

150 E. GAY STREET, 24^{TH} FLOOR COLUMBUS, OH 43215-3192 TELEPHONE: (614) 744-2570 FACSIMILE: (844) 670-6009 http://www.dickinsonwright.com

WILLIAM V. VORYS WVorys@dickinsonwright.com (614) 744-2936

July 18, 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 additional local county building permits for its operations and maintenance facility, including the Paulding County Health Department Water System Permit and Sewage Treatment System Installation Permit, which are attached hereto.

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

Respectfully submitted,

/s/ William V. Vorys_

William V. Vorys (0093479) Christine M.T. Pirik (0029759) Terrence O'Donnell (0074213) Dickinson Wright PLLC 150 East Gay Street, Suite 2400

Columbus, Ohio 43215 Phone: (614) 591-5461

Email: wvorys@dickinsonwright.com

cpirik@dickinsonwright.com
todonnell@dickinsonwright.com

Attorneys for Trishe Wind Ohio, LLC

Enclosure COLUMBUS 73809-1 93774v1

ARIZONA CALIFORNIA FLORIDA KENTUCKY MICHIGAN
NEVADA OHIO TENNESSEE TEXAS TORONTO WASHINGTON DC

HOUSEHOLD SEWAGE TREATMENT SYSTEM INSTALLATION PERMIT Date: 06/01/2018

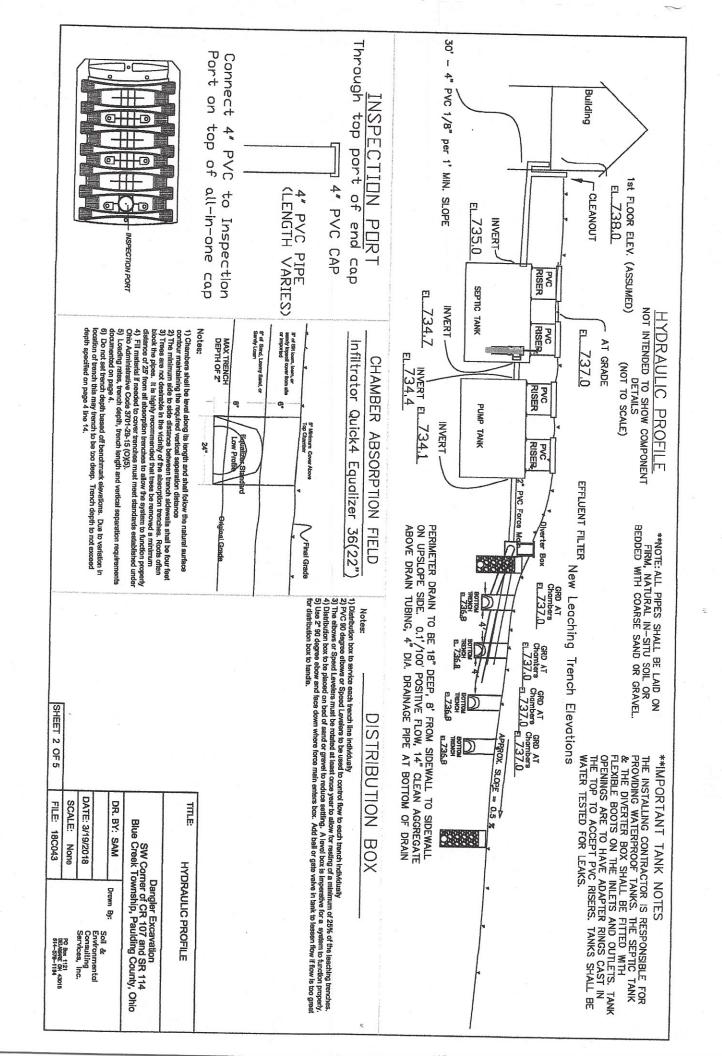
Place Audit

PAULDING COUNTY HEALTH DEPARTMENT 800 EAST PERRY STREET

Sticker Here PAULDING, OH 45879
78536
Permit No. 2018006 103 KLINGER ST
Address: PAULDING, OH 43878
IS GRANTED A PERMIT TO: (X) Install a New Household Sewage Treatment System () Install a Replacement Household Sewage Treatment System
11874 SR 114
Owned by: 3RD PHASE OF WINDMILLS Address: HAVILAND, OH 45851
Owned by: 3RD PHASE OF WINDMILES
I agree to comply with the Paulding County Board of Health regulations governing the installation of sewage systems. I further agree that I will call for an inspection and obtain approval from the Health District for this installation before it is covered with earth. I further agree that I will maintain in full force and effect a sewage disposal system bond for the above installation until the system is inspected and approved. This system by the revolked for failure to comply with the orders and regulations of the Paulding County Health Department. This permit expires one year from date of issue or Paulding County Health Department. This permit expires one year from date of issue or constitute a gurantee on the sewage system or any component of that system.
SEWAGE TANK: 1500 GALLLONS, 2-COMPARTMENT
SECONDARY TREATMENT
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DECUITED LINEAL FOOTAGE.
LIFT STATION REQUIRED: YES/NO MAX/PSHWT BED DEPTH:
PERIMETER DRAIN FLOWS TO:
SPECIAL INSTRUCTIONS FOR THIS SITE:
Joseph Kuhn, DO, Health Commissioner

