom) of the leaching trench of the soil absorption component (leach field) shall be installed at least 6 inches above the seasonal high water table (SHWT), also referred to as a perched seasonal high water table, and above any associated restrictive soil layer. A conventional system requires two feet of separation; the HSTS on this property will have less than two feet of separation from the SHWT.
2. Frequent monitoring of the HSTS is required and the PCHD may collect samples or observe the system at any time.
3. It is the responsibility of the property owner to disclose all information contained in this document to future owners of this property.
4. The HSTS must be designed and installed per site-specific requirements provided or approved by the PCHD.
5. For new construction, the building sewer line may need to be installed at a raised elevation if a gravity-flow system is preferred and to avoid the use of a lift station and pump. This often necessitates raising the foundation higher than normal building standards and requires a coordinated planning effort between the HSTS contractor and the foundation contractor to determine the proper elevation for a gravity-flow system.
6. Future modifications to the HSTS will be required if the system is found to be failing as designed as determined by the PCHD.

By signing below, I agree to the six (6) conditions listed above are met. In addition, I concur that I have been informed the soils on my property are not conducive to a fully-functioning conventional HSTS and I am requesting a permit for a system that may have limited time period within which it is functional due to the presence of a relatively shallow SHWT and soil characteristics present on this property. I also understand that my system is a soil-absorption based system and these systems perform more effectively when used as intended and at their designed capacity. I acknowledge receipt and understanding of the handout "Know Your Household Sewage System" and I am aware that water conservation and limited the amount of solids put into the HSTS are keys to extending the longevity of the HSTS.

11874 SR 114

Property Address/Location

Harland Ohio 45851

City & Zip Code

Alex Daburko

Print Name

[Signature]

Signature

Date : 5/22/18

This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

5/29/2018 1:39:38 PM

in

Case No(s). 13-0197-EL-BGN, 16-1687-EL-BGA, 17-1099-EL-BGA

Summary: Notification of Compliance with Condition 9 of the Supplement - State/Federal
Permits electronically filed by Mr. William V Vorys on behalf of Trishe Wind Ohio, LLC