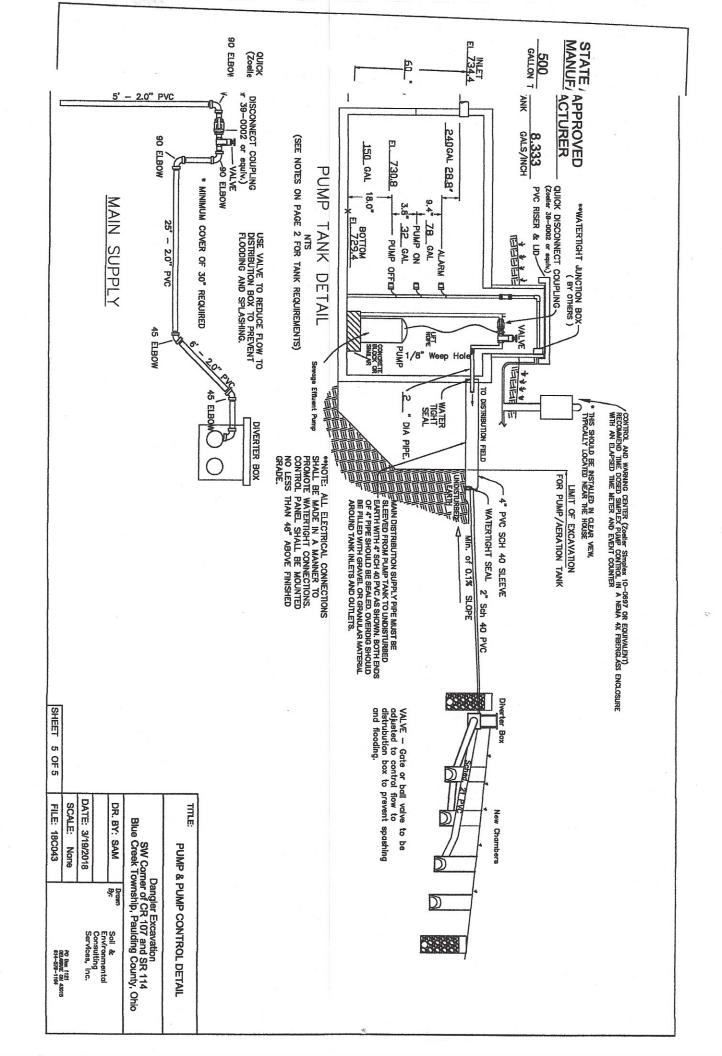
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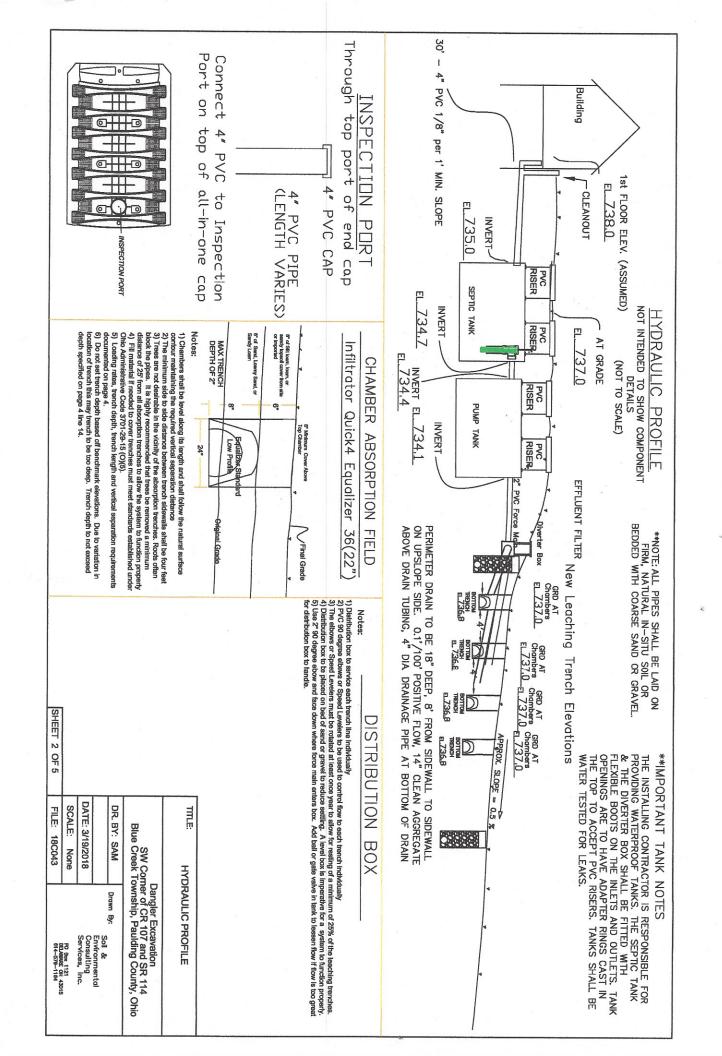
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Bedrock Restrictive Layer	Highly Permeable Material	Apparent Water Table	Perched Seasonal Water Table	Limiting Conditions					Cg 40+	2			On On			Soil Profil	Soil Profil	Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Attitude/Longitude: Method: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Test Hole #:_atitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Lot #: Test Hole #: atitude/Longitude: Method: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Phone #: Lot #: Test Hole #: Atitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Phone #: Lot #: Test Hole #: atitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Address: Phone #: Lot #: Test Hole #: Attitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Applicant Name: Address: Phone #: Lot #: Test Hole #: Attitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Applicant Name: Address: Phone #: Lot #: Test Hole #: atitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Applicant Name: Applicant Name: Address: Phone #: Lot #: Test Hole #: atitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+	Township / Sec.: arty Address/Location: Applicant Name: Address: Phone #: Lot #: Test Hole #: Atitude/Longitude: Method: Depth (inches) 0 to 8 8 to 22 22 to 40 40+
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								glacial till		38		Restrictive Layer
										>50		Bedrock
										>50	Material	Highly Permeable Material
				ed information	See attached letter and map for more detailed information	letter and map	See attached			>50	ible	Apparent Water Table
	ent.	may be pres	ce ag drainage	Surface water should be diverted around system. Subsurface ag drainage may be present.	erted around sy	r should be div	Surface wate	perched on glacial till	perc	8	Water Table	Perched Seasonal Water Table
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	fi	sbk	B	2	0	60	c		35%10YR 5/4	24 to 45	20 to 33	Btg2
	fi	sbk	m	2	0	55	c		30%10Y R5/4	9 to 24	8 to 20	Btg1
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Other Soil Features	Consistence	Type (shape)	Size	Grade	Approx. % Fragments	Approx. % Clay	Class	Depletions	Concentrations	Matrix Color	Depth (inches)	Horizon
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THE PARTY NAMED IN					10 Employees):	Bedrooms or GPD:				Address:	
					Linear / Linear	59	Shape of Slope:	-	ngler	Jay Dangler	Applicant Name:	Ą
ORCDORS .	***				0.0%		Percent Slope:	-			1	
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	``				Lake Plain	E	Landform:		reek	Blue Creek	Township / Sec.:	To
The second second					Vacant	n:	Land Use / Vegetation:	Lan	ing	rauiding	County:	





Landforms	
Upland*	
Terrace	
Flood Plain	
Lake Pain	
Beach Ridge	
*Includes glacial till	
plain and end moraine	

Position on Landform	
Depression	
Flat	
Knoll	
Crest	
Hillslope	
Footslope	

Shape of Slope	
Convex	
Concave	
Linear	
Complex	

			Horizon Nomenclature	
	Master Horizons		Horizon Suffixes	Horizon Modifiers
0	Predominantly organic matter (litter &	a	Highly decomposed organic matter	
	humus)	b	Buried genetic horizon	Numerical Prefixes: Used to denote
A	Mineral, organic matter (humus)	d	Densic layer (physically root restrictive)	lithologic discontinuities.
	accumulation, loss of Fe, Al, clay	е	Moderately decomposed organic matter	
E	Mineral, loss of Si, Fe, Al, clay, organic	g	Strong gley	7
	matter	i	Slightly decomposed organic matter	Numerical Suffixes: Used to denote
В	Subsurface accumulation of clay, Fe, Al, Si,	p	Plow layer or artificial disturbance	subdivisions within a master
	humus; sesquioxides; loss of CaCo3;	r	Weathered or soft bedrock	horizon.
	subsurface soil structure	t	Illuvial accumulation of silicate clay	
C		w	Weak color or structure within B	
	Little or no pedogenic alteration,	x	Fragipan characteristics	7
	unconsoilidated earthy material, soft bedrock			and .
R	Hard bedrock			

	Soil	Texture	
Texture Class Abbreviat	ions	Textural Class Modifiers	3
Course Sand	cos	Gravelly	GR
Sand	S	Fine Gravelly	FGR
Fine Sand	fs	Medium Gravelly	MGR
Very Fine Sand	vfs	Coarse Gravelly	CGR
Loamy Coarse Sand	lcos	Very Gravelly	VGR
Loamy Sand	ls	Extremely Gravelly	XGR
Loamy Fine Sand	lfs	Cobbly	CB
Loamy Very Fine Sand	lvfs	Very Cobbly	VCB
Coarse Sandy Loam	cosl	Extremely Cobbly	XCB
Sandy Loam	sl	Stony	ST
Fine Sandy Loam	fsl	Very Stony	VST
Very Fine Sandy Loam	vfsl	Extremely Stony	XST
Loam	1	Bouldery	BY
Silt Loam	sil	Very Bouldery	VBY
Silt	si	Extremely Bouldery	XBY
Sandy Clay Loam	scl	Channery	CN
Clay Loam	cl	Very Channery	VCN
Silty Clay Loam	sicl	Extremely Channery	XCN
Sandy Clay	sc	Flaggy	FL
Silty Clay	sic	Very Flaggy	VFL
Clay	С	Extremely Flaggy	XFL
*Estimate approximate c	lay perc	entage within 5 percent	

		Soil St	ructu	re	
Grade		Size		Type (Shape	e)
Structureless	0	Very Fine	vf	Granular	gr
Weak	1	Fine	f	Angular Blocky	abk
Moderate	2	Medium	m	Subangular Blocky	sbk
Strong	3	Coarse	co	Platy	pl
		Very Coarse	vc	Prismatic	pr
		Extr. Coarse	ec	Columnar	cpr
		Very Thin*	vn	Single Grain	sg
		Thin*	tn	Massive	m
		Thick*	tk	Cloddy	CDY
		Very Thick*	vk		

* The sizes Very Thin, Thin, Thick, and Very Thick, are used when describing platy structure only. Substitute thin for fine, and thick for coarse when describing platy structure.

Moist Consis	itence
Loose	1
Very Friable	vfr
Friable	fr
Firm	fi
Very Firm	vfi
Extremely Firm	efi

For a more detailed explanation on describing and sampling soils, please refer to the "Field Book for Describing and Sampling Soils" Schoeneberger, P.J., Wysocki, D.A., Benham, E.C., and Broderson, W.D. (editors) 2002. Field book for describing and sampling soils, version 2.0. Natural Resources Conservation Service, USDA, National Soil Survey Center, Lincoln, NE.

g/ac/a/ till
See attached letter and map for more detailed information
Surface water should be diverted around system. Subsurface ag drainage may be present.
Remarks / Risk Factors:
c 55 0 0
c 60 0 2
c 55 0 2
sic 45 0 2
Approx. Approx. % Class % Clay Fragments Grade
Texture
Estimating Soil Permeability
Job Number: 18C043 Soil Series:
Delawa
P.O. Box 1121
Soil & Environmental Consulting, Inc.
Evaluator: Steven Miller, CPSSc
Date: Tuesday, March 13, 2018
Bedrooms or GPD: 10 Employees
Shape of Slope: Linear / Linear
Percent Slope: 0.0%
Position on Landform: Flat
Landform: Lake Plain
Land Use / Vegetation: Vacant

								glacial till		38		Restrictive Layer
									2	>50		Bedrock
										>50	Material	Highly Permeable Material
				led information	See attached letter and map for more detailed information	letter and map	See attached			>50	able	Apparent Water Table
	sent.	e may be pres	system. Subsurface ag drainage may be present.	ystem. Subsurf	erted around s	Surface water should be diverted around	Surface wate	perched on glacial till	perc	8	Water Table	Perched Seasonal Water Table
		tors:	Remarks / Risk Factors:	Rema				Description	1.)	Depth to (in.)	Limiting Conditions	Limiting
	fî	В		0	0	55	o		20%10Yr 5/4	45 to 50+	33 to 38	Cg
	fī	sbk	m	2	0	60	c		35%10YR 5/4	24 to 45	20 to 33	Btg2
	fî	sbk	B	2	0	55	c		30%10Y R5/4	9 to 24	8 to 20	Btg1
	fr	ĝ	m	2	0	45	sic			0 to 9	8 ot 0	Αp
Other Soil Features	Consistence	Type (shape)	Size	Grade	Approx. % Fragments	Approx. % Clay	Class	Depletions	Concentrations	Matrix Color	Depth (inches)	Horizon
			Structure			Texture		Redoximorphic Features	Redoximorp			
								chroma)	Munsell Color (hue, value, chroma)	Munsel		
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0				SSc	Steven Miller, CPSSc		Evaluator:				Phone #:	
CENTRED PROFESSIONAL	· "	-		2018	Tuesday, March 13,		Date:				ı	
STENENT MILET	*				10 Employees		Bedrooms or GPD:	H			Address:	
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ORC Pacs					0.0%		Percent Slope:					
	` .				Flat	1:	Position on Landform:	Pos	107 & SR 114	SW Corner of CR 107 & SR 114	Property Address/Location:	Property A
	`\			9	Lake Plain		Landform:		reek	Blue Creek	Township / Sec.:	To
The state of the s					Vacant		Land Use / Vegetation:	Lanc	ing	Paulding	County:	

Landforms	
Upland*	
Теггасе	
Flood Plain	
Lake Pain	
Beach Ridge	
*Includes glacial till	
plain and end moraine	

Position on	Landform
Depression	
Flat	
Knoll	
Crest	
Hillslope	
Footslope	

Shane of Slope	
Convex	and the same
Concave	
Linear	
Complex	

			Horizon Nomenclature	
	Master Horizons		Horizon Suffixes	Horizon Modifiers
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E	Mineral, loss of Si, Fe, Al, clay, organic	g	Strong gley	
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В	Subsurface accumulation of clay, Fe, Al, Si,	p	Plow layer or artificial disturbance	subdivisions within a master
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	Soil	Texture		
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Loamy Coarse Sand	lcos	Very Gravelly	VGR	
Loamy Sand	İs	Extremely Gravelly	XGR	
Loamy Fine Sand	lfs	Cobbly	CB	
Loamy Very Fine Sand	lvfs	Very Cobbly	VCB	
Coarse Sandy Loam	cosl	Extremely Cobbly	XCB	
Sandy Loam	sl	Stony	ST	
Fine Sandy Loam	fsl	Very Stony	VST	
Very Fine Sandy Loam	vfsl	Extremely Stony	XST	
Loam	1	Bouldery	BY	
Silt Loam	sil	Very Bouldery	VBY	
Silt	si	Extremely Bouldery	XBY	
Sandy Clay Loam	scl	Channery	CN	
Clay Loam	cl	Very Channery	VCN	
Silty Clay Loam	sicl	Extremely Channery	XCN	
Sandy Clay	sc	Flaggy	FL	
Silty Clay	sic	Very Flaggy	VFL	
Clay	С	Extremely Flaggy	XFL	
*Estimate approximate of	lay perc			

Grade		Size		Type (Shape)	
Structureless		Very Fine	vf	Granular	gr
Weak	1	Fine	f	Angular Blocky	abk
Moderate	2	Medium	m	Subangular Blocky	sbk
Strong	3	Coarse	co	Platy	pl
		Very Coarse	vc	Prismatic	pr
		Extr. Coarse	ec	Columnar	cpr
		Very Thin*	vn	Single Grain	sg
		Thin*	tn	Massive	m
		Thick*	tk	Cloddy	CDY
		Very Thick*	vk		

* The sizes Very Thin, Thin, Thick, and Very Thick, are used when describing platy structure only. Substitute thin for fine, and thick for coarse when describing platy structure.

Moist Consistence		
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Friable	fi	
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"HOMEOWNER KEEPS THIS PAGE"

Paulding County General Health District

General Sewage Disposal System Requirements

- Avoid compaction of soil. Do not allow vehicular traffic access to septic system absorption area. Anticipate and plan for the weather--it is preferable to complete the system when the soil is dry.
- Do not scalp or add "fill" to the septic system absorption area.
- Only install systems when the soil is dry. Check soil moisture to a depth of 7"-8" by rolling some soil between your hands. If the soil rolls into a wire and will maintain its shape, it is too wet to install the system.
- Meet or exceed all applicable separation distance requirements
- Always use 4 inch solid schedule 40 pipe from the house to the septic tank and from the septic tank to the
 absorption system (beds, trenches). The pipe shall conform to one of the following standards: Plastic- ASTMD2661,
 ASTMD2751, orASTMF628; Polyvinyl Chloride (PVC) plastic (Type DWV, SDR 26,35,or 41, PS50 or 100)- ASTMD2665,
 ASTMD2949, ASTMD3034, ASTMF891, CSA CAN/CSA –B182.2, CSA CAN/CSA-B182.4.
- In the absorption system a 4 inch schedule 33 or 35 pipe may be used. Perforated pipe shall conform to one of the following standards: Polyethylene (PE) plastic- ASTMF405, ASTMF810-405, or Polyvinyl Chloride (PVC) plastic-ASTMD2729.
- Do not use 90-degree angled piping in the sewer line from the house to the septic tank. The sewer line to the septic tank must continually fall at least 1/8 of an inch per foot, but less than 1/4 of an inch per foot. Sewer lines ran under driveways must be placed within another pipe to protect the sewer lines.
- Septic tank and when required, lift station, must be set level. Fill tanks with water to prevent them from floating.
 Septic tank inlet and outlet must be baffled. Septic tank must be a two compartment tank. Access openings must be located above the inlet and outlet baffles. At least two riser rings must be brought up to grade and fitted with secured or weighted covers (minimum 59 pounds) for all openings twelve inches or greater.
- If an outlet can not be located that can be gravity feed a lift station is required. The lift station tank must be a
 minimum of 150 gallons, watertight and must be equipped with a locking lid. A sewage effluent pump with a dual
 float device is required-No household sump pumps, the pump must be wired for quick disconnect inside the tank,
 the wiring from the house must be encased in electrical conduit.
- Stone size must be ¾ inches to 1 ½ inches (ODOT #6). Stone must be washed and clean. Stone depth must be at least six inches under perforated pipe and extending at least two inches above the pipe for a total stone depth of at least twelve inches. Cover stone with two inches of straw/hay or use filter fabric before backfilling.
- Foundation/downspout drains must **NOT** be connected to the septic system and must be diverted away from the absorption area.
- Final uniform cover must be of a clean fill material. Final depth of cover will be determined by the type of system required.
- Entire system must be left uncovered for inspection- including septic tank and all piping. Lids must be off of the septic tank.
- A suitable area shall be available to provide for the future relocation and replacement of the septic system.
 (Rev. 4/05)

"HOMEOWNER KEEPS THIS PAGE"



Ohio Department of Health Bureau of Environmental Health

Know Your Household Sewage System

"To improve and protect the health of all Ohioans"

246 North High Street Columbus, Ohio 43215

614-466-1390

www.odh.ohio.gov

- Learn about your household sewage system. Obtain and keep a sketch of the system with a detailed record of repairs, pumping, inspections, and other maintenance activities.
- Have your household sewage system inspected and maintained regularly.
- Keep your septic tank cover accessible for inspection and cleaning. Install risers if necessary.
- Call a registered sewage system contractor or your local health department if you experience problems or if there are any signs of system failure.
- Always obtain required permits when making or allowing repairs to your system.
- Divert sources of water, like roof drains, footer drains, and sump pumps away from the system. Excess water saturates the soil leading to system failure.
- Keep a good vegetative cover over the system in order to help remove excess water and prevent erosion.
- Do Not allow anyone to drive or park anything over any part of the septic system.
- Never dig or build anything over your system. This includes hard surfaces such as concrete or asphalt.
- Conserve water to avoid overloading the system. Promptly repair leaky faucets or toilets, and install water saving devices.
- Don't use septic tank additives. These products usually do not help and can be harmful to the operation of your system.
- Eliminate or reduce the use of a garbage disposal. The additional waste produced by a garbage disposal will lead to extra maintenance requirements.
- Don't use you toilet or disposal as a trash can. Coffee grounds, dental floss, disposable diapers, kitty litter, sanitary napkins, tampons, cigarette butts, condoms, fat, grease, oil, automotive fluids and paper towels should never be disposed of in the system.
- Never pour chemicals or cleaners such as paints, varnishes, thinners and pesticides down the drain/toilet. Harsh chemicals can kill beneficial bacteria that treat wastewater.
- Never climb down into a septic tank. The natural treatment process in septic tanks produces toxic gases that can kill.

Protect Your Investment

Paulding County Health Department & WIC



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

Toll Free WIC Dept. 1-866-399-3921 419-399-2621

Fax:

419-399-3494

Email:paulcohd@odh.ohio.gov

May 15, 2018

Permit: 2018-008 APPROVED

Layman Well Drilling Dennis Layman 10879 SR 500 Paulding, OH 45879

RE: Private Water System: 11874 SR 114

Dear Layman Well Drilling,

Enclosed is your copy of the Paulding County Health Department Private Water System permit for Terry Baker:

PERMIT #2018-008

11874 RD 114 Haviland, OH 45851, Blue Creek Township, Section #23

The permit is valid for one year from the approval date (05/14/2018 thru 05/14/2019).

Reminder:

<u>WELL LOG</u> must be forwarded to our office within 30 days of the well being drilled and/or altered. <u>SEALING REPORT</u> must be forwarded to our office within 30 days of the well being sealed. <u>NOTIFICATION</u> must be made to the Health Department of Completion Status within 10 days. <u>Private Water System Well Completion form</u>. Shall be completed and submit within 30 days of Notification.

If I can be of any further assistance, please feel free to contact the health department at 419-399-3921. Thank you for your cooperation.

Sincerely,

Paulding Co.

351.00

5tate Fee #T-02155.00

Receipt #

2018-008

OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.

Complete form as directed. Form in	nay be completed on the computer then pri	nted or printed a	and complete	ed by pen or typewriter.
Type of Work:	ON, THAT APPLY TO THE PERMIT REQUE			
New Construction Replace	ncy Alteration ion to a PWS Multiple dwelling units* (includes MHPs / Campgrounds Building*	Well Pond* Hauled Wat Continuous Other	Cistern*	System being Sealed: Well Cistern Hauled Water Tank Pond Spring
Public Water Supply is being conne		thermal system e	xists or is plan	nned for this property
dwelling units, and buildings.	serve other than a one, two, or three family do the Ohio Administrative Code. See site pl	welling, detailed p an addendums fo	olans must als or ponds, sprir	o be submitted in ngs, cisterns, multiple
COMPLETE THE FOLLOWING INFO	RMATION			
Property Street Address or Location	(include City and Zip Code)	Parcel # (option	nal)	Township/City/Village
11874 SR 144 Haviland Oh 45				Blue Creek
Owner's Name Starwood Energy Group	Owner Mailing Address (Street #, Street, C 5 Greenwich Office Park Floor 2r	city, State, Zip Co	de)	Phone #
Global LLC Check this box if the Owner and An	Greenwich, CT 06831			203-422-7700
Applicant's Name	plicant Information is the same. If checked do	not fill in applicar	nt information.	
Brian Martin	Applicant Mailing Address (Street #, Stree			Phone #
MBA Energy & Industrial	33126 Magnolia Circle Ste. 200 Mag	inolia, TX 773	54	832-299-4844
All persons, including homeowners, performing work on a private water system must be registered with the Ohio Department of Health as required in Ohio Administrative Code Rule 3701-28-18(A). If the contractor information is not known at time of application, it must be provided prior to the commencement of work as per the requirements in Ohio Administrative Code Rule Private Water Systems Contractor ODH Registration # Phone #				
Layman Drilling LLC				260-494-7741
Private Water Systems Contractor	MAY 1 4 2018	ODH Registra	ation#	Phone #
Private Water Systems Contractor		ODH Registra	ation#	Phone #
Notice to Applicant: This application will not be processed until the form bears the signature of the applicant and the date (below). This application must be accompanied by the site plan form(s) and the appropriate fee. This application is not approved until it has the date and signature of a registered sanitarian or sanitarian-in training employed by the local board of health.				
I, the undersigned, hereby agree to install, construct, develop or alter the private water system named in this permit application in accordance with the attached site plan and all applicable rules governed by Chapter 3701-28 of the Ohio Administrative Contact.				
premises of the private system named in this permit at any reasonable time prior to, during, or after completion of the work specified in this permit for the purpose of determining compliance with Chapter 3701-28 of the Ohio Administrative Code.				
I, the undersigned, agree to contact the local health department upon completion of the private water system in order for the local health department to perform the final inspection and collect the water sample.				
I, the undersigned, understand that this permit will expire one (1) year from the date approved and all work must be completed by that				
APPLICANT'S SIGNATURE				
Brian Martin			DATE OF SIG	
			3/23/2	018

County / City	
Paulding	



OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM SITE PLAN

Property Address	
11874 SR 144 Haviland, OH 45851	
Owner / Applicant Starwood Energy Group Global LLC MBA Energy & Industri	Prepared by
MBA Energy & Industri	^{al} Brian Martin
A character and the form of the control of the cont	

A site plan addendum form will be required in addition to this site plan form if this private water system permit request is being obtained for:

2) any private water system servicing greater than a three family dwelling, or a building; 2) any private water system servicing a pond, cistern, spring, or private water system located in an area of known in the private water system is a pond.	own flowing well conditions,
SITE PLAN DRAWING Check this box if the drawing is supplied on a separate sheet. -Clearly indicate the location of all proposed and existing private water systems. -Clearly indicate all possible sources of contamination from the list to the right, including but not limited to the house, the sewage system and the driveway. -Clearly indicate the north direction, property lines, roads and road intersections.	LIST OF POTENTIAL CONTAMINATION SOURCES. Write the distance from the proposed private water system location to the source listed below, if applicable. The minimum distance requirements are indicated in () to the right of the source. All distances must be specific to the private water system.
Sephic Area.	34 ft House, Building (10ft) It Property lines (10 ft) It Existing or property sealed water wells (10 ft) It Road right-of-ways and road utility easements (10 ft) It Public Roadways (25 ft) 47 ft Driveway or parking lot (5 ft) It Sewar - watertight (10 ft) It Sewage tanks, sewage absorption fields and watertight vault privies (50 ft) It Leaching privies, leaching prits, dry wells, or drainage wells (100 ft) It Unregulated constructed wells or boreholes (50ft) It Geothermal systems (50 ft) It Streams, lakes, ponds (25 ft) It Storm water and other ditches with intermittent water flow (15 ft) It Natural gas or propane tanks (20 ft) It Fuel oil, diesel, chemical, gasoline and other petroleum liquid tanks (50 ft) It Oil and gas wells (100 ft)
Comments	ft Landfills (1000 ft) ft Construction and demolition debris facility (500 ft) ft Agricultural manure ponds,
	lagoons, or piles (50-300 ft) ft Other: Please refer to OAC 3701-28-07 for additional required distances.



2019 - 008

HEALTH DEPARTMENT USE ONLY

This permit is not valid without the sanitarian signature, approval date, and audit number.

Is a variance being requested pr	ior to the permit be variance section on the	ing issued? e Administrative Summary.	
APPLICATION APPROVED BY (RS of	r SIT Only)	Permit expires one (1) year from this date.	
PERMIT EXTENSION Approved By	Date Approved	Date Extension Expires	
See comments on the Administrative	e Summary		

APPLICATION INSTRUCTIONS

- 1. This is a two part form: APPLICATION and SITE PLAN
- 2. The form may be completed:
 - a. By computer, then printing; or
 - b. By printing the blank document, and filling all information with a typewriter or pen;
- 3. Contact the Local Health Department for the following information:
 - a. Fee information;
 - b. Site Plan completion information (some local health districts require staff to complete site plans);
 - c. Rule information.
 - d. Registered private water system contractor information.
 - i. A complete list of registered private water system contractors is available on the Ohio Department of Health website at http://www.odh.ohio.gov/odhPrograms/eh/water/water1.aspx.
- 4. The applicant must sign and date the application prior to submitting to the Local Health District.
- 5. The applicable <u>FEES</u> must accompany all applications when submitting to the Local Health District. Applications will not be processed until all fees have been received by the Local Health District.
- 6. The Local Health District will review the application and site plan and notify you as to the application's status.
- 7. Contact the Local Health District if you do not receive information about the application status within fifteen (15) business days of submitting the application.



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

Date

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

has no known life-span and there are many factors HSTS. The Ohio Department of Health has approve Environmental to be installed in Ohio. The Paulding success or failure rates of the recently approved AE systems installed and in operation to date. The PC best of their knowledge, every type of HSTS as the current regulations in an attempt to maximize the promote long term operation of any HSTS is to perfilmited to the following: regular pumping of the seption 25% of the trenches for 6 months, if required and systems.	that determine the long-term performance of each red the AES system manufactured by Presby g County Health Department (PCHD) has no data on ES systems due to the relatively low number of HD Environmental Health Division inspects, to the y are being installed to ensure compliance with ractical life-span of the HSTS. The best way to orm preventative maintenance including, but not tic tank; routine cleaning of the effluent filter; resting witching between beds for resting, if required.
Each registered contractor installing a product manusystem, must be registered with Presby Environmer addition to being a Registered Installed with the PC	ufactured by Presby Environmental, such as the AES stal as being certified to install their products, in HD.
maintenance and/or preventative maintenance that	should be completed or scheduled for the HSTS.
11874 SR-114	City & Zip Code
Property Address/Location	City & Zip Code
Township: Blue creek	Section #:
Alex Dabur 6	5/22/19

Signature

Print Name



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 Daber 10 X , do hereby agree that as of 6 1 1 120 18 , I will pump my septic
tank every five years located at Rue 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 Dalarko
Signature Date Date
Notary
Signed Date 5/22/18 OLGA L. BRUCE NO FARY PUBLIC OF CONNECTION
My commission expires on: 130 19 Date: 57918



Paulding County Health Department & WIC

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

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:

- 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.
- 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 conductive 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 58 114	Hariland Chis 45851
Property Address/Location	City & Zip Code
Mex Daberto	X Z Z
Print Name	Signature
D-4- 5) -2/10	

Date: 5 72 18

This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

7/18/2018 8:13:05 AM

in

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

Summary: Notification - Update to 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